Siddhivinayak Hospital

Hosp. Reg. No.: TMC - Zone C - 386

INDUSTRIAL HEALTH SERVICES

27/01/24

Akshata Pandit
34 yrs/ Female

No fresh complaints
No co-morbidities
No P/H.
No S/H.
LMP - 20/01/24, regular
O/H - G2 P2A0L2D0
7yrs, female, FTND
4 yrs, male, LSCS
TL not done
F/H - father - DM
Mother - HTN.
BP - 120/70 mmHg
P - 77/min
SpO2 - 98%

Height - 5'1"
weight - 160 cm
BMI - 18.1 kg/m2
(mild thinness)

Pt is fit and ~~yes~~ can resume her normal duties.

Siddhivinayak Hospital * Vartak Nagar, Thane (W.) *

S-1, Vedant Complex, Vartak Nagar, Thane (W) 400 606
E : ohs.svh@gmail.com W : www.siddhivinayakhospitals.org T. : 022 - 2588 3531 M. : 9769545533

831 Akshata Pandit

27-01-2024 10:57:43 AM

male Years 34 | F

q. No. : 20/70

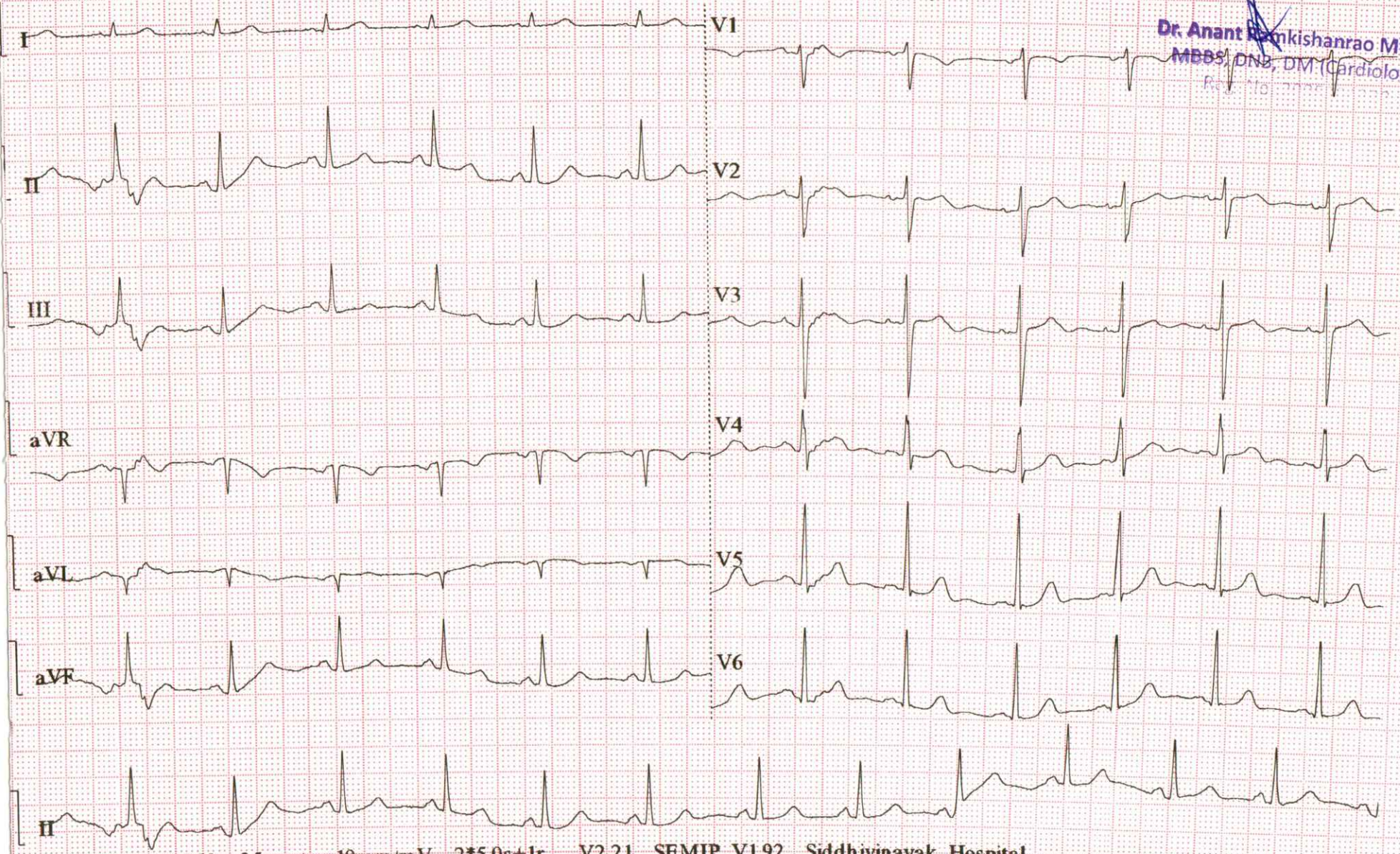
HR	: 77	bpm
P	: 101	ms
PR	: 129	ms
QRS	: 77	ms
QT/QTcBz	: 379/430	ms
P/QRS/T	: 76/77/61	°
RV5/SV1	: 1.581/0.658	mV

