

Patient Name Mr. Sashi Kumar MRN : 159905 Age 51 Sex M Date/Time 13/1/24

Mob No. _____

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- Sugar - F/PP
- HbA1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

H - 168
W - 87
BP - 150/102
P - 70

Physician reference

Dr. Bhawna Garg
MBBS, D.P.O., PGDHA
Reg. No. - MP18035
Deputy Medical Superintendent
RJN Apollo Spectra Hospitals

Vitals

- B.P.
- P.R.
- SPO2
- Temp

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

| | |
|---------------------------------------------|---------------------------------|
| Patient NAME : Mr. SUSHIL KUMAR | Collected : 13/Jan/2024 09:31AM |
| Age/Gender : 51 Y 0 M 0 D /M | Received : 13/Jan/2024 09:35AM |
| UHID/MR NO : ILK.00037177 | Reported : 13/Jan/2024 11:01AM |
| Visit ID : ILK.108969 | Status : Final Report |
| Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED | Client Name : INSTA |

DEPARTMENT OF HEMATOLOGY

COMPLETE BLOOD COUNT- CBC / HAEMOGRAM , WHOLE BLOOD EDTA

| | | | | |
|------------------------------|-------|-------------|------------|--------------|
| Haemoglobin (Hb%) | 15.2 | gm% | 14.0-17.0 | Cyanmeth |
| P.C.V (Hematocrit) | 46.1 | % | 40-54 | Cell Counter |
| RBC Count | 5.4 | Mill./cu mm | 4.00-5.50 | Cell Counter |
| Mean Corpuscular Volume(MCV) | 85.5 | fL | 76-96 | Calculated |
| Mean Corpuscular Hb. (MCH) | 28.2 | pg | 27.0-32.0 | Calculated |
| Mean Corp. Hb. Conc.(MCHC) | 33.0 | g/dl | 30.0-35.0 | Calculated |
| RDW | 14.9 | % | 11-16 | Calculated |
| Total WBC count (TLC) | 8,000 | /cu mm | 4000-11000 | Cell Counter |

Differential Count by Flowcytometry/Microscopy

| | | | | |
|-------------|------|---|-------|--------------|
| Neutrophils | 66.8 | % | 50-70 | Cell Counter |
| Lymphocytes | 23.1 | % | 20-40 | |
| Monocytes | 7.4 | % | 01-10 | Cell Counter |
| Eosinophils | 2.4 | % | 01-06 | Cell Counter |
| Basophils | 0.3 | % | 00-01 | Cell Counter |

Absolute Leucocyte Count

| | | | | |
|-------------------|-------|----------|-------------|--------------|
| Neutrophil (Abs.) | 5,344 | per cumm | 2000 - 8000 | Calculated |
| Lymphocyte (Abs.) | 1848 | per cumm | 600-4000 | Calculated |
| Monocyte (Abs.) | 592 | per cumm | 0-600 | Calculated |
| Eosinophil (Abs.) | 192 | per cumm | 40-440 | Calculated |
| Basophils (Abs.) | 24 | per cumm | 0-110 | Calculated |
| Platelet Count | 1.60 | Lac/cmm | 1.50-4.00 | Cell Counter |

ERYTHROCYTE SEDIMENTATION RATE (ESR)

| | | | | |
|--------------------------------------|----|------------|------|--------------|
| Erythrocyte Sedimentation Rate (ESR) | 12 | mm 1st hr. | 0-20 | Wester Green |
|--------------------------------------|----|------------|------|--------------|



SIN NO : 10427795

A.K. Rajan

DR. ASHOK KUMAR
M.D. (PATH)

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DEPARTMENT OF HEMATOLOGY

BLOOD GROUPING(A,B,O) AND RH FACTOR , WHOLE BLOOD EDTA

| | | | | |
|----------------|----------|--|--|--------------------------|
| Blood Grouping | A | | | Slide/Tube Agglutination |
| Rh (D) Type | POSITIVE | | | Slide/Tube Agglutination |

BLOOD PICTURE - PERIPHERAL SMEAR EXAMINATION , WHOLE BLOOD EDTA

RBC'S : Normocytic Normochromic RBC's.
 No cytoplasmic inclusions or hemoparasite seen.

WBC'S : Normal in number , morphology and distribution. No toxic granules seen.
 No abnormal cell seen.

PLATELETS : Adequate on smear .

IMPRESSION : NORMOCYTIC NORMOCHROMIC BLOOD PICTURE.



