

# Medical Summary

Name: *Elzabetha Inac* Date of Birth: *24/3/1964* Customer ID:  
 Ref Doctor: Sex: Date:

Present Complaints: *nil*  
 Past Illness: *K/O RA - on Rx (Rituximab 1gm - 3 doses taken),  
 Anemia - on Rx*

Major medical illness: Accident: /-  
 Surgery: - Others: /-

Personal history:  
 Smoking: /- Diet: /-  
 Tobacco: /- Exercise: /-  
 Alcohol: /- Personality: /-  
 Menstrual history: *menopausal* Marital status: *wid*  
 Obstetric history: *4* Children: *2*

Family history:  
 Tuberculosis: /- Hypertension: -  
 Diabetes: /- Heart Disease: *father, mother*  
 Asthma: - Others: -  
 Drug history: - Allergy: - Present Medications: -

General Examination:  
 Height: Weight: BP:  
 Conjunctiva: *(A)* Lymphnodes: Eyes: *(A)*  
 Oedema: - Nails: *(A)* Genitals: -  
 Tongue: *(A)* Others: *no new deficits*  
 Throat: *(A)* Skin: *(A)*

Eye Screening:

Vision	R/E	L/E
Distant Vision	<i>6/6</i>	<i>6/6</i>
Near Vision	<i>M6</i>	<i>M6 E spec.</i>
Colour Vision	<i>(A)</i>	<i>(A)</i>

**Systemic Examination:**

Cardiovascular system: S<sub>1</sub>S<sub>2</sub> (+), no murmur  
Peripheral Pulsations: @ RMR  
Heart: S<sub>1</sub>S<sub>2</sub> (+)  
Respiratory System: B/L normal

**Gastrointestinal System:** soft, non-tender, ? splenomegaly.

Higher Function: J  
Cranial Nerves: J  
Motor System: J

Sensory system: J  
Superficial Reflexes: J  
Deep Reflexes: J

**Rectal Examination:**

Others: -

**Impression:**

USG - fatty liver ; splenomegaly (12.1 cms)  
RA - on regular therapy.  
Rheumatoid arthritis  
? Hypothyroidism  
(TSH - 6.44)

**Diet:**

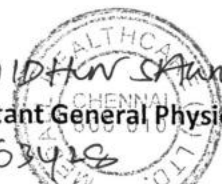
**Medication:**

**Advice & Follow up:**

To follow up with the primary physician  
for Rheumatoid arthritis & hypothyroidism  
To see a Hematologist for splenomegaly &  
thrombocytosis (plt - 621)

Dr. MITHAN SANKARANARAYAN  
Consultant General Physician

16/04/20



Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

Investigation	Observed Value	Unit	Biological Reference Interval
---------------	----------------	------	-------------------------------

BLOOD GROUPING AND Rh TYPING

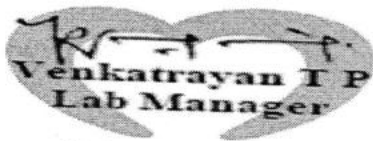
'B' 'Positive'

(EDTA Blood/Agglutination)

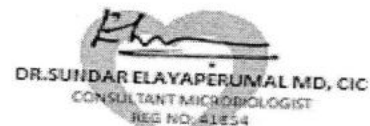
INTERPRETATION: Reconfirm the Blood group and Typing before blood transfusion

**Complete Blood Count With - ESR**

Haemoglobin (EDTA Blood/Spectrophotometry)	12.6	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/Derived from Impedance)	37.5	%	37 - 47
RBC Count (EDTA Blood/Impedance Variation)	4.50	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood/Derived from Impedance)	83.3	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/Derived from Impedance)	27.9	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/Derived from Impedance)	33.5	g/dL	32 - 36
RDW-CV (EDTA Blood/Derived from Impedance)	20.6	%	11.5 - 16.0
RDW-SD (EDTA Blood/Derived from Impedance)	60.06	fL	39 - 46
Total Leukocyte Count (TC) (EDTA Blood/Impedance Variation)	6600	cells/cu.mm	4000 - 11000
Neutrophils (EDTA Blood/Impedance Variation & Flow Cytometry)	61.4	%	40 - 75
Lymphocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	28.5	%	20 - 45



VERIFIED BY



APPROVED BY

The results pertain to sample tested.

Page 1 of 9

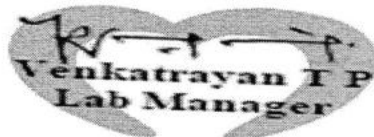
Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



**Name** : Ms. ELIZABETH ISSAC  
**PID No.** : KLP455202  
**SID No.** : 80059131  
**Age / Sex** : 58 Year(s) / Female  
**Type** : OP  
**Ref. Dr** : MediWheel