Diagnosis Information:
Sinus Rhythm
Normal ECG

WNL

Report Confirmed by:

Dr. Anant Ramkishanrao Munde
MBBS, DNB, DM (Cardiology)
Reg. No. [redacted]



0.15~45Hz AC50 25mm/s 10mm/mV 2*5.0s+1r V2.21 SEMIP V1.92 Siddhivinayak Hospital

Name – Mrs. Akshata Pandit	**Age – 34 Y/F**
Ref by Dr.- Siddhivinayak Hospital	**Date – 27/01/2024**

USG ABDOMEN & PELVIS

FINDINGS:

The **liver** dimension is normal in size (14.8 cm). It appears normal in morphology with normal echogenicity. No evidence of intrahepatic ductal dilatation. **Evidence of two rounded hyperechioc lesions measuring 18 x 17 mm & 17 x 14 mm are seen in right lobe of liver with peripheral vascularity likely s/o hemangiomas. Need CT abdomen correlation.**

The **GB**-gallbladder is distended normally with no stones within.

The **CBD**- common bile duct is normal. The portal vein is normal.

The **pancreas** appears normal in morphology.

The **spleen** is normal in size (8.5 cm) and morphology

Both **kidneys** demonstrate normal morphology. Both kidneys show normal cortical echogenicity.

The right kidney measures 9.7 x 4.4 cm.

The left kidney measures 10.1 x 4.4 cm.

Urinary bladder: normally distended. Wall thickness – normal.

Uterus : normal in size and morphology. Size: 7.8 x 3.9 x 4.7 cm.

Endometrium: 8.7 mm, it appears normal in morphology.

Bilateral ovaries are normal.

Adnexa appear normal

No free fluid is seen.

IMPRESSION:

- **Liver hemangiomas as described. Need CT abdomen correlation.**

DR. AMOL BENDRE
MBBS; DMRE
CONSULTANT RADIOLOGIST

OPTHAL CHECK UP SCREENING

NAME OF EMPLOYEE **AKSHATA PANDIT**

AGE **32** **DATE -** **27.01.2024**

Spects : Without Glasses

	RT Eye	Lt Eye
NEAR	N/6	N/6
DISTANT	6/6	6/6
Color Blind Test	NORMAL	

SIDDHIVINAYAK HOSPITALS

Name – Mrs. AKSHATA PANDIT	Age - 34 Y/F
Ref by Dr.- Siddhivinayak Hospital	Date – 27/01/2024

X- Ray chest (PA VIEW)

No obvious active parenchymal lesion seen in both lungs.

Cardiac and aortic shadows appear normal

No evidence of pleural of effusion is seen.

Both domes of diaphragm appear normal.

No obvious bony lesion is seen.

IMPRESSION:

- **No significant abnormality seen.**

Adv.: Clinical and lab correlation.

DR. AMOL BENDRE
MBBS; DMRE
CONSULTANT RADIOLOGIST

Note: The above report represents interpretation of various radiographic / sonographic shadows, and hence has its own limitations. This report has to be co-related clinic-pathologically by the referring / physician and it does NOT represent the sole diagnosis.