**Register On** : 11/03/2023 8:10 AM  
**Collection On** : 11/03/2023 10:06 AM  
**Report On** : 11/03/2023 9:10 PM  
**Printed On** : 11/03/2023 9:31 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Eosinophils (EDTA Blood/Impedance Variation & Flow Cytometry)	2.4	%	01 - 06
Monocytes (EDTA Blood/Impedance Variation & Flow Cytometry)	7.0	%	01 - 10
Basophils (EDTA Blood/Impedance Variation & Flow Cytometry)	0.7	%	00 - 02
<b>INTERPRETATION:</b> Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.			
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	4.05	$10^3 / \mu\text{l}$	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	1.88	$10^3 / \mu\text{l}$	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.16	$10^3 / \mu\text{l}$	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.46	$10^3 / \mu\text{l}$	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.05	$10^3 / \mu\text{l}$	< 0.2
Platelet Count (EDTA Blood/Impedance Variation)	<b>621 (Rechecked)</b>	$10^3 / \mu\text{l}$	150 - 450
MPV (EDTA Blood/Derived from Impedance)	7.2	fL	8.0 - 13.3
PCT (EDTA Blood/Automated Blood cell Counter)	0.45	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate) (Blood/Automated - Westergren method)	8	mm/hr	< 30



Venkatrayan I P  
Lab Manager

VERIFIED BY




DR. SUJIDAR ELAYAPERUMAL MD, CIC  
CONSULTANT MICROBIOLOGIST  
REG NO: 41854

APPROVED BY

The results pertain to sample tested.

Page 2 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17,RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

Investigation	Observed Value	Unit	Biological Reference Interval
BUN / Creatinine Ratio	9.1		6.0 - 22.0
Glucose Fasting (FBS) (Plasma - F/GOD-PAP)	77.4	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

Glucose, Fasting (Urine) (Urine - F/GOD - POD)	Negative		Negative
Glucose Postprandial (PPBS) (Plasma - PP/GOD-PAP)	89.4	mg/dL	70 - 140

**INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti-diabetic medication during treatment for Diabetes.

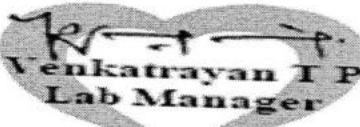
Urine Glucose(PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	8.4	mg/dL	7.0 - 21
Creatinine (Serum/Modified Jaffe)	0.92	mg/dL	0.6 - 1.1

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.

Uric Acid (Serum/Enzymatic)	5.9	mg/dL	2.6 - 6.0
--------------------------------	-----	-------	-----------

**Liver Function Test**

Bilirubin(Total) (Serum/DCA with ATCS)	0.42	mg/dL	0.1 - 1.2
---	------	-------	-----------



Venkatrayan I P  
Lab Manager

VERIFIED BY




DR. SUNDAR ELAYAPERUMAL MD, CIC  
CONSULTANT MICROBIOLOGIST  
REG NO. 41254

APPROVED BY

The results pertain to sample tested.

Page 3 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



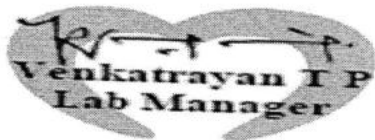
Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.17	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.25	mg/dL	0.1 - 1.0
SGOT/AST (Aspartate Aminotransferase) (Serum/Modified IFCC)	30.5	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/Modified IFCC)	28.1	U/L	5 - 41
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	32.2	U/L	< 38
Alkaline Phosphatase (SAP) (Serum/Modified IFCC)	114.1	U/L	53 - 141
Total Protein (Serum/Biuret)	6.93	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.36	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.57	gm/dL	2.3 - 3.6
A : G RATIO (Serum/Derived)	1.70		1.1 - 2.2

**Lipid Profile**

Cholesterol Total (Serum/CHOD-PAP with ATCS)	163.4	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
Triglycerides (Serum/GPO-PAP with ATCS)	86.0	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500



VERIFIED BY



APPROVED BY

The results pertain to sample tested.

Page 4 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17,RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



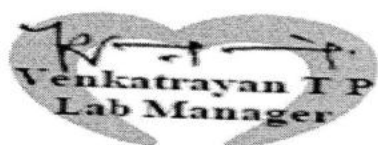
Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

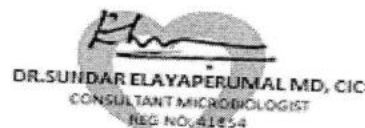
Investigation	Observed Value	Unit	Biological Reference Interval
<p><b>INTERPRETATION:</b> The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the "usual" circulating level of triglycerides during most part of the day.</p>			
HDL Cholesterol (Serum/Immunoinhibition)	54.5	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
LDL Cholesterol (Serum/Calculated)	91.7	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
VLDL Cholesterol (Serum/Calculated)	17.2	mg/dL	< 30
Non HDL Cholesterol (Serum/Calculated)	108.9	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.  
 2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.

Total Cholesterol/HDL Cholesterol Ratio (Serum/Calculated)	3		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
---	---	--	--



VERIFIED BY



APPROVED BY

The results pertain to sample tested.

Page 5 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17,RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Triglyceride/HDL Cholesterol Ratio (TG/HDL) (Serum/Calculated)	1.6		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
LDL/HDL Cholesterol Ratio (Serum/Calculated)	1.7		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
HbA1C (Whole Blood/HPLC)	5.4	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: $\geq$ 6.5

**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control  $\geq$  8.1 %  
 Estimated Average Glucose (Whole Blood) 108.28 mg/dL

**INTERPRETATION: 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 as compared to blood and urinary glucose determinations.  
 Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values.  
 Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

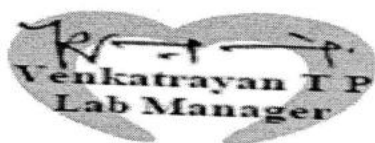
**THYROID PROFILE / TFT**

T3 (Triiodothyronine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	1.37	ng/ml	0.4 - 1.81
---	------	-------	------------

**INTERPRETATION:**

**Comment :**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.



Venkatrayan I P  
Lab Manager

VERIFIED BY




DR. SUNDAR ELAYAPERUMAL MD, CIC  
CONSULTANT MICROBIOLOGIST  
REG NO. 41854

APPROVED BY

The results pertain to sample tested.

Page 6 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.





Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s)/ Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
T4 (Tyroxine) - Total (Serum/Chemiluminescent Immunometric Assay (CLIA))	6.47	µg/dl	4.2 - 12.0

**INTERPRETATION:**

**Comment :**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) (Serum/Chemiluminescent Immunometric Assay (CLIA))	6.44	µIU/mL	0.35 - 5.50
---	------	--------	-------------

**INTERPRETATION:**

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5

2 nd trimester 0.2-3.0

3 rd trimester : 0.3-3.0

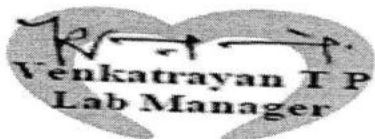
(Indian Thyroid Society Guidelines)

**Comment :**

- 1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
- 2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.
- 3.Values&amplt;0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

**Urine Analysis - Routine**

COLOUR (Urine)	Yellow	Yellow to Amber
APPEARANCE (Urine)	Clear	Clear
Protein (Urine/Protein error of indicator)	Negative	Negative
Glucose (Urine/GOD - POD)	Negative	Negative
Pus Cells (Urine/Automated - Flow cytometry )	Occasional /hpf	NIL



VERIFIED BY



APPROVED BY

The results pertain to sample tested.

Page 7 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17,RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

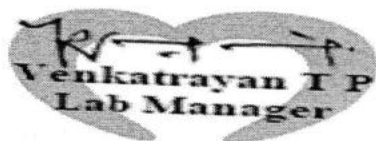
Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Epithelial Cells (Urine/Automated - Flow cytometry)	Occasional	/hpf	NIL
RBCs (Urine/Automated - Flow cytometry)	NIL	/hpf	NIL
Casts (Urine/Automated - Flow cytometry)	NIL	/hpf	NIL
Crystals (Urine/Automated - Flow cytometry)	NIL	/hpf	NIL
Others (Urine)	NIL		

**INTERPRETATION:** Note: Done with Automated Urine Analyser & Automated urine sedimentation analyser. All abnormal reports are reviewed and confirmed microscopically.

**Stool Analysis - ROUTINE**

Colour (Stool)	Brown	Brown
Blood (Stool)	Absent	Absent
Mucus (Stool)	Absent	Absent
Reaction (Stool)	Acidic	Acidic
Consistency (Stool)	Semi Solid	Semi Solid
Ova (Stool)	NIL	NIL
Others (Stool)	NIL	NIL
Cysts (Stool)	NIL	NIL



Venkatrayan T P  
Lab Manager

VERIFIED BY




DR. SUNDAR ELAYAPERUMAL MD, CIC  
CONSULTANT MICROBIOLOGIST  
REG NO: 41854

APPROVED BY

The results pertain to sample tested.

Page 8 of 9

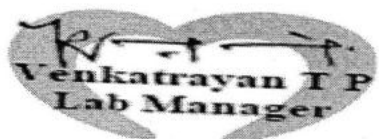
Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA,.



Name : Ms. ELIZABETH ISSAC  
 PID No. : KLP455202  
 SID No. : 80059131  
 Age / Sex : 58 Year(s) / Female  
 Type : OP  
 Ref. Dr : MediWheel

Register On : 11/03/2023 8:10 AM  
 Collection On : 11/03/2023 10:06 AM  
 Report On : 11/03/2023 9:10 PM  
 Printed On : 11/03/2023 9:31 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Trophozoites (Stool)	NIL		NIL
RBCs (Stool)	NIL	/hpf	Nil
Pus Cells (Stool)	1 - 2	/hpf	NIL
Macrophages (Stool)	NIL		NIL
Epithelial Cells (Stool)	NIL	/hpf	NIL



Venkatrayan I P  
Lab Manager

VERIFIED BY




DR. SUNDAR ELAYAPERUMAL MD, CIC  
CONSULTANT MICROBIOLOGIST  
REG NO. 41254

APPROVED BY

-- End of Report --

The results pertain to sample tested.