ECHOCARDIOGRAM

NAME	MRS AKSHATA PANDIT
AGE/SEX	34YRS/F
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	27 /01/2024

2D/M-MODE ECHOCARDIOGRAPHY

VALVES:

MITRAL VALVE:
- AML: Normal
- PML: Normal
- **Sub-valvular deformity**: Absent

AORTIC VALVE: Normal
- **No. of cusps**: 3

PULMONARY VALVE: Normal

TRICUSPID VALVE: Normal

CHAMBERS:

LEFT ATRIUM: Normal
- **Left atrial appendage**: Normal

LEFT VENTRICLE: Normal
- **RWMA**: No
- **Contraction**: Normal

RIGHT ATRIUM: Normal

RIGHT VENTRICLE: Normal
- **RWMA**: No
- **Contraction**: Normal

GREAT VESSELS:
- AORTA: Normal
- PULMONARY ARTERY: Normal

SEPTAE:
- IAS: Intact
- IVS: Intact

CORONARIES: Proximal coronaries normal

CORONARY SINUS: Normal

VENACAVAE:
- SVC: Normal
- IVC: Normal and collapsing >20% with respiration

PULMONARY VEINS: Normal

PERICARDIUM: Normal

MEASUREMENTS:

AORTA		LEFT VENTRICLE STUDY		RIGHT VENTRICLE STUDY	
PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE	PARAMETER	OBSERVED VALUE
Aortic annulus	20 mm	Left atrium	32 mm	Right atrium	mm
Aortic sinus	mm	LVIDd	40.8mm	RVd (Base)	mm
Sino-tubular junction	mm	LVIDs	27.0 mm	RVEF	%
Ascending aorta	mm	IVSd	7.9 mm	TAPSE	mm
Arch of aorta	mm	LVPWd	7.9 mm	MPA	mm
Desc. thoracic aorta	mm	LVEF	63 %	RVOT	mm
Abdominal aorta	mm	LVOT	mm	IVC	mm

COLOR - FLOW & DOPPLER ECHOCARDIOGRAPHY

NAME	MRS. AKSHATA PANDIT
AGE/SEX	34 YRS/F
REFERRED BY	SIDDHIVINAYAK HOSPITAL
DATE OF EXAMINATION	27/01/2024

	MITRAL	TRICUSPID	AORTIC	PULMONARY
FLOW VELOCITY (m/s)			1.15	0.79
PPG (mmHg)				
MPG (mmHg)				
VALVE AREA (cm^2)				
DVI (ms)				
PR END DIASTOLIC VELOCITY (m/s)				
ACCELERATION/ DECELERATION TIME (ms)				
PHT (ms)				
VENA CONTRACTA (mm)				
REGURGITATION		TRJV= m/s PASP= mmHg		
E/A				
E/E'				

FINAL IMPRESSION: NORMAL STUDY

- No RWMA
- Normal LV systolic function (LVEF 63 %)
- Good RV systolic function
- Normal diastolic function
- All cardiac valves are normal
- All cardiac chambers are normal
- IAS/IVS intact
- No pericardial effusion/ clot/vegetations

ADVICE: Nil

ECHOCARDIOGRAPHER:

Dr. ANANT MUNDE

DNB, DM (CARDIOLOGY)

INTERVENTIONAL CARDIOLOGIST

Dr. Anant Ramkishanrao Munde
MBBS, DNB, DM (Cardiology)
Reg. No. 2005021228

MC-6135

Dr. Smita Ranveer`s

Radiance

CLINICAL DIAGNOSTIC CENTRE

COMPLETE PATHOLOGICAL SOLUTION

Name	: Mrs. AKSHATA PANDIT (A)	**Collected On**	: 27/1/2024 9:30 am
Lab ID.	: 181839	**Received On**	: 27/1/2024 9:40 am
Age/Sex	: 34 Years / Female	**Reported On**	: 27/1/2024 9:06 pm
Ref By	: SIDDHIVINAYAK HOSPITAL CGHS /ESIS	**Report Status**	: FINAL

181839

*LIPID PROFILE

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL CHOLESTEROL (CHOLESTEROL OXIDASE,ESTERASE,PEROXIDASE)	133.0	mg/dL	Desirable blood cholesterol: - <200 mg/dl. Borderline high blood cholesterol: - 200 - 239 mg/dl. High blood cholesterol: - >239 mg/dl.
S.HDL CHOLESTEROL (DIRECT MEASURE - PEG)	43.7	mg/dL	Major risk factor for heart :<30 mg/dl. Negative risk factor for heart disease :>=80 mg/dl.
S. TRIGLYCERIDE (ENZYMATIC, END POINT)	60.2	mg/dL	Desirable level : <161 mg/dl. High :>= 161 - 199 mg/dl. Borderline High :200 - 499 mg/dl. Very high :>499mg/dl.
VLDL CHOLESTEROL (CALCULATED VALUE)	12	mg/dL	UPTO 40
S.LDL CHOLESTEROL (CALCULATED VALUE)	77	mg/dL	Optimal:<100 mg/dl. Near Optimal: 100 - 129 mg/dl. Borderline High: 130 - 159 mg/dl. High : 160 - 189mg/dl. Very high :>= 190 mg/dl.
LDL CHOL/HDL RATIO (CALCULATED VALUE)	1.76		UPTO 3.5
CHOL/HDL CHOL RATIO (CALCULATED VALUE)	3.04		<5.0

Above reference ranges are as per ADULT TREATMENT PANEL III recommendation by NCEP (May 2015).

Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By
SHAISTA Q

DR. SMITA RANVEER.
M.B.B.S.M.D. Pathology(Mum)
Consultant Histocytopathologist

24 HOURS 7

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181839

COMPLETE BLOOD COUNT

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
HEMOGLOBIN	12.9	gm/dl	12.0 - 15.0
HEMATOCRIT (PCV)	38.7	%	36 - 46
RBC COUNT	4.80	x10^6/uL	4.5 - 5.5
MCV	81	fl	80 - 96
MCH	**26.9**	pg	27 - 33
MCHC	33	g/dl	33 - 36
RDW-CV	13.8	%	11.5 - 14.5
TOTAL LEUCOCYTE COUNT	5900	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	56	%	40 - 80
LYMPHOCYTES	36	%	20 - 40
EOSINOPHILS	01	%	0 - 6
MONOCYTES	07	%	2 - 10
BASOPHILS	00	%	0 - 1
PLATELET COUNT	224000	/ cumm	150000 - 450000
MPV	10.3	fl	6.5 - 11.5
PDW	16	%	9.0 - 17.0
PCT	0.230	%	0.200 - 0.500
RBC MORPHOLOGY	Normocytic Normochromic		
WBC MORPHOLOGY	Normal		
PLATELETS ON SMEAR	Adequate		

Method : EDTA Whole Blood- Tests done on Automated Six Part Cell Counter.RBC and Platelet count by Electric Impedance ,WBC by SF Cube method and Differential by flow cytometry . Hemoglobin by Cyanide free reagent for hemoglobin test (Colorimetric Method).Rest are calculated parameters.

Result relates to sample tested, Kindly correlate with clinical findings.

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181839

URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
URINE ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
VOLUME	25ml		
COLOUR	Pale yellow		Pale Yellow
APPEARANCE	Clear		Clear
CHEMICAL EXAMINATION			
REACTION	Acidic		Acidic
(methyl red and Bromothymol blue indicator)			
SP. GRAVITY	1.010		1.005 - 1.022
(Bromothymol blue indicator)			
PROTEIN	Absent		Absent
(Protein error of PH indicator)			
BLOOD	Absent		Absent
(Peroxidase Method)			
SUGAR	Absent		Absent
(GOD/POD)			
KETONES	Absent		Absent
(Acetoacetic acid)			
BILE SALT & PIGMENT	Absent		Absent
(Diazonium Salt)			
UROBILINOGEN	Normal		Normal
(Red azodye)			
LEUKOCYTES	Absent		Absent
(pyrrole amino acid ester diazonium salt)			
NITRITE	Absent		Negative
(Diazonium compound With tetrahydrobenzo quinolin 3-phenol)			
MICROSCOPIC EXAMINATION			
RED BLOOD CELLS	Absent		Absent
PUS CELLS	0-2	/ HPF	0 - 5
EPITHELIAL	0-2	/ HPF	0 - 5
CASTS	Absent		

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URINE ROUTINE EXAMINATION

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CRYSTALS	Absent		
BACTERIA	Absent		Absent
YEAST CELLS	Absent		Absent
ANY OTHER FINDINGS	Absent		Absent
REMARK	Result relates to sample tested. Kindly correlate with clinical findings.		

Result relates to sample tested, Kindly correlate with clinical findings.

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181839

IMMUNO ASSAY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TFT (THYROID FUNCTION TEST)			
SPACE		Space	-
SPECIMEN	Serum		
T3	135.0	ng/dl	84.63 - 201.8
T4	7.92	µg/dl	5.13 - 14.06
TSH	2.13	µIU/ml	0.270 - 4.20

T3 (Triido Thyronine) hormone)

AGE	RANGE
1-30 days	100-740
1-11 months	105-245
1-5 yrs	105-269
6-10 yrs	94-241
11-15 yrs	82-213
15-20 yrs	80-210

T4 (Thyroxine)

AGE	RANGES
1-14 Days	11.8-22.6
1-2 weeks	9.9-16.6
1-4 months	7.2-14.4
4 -12 months	7.8-16.5
1-5 yrs	7.3-15.0
5-10 yrs	6.4-13.3
11-15 yrs	5.6-11.7