Page 9 of 9

Lab Address: MEDALL HEALTHCARE PRIVATE LIMITED, #17, RACE VIEW COLONY, 2ND STREET, RACE COURSE ROAD, GUINDY, CHENNAI, TAMIL NADU, INDIA.,



Name	MS.ELIZABETH ISSAC	ID	KLP455202
Age & Gender	58Y/FEMALE	Visit Date	11/03/2023
Ref Doctor	MediWheel		

**ULTRA SOUND SCAN**

**WHOLE ABDOMEN**

**Liver is normal in size (14.5 cm) and shows homogenously increased parenchymal echoes with no focal abnormality.**

There is no intra or extra hepatic biliary ductal dilatation. Portal vein and IVC are normal.

**Gall bladder** is normal sized and smooth walled. No evidence of calculi. Wall thickness is normal.

**Pancreas** shows a normal configuration and echotexture. Pancreatic duct is normal.

**Spleen is enlarged in size (12.1 cm) and echotexture.**

**Bilateral kidneys** are normal in size, shape and position. Cortical echoes are normal bilaterally. There is no calculus or calyceal dilatation.

**Right kidney** measures 9.6 x 3.8 cm.

**Left kidney** measures 10.0 x 4.2 cm.

Ureters are not dilated.

No abnormality is seen in the region of the **adrenal glands**.

No para aortic lymphadenopathy is seen.

**Urinary bladder** is smooth walled and uniformly transonic. No intravesical mass or calculus.

**Uterus** is anteverted, and measures 4.5 x 2.6 x 2.6 cm. Endometrial thickness is 1 mm.

**Both ovaries** are atrophic.

Iliac fossae are normal.

There is no free or loculated peritoneal fluid.



<b>Name</b>	<b>MS.ELIZABETH ISSAC</b>	<b>ID</b>	<b>KLP455202</b>
<b>Age &amp; Gender</b>	<b>58Y/FEMALE</b>	<b>Visit Date</b>	<b>11/03/2023</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		

**IMPRESSION:**

- **Fatty liver.**
- **Splenomegaly.**

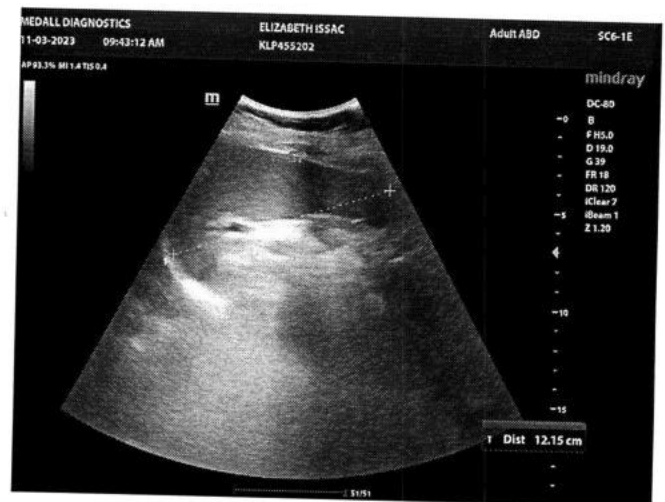
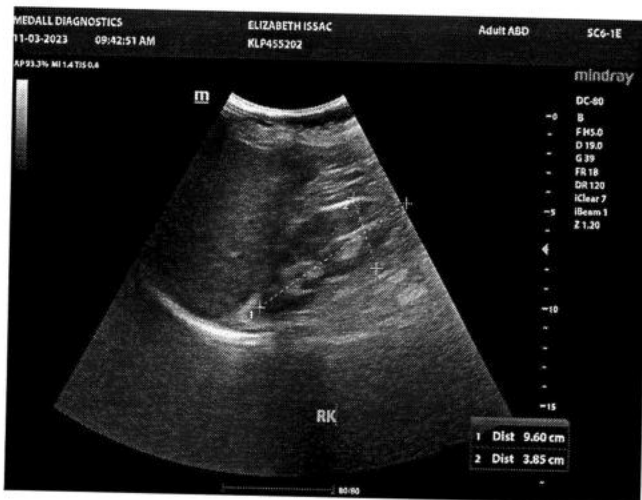
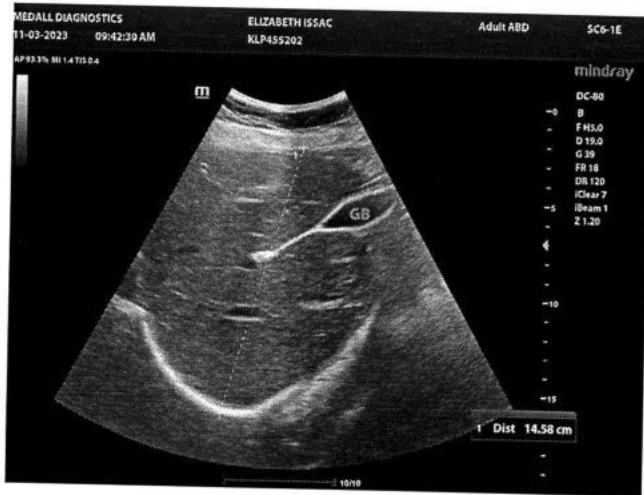
**Suggested clinical correlation.**



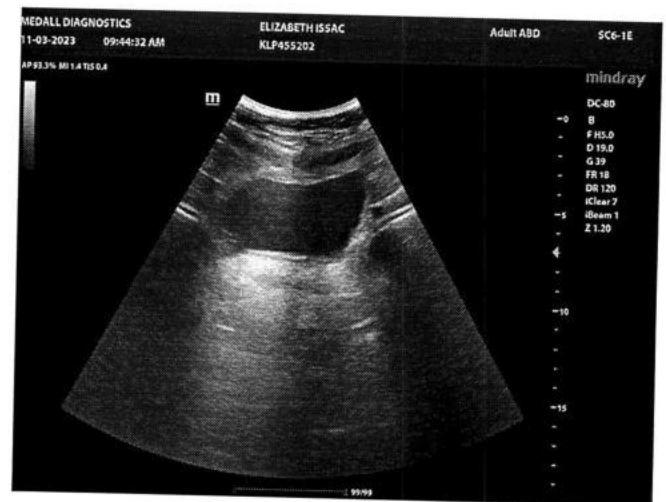
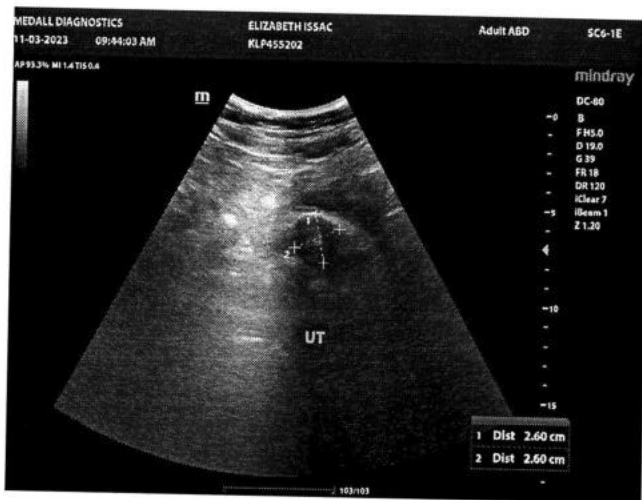
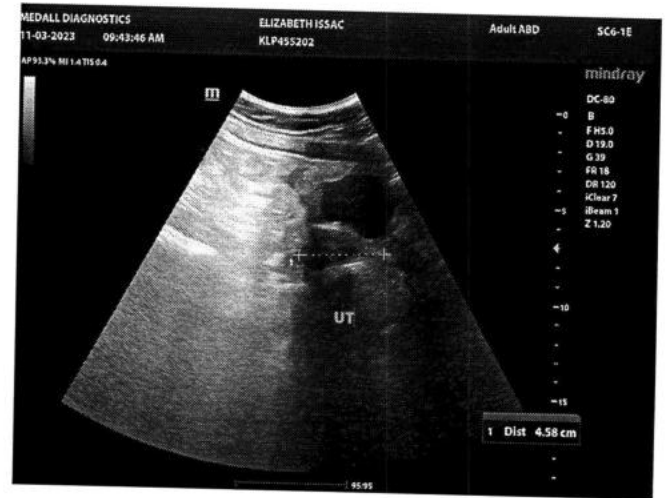
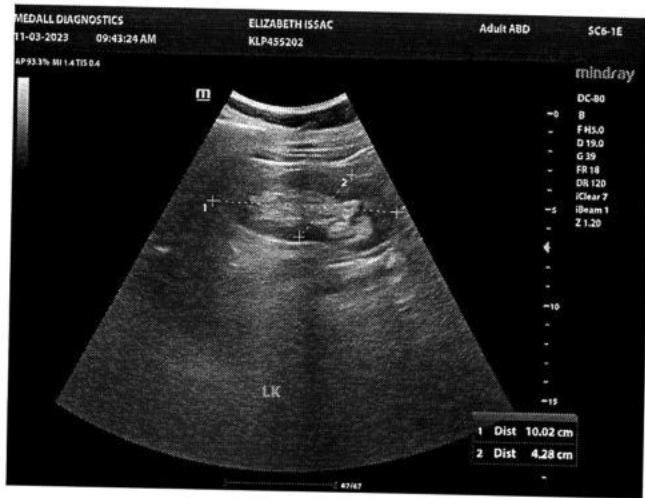
**Dr. SUMITHA**  
**SONOLOGIST**



Name	MS.ELIZABETH ISSAC	ID	KLP455202
Age & Gender	58Y/FEMALE	Visit Date	11/03/2023
Ref Doctor	MediWheel		



<b>Name</b>	<b>MS.ELIZABETH ISSAC</b>	<b>ID</b>	<b>KLP455202</b>
<b>Age &amp; Gender</b>	<b>58Y/FEMALE</b>	<b>Visit Date</b>	<b>11/03/2023</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		



Name	MS.ELIZABETH ISSAC	ID	KLP455202
Age & Gender	58Y/FEMALE	Visit Date	11/03/2023
Ref Doctor	MediWheel		

### X-RAY MAMMOGRAPHY OF BOTH BREASTS

Soft tissue X-ray mammography of both breasts was performed using the Cranio-caudal and Medio-lateral oblique views.