TSH(Thyroid stimulating hormone)

AGE	RANGES
0-14 Days	1.0-39
2 wks -5 months	1.7-9.1
6 months-20 yrs	0.7-6.4
Pregnancy	
1st Trimester	0.1-2.5
2nd Trimester	0.20-3.0
3rd Trimester	0.30-3.0

INTERPRETATION :

TSH stimulates the production and secretion of the metabolically active thyroid hormones, thyroxine (T4) and triiodothyronine (T3), by interacting with a specific receptor on the thyroid cell surface. The synthesis and secretion of TSH is stimulated by Thyrotropin releasing hormone (TRH), in response to low levels of circulating thyroid hormones. Elevated levels of T3 and T4 suppress the production of TSH via a classic negative feedback mechanism. Failure at any level of regulation of the hypothalamic-pituitary-thyroid axis will result in either underproduction (hypothyroidism) or overproduction (hyperthyroidism) of T4 and/or T3.

Result relates to sample tested, Kindly correlate with clinical findings.

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

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181839

HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD GROUP			
SPECIMEN	WHOLE BLOOD EDTA & SERUM		
* ABO GROUP	'O'		
RH FACTOR	POSITIVE		

Method: Slide Agglutination and Tube Method (Forward grouping & Reverse grouping)

Result relates to sample tested, Kindly correlate with clinical findings.

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181839

*RENAL FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
BLOOD UREA (Urease UV GLDH Kinetic)	21.9	mg/dL	13 - 40
BLOOD UREA NITROGEN (Calculated)	10.23	mg/dL	5 - 20
S. CREATININE (Enzymatic)	0.77	mg/dL	0.6 - 1.4
S. URIC ACID (Uricase)	4.1	mg/dL	2.6 - 6.0
S. SODIUM (ISE Direct Method)	138.4	mEq/L	137 - 145
S. POTASSIUM (ISE Direct Method)	4.80	mEq/L	3.5 - 5.1
S. CHLORIDE (ISE Direct Method)	100.9	mEq/L	98 - 110
S. PHOSPHORUS (Ammonium Molybdate)	3.49	mg/dL	2.5 - 4.5
S. CALCIUM (Arsenazo III)	9.6	mg/dL	8.6 - 10.2
PROTEIN (Biuret)	7.23	g/dl	6.4 - 8.3
S. ALBUMIN (BGC)	4.31	g/dl	3.2 - 4.6
S.GLOBULIN (Calculated)	2.92	g/dl	1.9 - 3.5
A/G RATIO calculated	1.48		0 - 2

NOTE BIOCHEMISTRY TEST DONE ON FULLY AUTOMATED (EM 200) ANALYZER.

Result relates to sample tested, Kindly correlate with clinical findings.

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Peripheral smear examination

TEST NAME	RESULTS
SPECIMEN RECEIVED	Whole Blood EDTA
RBC	Normocytic Normochromic
WBC	Total leucocyte count is normal on smear.
	Neutrophils:55 %
	Lymphocytes:35 %
	Monocytes:07 %
	Eosinophils:03 %
	Basophils:00 %
PLATELET	Adequate on smear.
HEMOPARASITE	No parasite seen.

Result relates to sample tested, Kindly correlate with clinical findings.

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Name	: **Mrs. AKSHATA PANDIT (A)**	**Collected On**	: **27/1/2024 9:30 am**
Lab ID.	: **181839**	**Received On**	: **27/1/2024 9:40 am**
Age/Sex	: **34 Years / Female**	**Reported On**	: **27/1/2024 9:06 pm**
Ref By	: **SIDDHIVINAYAK HOSPITAL CGHS /ESIS**	**Report Status**	: **FINAL**

181839

LIVER FUNCTION TEST

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
TOTAL BILLIRUBIN (Method-Diazo)	1.12	mg/dL	0.0 - 2.0
DIRECT BILLIRUBIN (Method-Diazo)	**0.56**	mg/dL	0.0 - 0.4
INDIRECT BILLIRUBIN Calculated	0.56	mg/dL	0 - 0.8
SGOT(AST) (UV without PSP)	16.7	U/L	0 - 37
SGPT(ALT) UV Kinetic Without PLP (P-L-P)	18.8	U/L	UP to 40
ALKALINE PHOSPHATASE (Method-ALP-AMP)	62.0	U/L	42 - 98
S. PROTIEN (Method-Biuret)	7.23	g/dl	6.4 - 8.3
S. ALBUMIN (Method-BCG)	4.31	g/dl	3.5 - 5.2
S. GLOBULIN Calculated	2.92	g/dl	1.90 - 3.50
A/G RATIO Calculated	1.48		0 - 2

Result relates to sample tested, Kindly correlate with clinical findings.