**Indication : Screening.**

**Composition :**

**Bilateral symmetrical, fibro fatty tissue - ACR type A.**

No mass or calcification is seen in either breast.

The retro-mammary space is free.

The nipples are normal with no evidence of retraction.

The skin and subcutaneous tissues are normal.

Correlated ultrasound screening of both breasts did not reveal any abnormality.

**IMPRESSION : = No mammographic evidence of abnormality.**

**= BIRADS category I.**

  
**Dr. SATHWIKA**  
**SONOLOGIST**





<b>Name</b>	<b>MS.ELIZABETH ISSAC</b>	<b>ID</b>	<b>KLP455202</b>
<b>Age &amp; Gender</b>	<b>58Y/FEMALE</b>	<b>Visit Date</b>	<b>11/03/2023</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		

<b>BIRADS Category</b>		<b>Likely hood of cancer</b>
<b>0</b>	<b>Need additional imaging or prior examinations</b>	<b>N/A</b>
<b>1</b>	<b>Negative</b>	<b>0%</b>
<b>2</b>	<b>Benign</b>	<b>0%</b>
<b>3</b>	<b>Probably benign</b>	<b>&gt;0% - 2 %</b>
<b>4</b>	<b>Suspicious</b>	<b>4a Low suspicion for malignancy (&gt;2% to 10%)</b>  <b>4b Moderate suspicion for malignancy (&gt;10% to 50%)</b>  <b>4c High suspicion for malignancy (&gt;50% to 95%)</b>
<b>5</b>	<b>Highly suggestive of malignancy</b>	<b>95%</b>
<b>6</b>	<b>Known biopsy proven</b>	<b>N/A</b>



Medall Healthcare Pvt Ltd  
 No:191, Poonamalle High Road (Near Taylors Road Signal)



<b>Name</b>	<b>MS.ELIZABETH ISSAC</b>	<b>ID</b>	<b>KLP455202</b>
<b>Age &amp; Gender</b>	<b>58Y/FEMALE</b>	<b>Visit Date</b>	<b>11/03/2023</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		



Name	ELIZABETH ISSAC	Customer ID	KLP455202
Age & Gender	58Y/F	Visit Date	Mar 11 2023 8:10AM
Ref Doctor	MediWheel		

### **X-RAY CHEST (PA VIEW)**

The cardio thoracic ratio is normal.

The heart size and configuration are within normal limits.

The aortic arch is normal.

The lung fields show normal broncho-vascular markings.

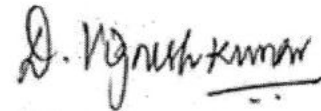
Both the pulmonary hila are normal in size.

The costophrenic and cardiophrenic recesses and the domes of diaphragm are normal.

The bones and soft tissues of the chest wall show no abnormality.

### **IMPRESSION :**

- **No significant abnormality detected.**



Dr. D. Vignesh Kumar MBBS, DNB(RD)  
Consultant Radiologist



<b>Name</b>	<b>MS.ELIZABETH ISSAC</b>	<b>ID</b>	<b>KLP455202</b>
<b>Age &amp; Gender</b>	<b>58Y/FEMALE</b>	<b>Visit Date</b>	<b>11/03/2023</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		

**ECHO CARDIOGRAM REPORT**

**2D ECHO STUDY:**

- Normal LV / RV size and systolic function (EF: 64%)
- No Regional wall motion abnormality.
- No ventricular hypertrophy.
- IAS and IVS are intact.
- No e/o of clot / Aneurysm.
- Normal pericardium.

**FINAL IMPRESSION:**

- **NORMAL LV / RV SIZE AND SYSTOLIC FUNCTION. (EF: 64%)**
- **NO REGIONAL WALL MOTION ABNORMALITY.**
- **NORMAL VALVES FOR AGE.**
- **GRADE I LV DIASTOLIC DYSFUNCTION PRESENT.**
- **NORMAL COLOUR FLOW STUDIES.**

**LEFT VENTRICULAR MEASUREMENT:**

DIMENSIONS	NORMAL	DIMENSIONS	NORMAL
AO (ed)- 3.2cm(1.5cm/3.5cm)		IVS (ed) - 1.1cm	(0.6cm/1.2cm)
LA (ed)- 3.3cm(1.5cm/3.5cm)		LVPW(ed) - 1.0 cm	(0.6cm/1.1cm)
RVID(ed)- 1.2 cm(0.9cm/2.8cm)		EF 64 %	(62 %-85 %)
LVID (ed)- 5.1cm(2.6cm/5.5cm)		FS 35 %	
LVID (es)- 3.3cm			



<b>Name</b>	<b>MS.ELIZABETH ISSAC</b>	<b>ID</b>	<b>KLP455202</b>
<b>Age &amp; Gender</b>	<b>58Y/FEMALE</b>	<b>Visit Date</b>	<b>11/03/2023</b>
<b>Ref Doctor</b>	<b>MediWheel</b>		

**MORPHOLOGICAL DATA:**

**Mitral valve**

Anterior mitral leaflet (AML) : Normal  
 Posterior mitral leaflet (PML) : Normal  
 Aortic Valve : Sclerosis  
 Tricuspid Valve : Normal  
 Pulmonary Valve : Normal  
 Interatrial Septum : Intact  
 Interventricular Septum : Intact  
 Right Ventricle : Normal  
 Right Atrium : Normal  
 Pulmonary Artery : Normal  
 Left Ventricle : Normal  
 Left Atrium : Normal

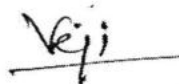
**PERICARDIUM:**

- Normal.