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

Checked By
SHAISTA Q

DR. SMITA RANVEER.
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Consultant Histocytopathologist

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CLINICAL DIAGNOSTIC CENTRE
COMPLETE PATHOLOGICAL SOLUTION

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181839

HAEMATOLOGY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
ESR			
ESR	20	mm/1hr.	0 - 20

METHOD - WESTERGREN

Result relates to sample tested, Kindly correlate with clinical findings.

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

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181839

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
GLYCOCELATED HEMOGLOBIN (HBA1C)			
HBA1C (GLYCOSALATED HAEMOGLOBIN)	5.1	%	Hb A1c > 8 Action suggested < 7 Goal < 6 Non - diabetic level
AVERAGE BLOOD GLUCOSE (A. B. G.)	100.0	mg/dL	65.1 - 136.3
METHOD	Particle Enhanced Immunoturbidimetry		

HbA1c : Glycosylated hemoglobin concentration is dependent on the average blood glucose concentration which is formed progressively and irreversibly over a period of time and is stable till the life of the RBC/erythrocytes.Average Blood Glucose (A.B.G) is calculated value from HbA1c : Glycosylated hemoglobin concentration in whole Blood.It indicates average blood sugar level over past three months.

BLOOD GLUCOSE FASTING & PP			
BLOOD GLUCOSE FASTING	87.1	mg/dL	70 - 110
BLOOD GLUCOSE PP	91.2	mg/dL	70 - 140

Method (GOD-POD). DONE ON FULLY AUTOMATED ANALYSER (EM200).

1. Fasting is required (Except for water) for 8-10 hours before collection for fasting speciman. Last dinner should consist of bland diet.
2. Don't take insulin or oral hypoglycemic agent until after fasting blood sample has been drawn

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MC-6135

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COMPLETE PATHOLOGICAL SOLUTION

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Lab ID.	: **181839**	**Received On**	: **27/1/2024 9:40 am**
Age/Sex	: **34 Years / Female**	**Reported On**	: **27/1/2024 9:06 pm**
Ref By	: **SIDDHIVINAYAK HOSPITAL CGHS /ESIS**	**Report Status**	: **FINAL**

181839

BIOCHEMISTRY

TEST NAME	RESULTS	UNIT	REFERENCE RANGE

INTERPRETATION
- Normal glucose tolerance : 70-110 mg/dl
- Impaired Fasting glucose (IFG) : 110-125 mg/dl
- Diabetes mellitus : >=126 mg/dl

POSTPRANDIAL/POST GLUCOSE (75 grams)
- Normal glucose tolerance : 70-139 mg/dl
- Impaired glucose tolerance : 140-199 mg/dl
- Diabetes mellitus : >=200 mg/dl

CRITERIA FOR DIAGNOSIS OF DIABETES MELLITUS
- Fasting plasma glucose >=126 mg/dl
- Classical symptoms +Random plasma glucose >=200 mg/dl
- Plasma glucose >=200 mg/dl (2 hrs after 75 grams of glucose)
- Glycosylated haemoglobin > 6.5%

***Any positive criteria should be tested on subsequent day with same or other criteria.

GAMMA GT	18.8	U/L	5 - 55

Result relates to sample tested, Kindly correlate with clinical findings.

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

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Age/Sex	: **34 Years / Female**	**Reported On**	: **29/1/2024 4:56 pm**
Ref By	: **SIDDHIVINAYAK HOSPITAL CGHS /ESIS**	**Report Status**	: **FINAL**

181839

PAP SMEAR REPORT1

TEST NAME	RESULTS	UNIT	REFERENCE RANGE
CYTO NUMBER	F/27/24		
CLINICAL HISTORY	Routine check up		
NO. OF SMEARS RECEIVED	One		
SPECIMEN ADEQUACY	Adequate		
CELL TYPE	Superficial, intermediate,squamous metaplastic and few endocervical cells		
ORGANISM	Absent		
EPITHELIAL CELL ABNORMALITY	Nil		
OTHER NON-NEOPLASTIC FINDINGS	Few neutrophils		
FINAL IMPRESION	Negative for intraepithelial lesion or malignancy.		

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

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Dr_smita.ranveer

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