**DOPPLER STUDY:**

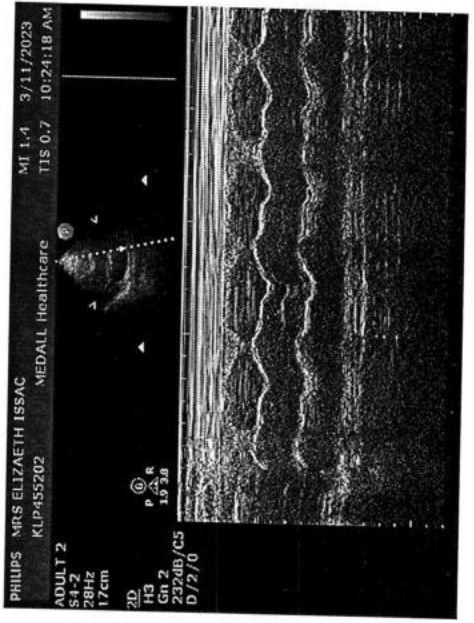
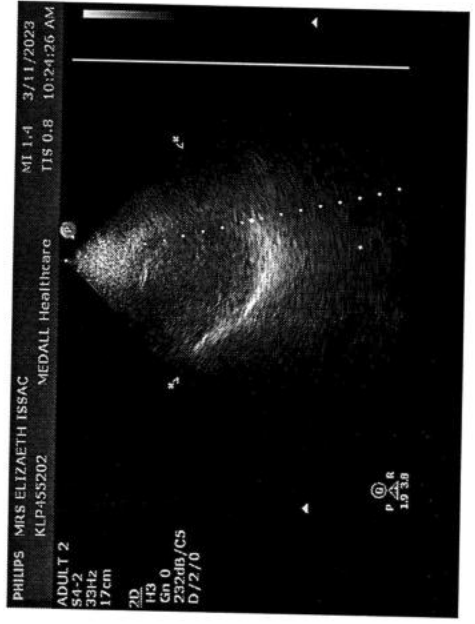
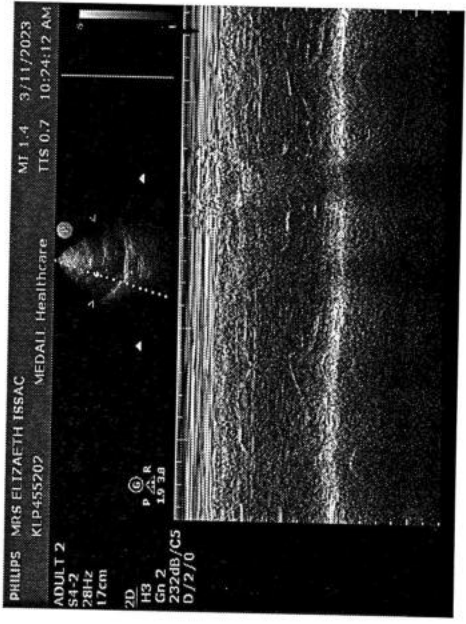
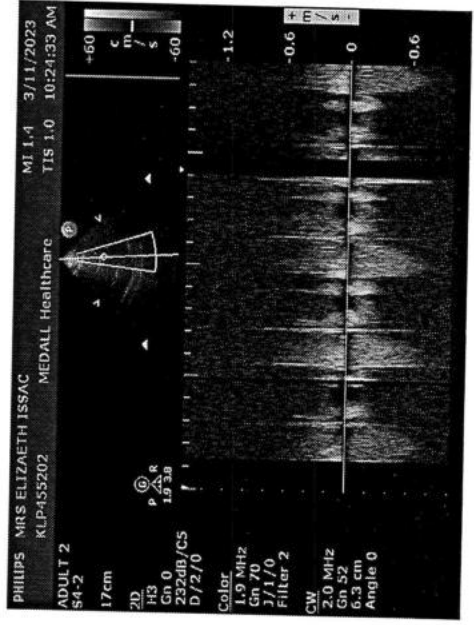
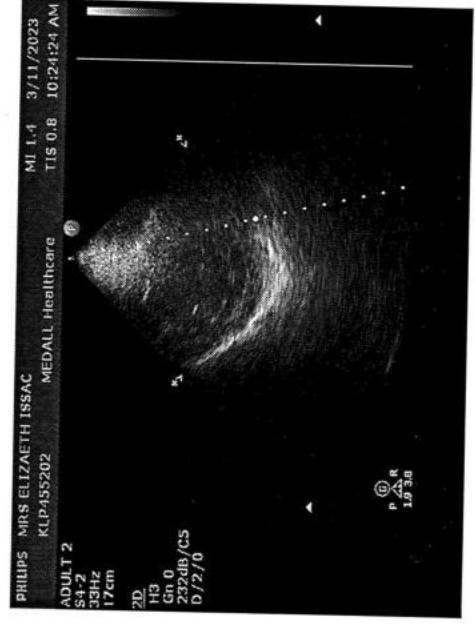
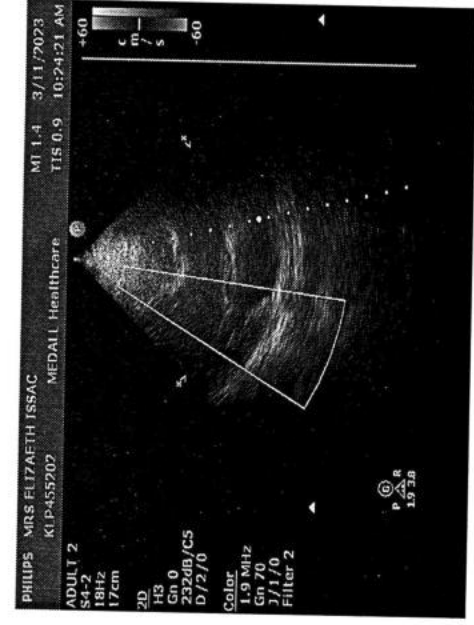
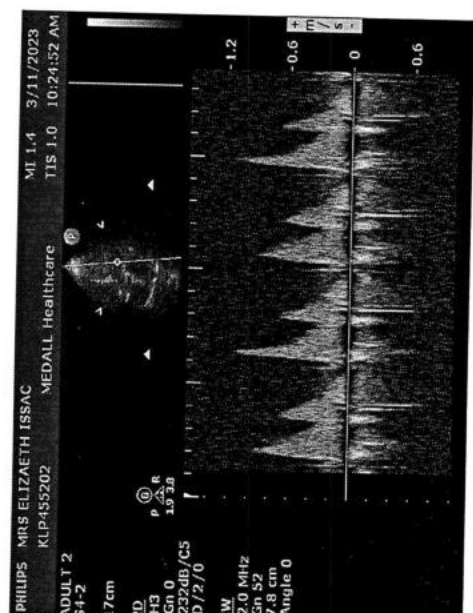
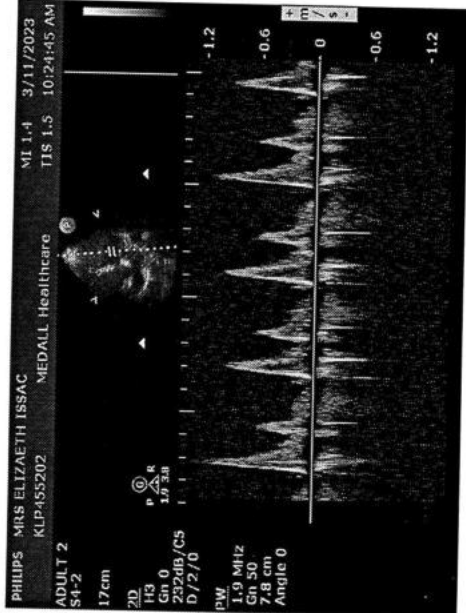
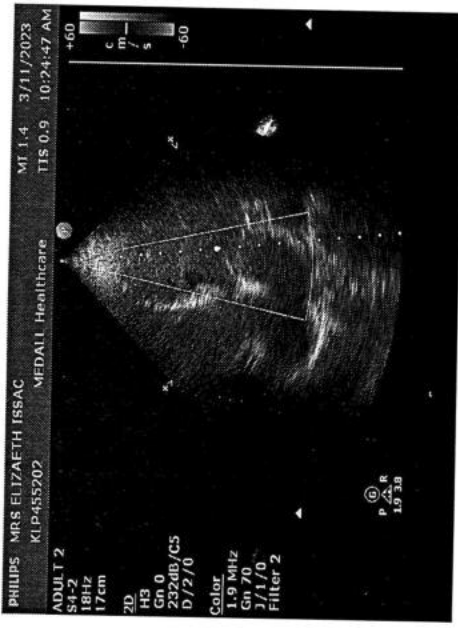
**Continuous Wave Doppler & Colour Flow Study:**

- ***Grade I LV diastolic dysfunction present.***



**P. VIJAYA LAKSHMI  
ECHO TECHNICIAN**



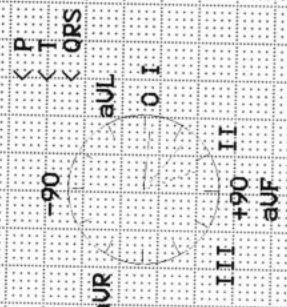




HR 71 bpm

ement Results

PR : 84 ms  
 QRS : 426 / 462 ms  
 QT : 152 ms  
 QTc : 118 ms  
 QT/QTc : 838 / 845 ms  
 PR/QT : 68 / 6 / 39 degrees



Interpretation:  
 12SL - Interpretation:  
 Normal sinus rhythm  
 Normal ECG

Unconfirmed report.