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A.K. Pajora

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

GLUCOSE - FASTING (FBS) , NAF PLASMA

| | | | | |
|------------------------------------------------------------------------|------|-------|--------|-----------|
| Fasting Glucose | 87.0 | mg/dL | 65-110 | God - Pod |
| Ref.for Biological Reference Intervals: American Diabetic Assiosation. | | | | |

GLUCOSE, POST PRANDIAL (PP), 2 HOURS (POST MEAL) , FLUORIDE PLASMA

| | | | | |
|------------------------------------------------------------------------|-------|-------|--------|-----------------------------------|
| Post Prandial Glucose | 100.0 | mg/dL | 90-140 | 2hrs. after...gm glucose/lunch |
| Ref.for Biological Reference Intervals: American Diabetic Assiosation. | | | | |



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A.K. Ashok Kumar

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|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

GLYCOSYLATED HAEMOGLOBIN (GHb/HbA1c) , WHOLE BLOOD EDTA

| | | | | |
|---------------------------------|--------|---|--------------------------------------------------------|--------------|
| Glycosylated Haemoglobin HbA1c | 5.7 | % | Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5 | NEPHELOMETRY |
| Approximate mean plasma glucose | 117.18 | | | Calculated |

Ref. for Biological Reference Intervals: American Diabetes Association.

INTERPRETATION:

The A1C test measures your average blood glucose for the past 2 to 3 months. Diabetes is diagnosed at an A1C of greater than or equal to 6.5%.

Therapeutic goals for glycemic control (ADA)

-Adults:

- Goal of therapy: <7.0% HbA1c
- Action suggested: >8.0% HbA1c

-Pediatric patients:

- Toddlers and preschoolers: <8.5% (but >7.5%)
- School age (6-12 years): <8%
- Adolescents and young adults (13-19 years): <7.5%

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A.K. Rajan

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18, Vikas Nagar, Near Sai Baba Temple, Gwalior - 474009 (M.P.) Ph.: 0751-2454600, Mob. : 8269663137, Email: ipc.rjn@gmail.com

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• In case of disparity test may be repeated immediately. • This report is not valid for medico legal purpose.

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|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

COMPLETE KIDNEY PROFILE (RFT/KFT) , SERUM

| | | | | |
|-------------|-------|--------|-----------|----------------------|
| Urea | 17.98 | mg/dL | 13.0-43.0 | Urease |
| Creatinine | 0.8 | mg/dL | 0.5-1.3 | Enzymatic |
| Uric Acid | 5.3 | mg/dL | 3.5-7.2 | Urease |
| Sodium | 137.0 | Meq/L | 135-155 | Direct ISE |
| Potassium | 4.9 | Meq/L | 3.5-5.5 | Direct ISE |
| Chloride | 102.0 | mmol/L | 96-106 | Direct ISE |
| Calcium | 9.1 | mg/dL | 8.6-10.0 | OCPC |
| Phosphorous | 3.3 | mg/dL | 2.5-5.6 | PMA Phenol |
| BUN | 8.4 | mg/dL | 6.0-20.0 | Reflect Spectrothoto |

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|------------------------------|--------------|-------|-----------------------------------------------------------------------------------------------|----------------------|
| LIPID PROFILE , SERUM | | | | |
| Type OF Sample | SERUM | | | |
| Total Cholesterol | 203.0 | mg/dl | up to 200 | End Point |
| Total Triglycerides | 156.0 | mg/dL | Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500 | End Point |
| HDL Cholesterol | 53.0 | mg/dL | Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35 | Reflect Spectrothoto |
| Non - HDL Cholesterol | 150 | mg/dL | <130 | |
| LDL Cholesterol | 118.8 | mg/dL | 49-172 | Reflect Spectrothoto |
| VLDL Cholesterol | 31.2 | mg/dL | 5.0-40.0 | Reflect Spectrothoto |
| Chol / HDL Ratio | 3.83 | | Low Risk : 3.3-4.4 Average Risk : 4.5-7.1 Moderate Risk : 7.2-11.0 High Risk : >11.0 | CALCULATED |

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---------------------------------------------------|-------------|-------|-----------------|----------------------|
| LIVER FUNCTION TEST (LFT) WITH GGT , SERUM | | | | |
| Total Bilirubin | 0.8 | mg/dL | 0.2-1.2 | Jendrassik-Grof |
| Direct Bilirubin | 0.1 | mg/dL | 0.0-0.3 | Jendrassik-Grof |
| Indirect Bilirubin | 0.7 | mg/dL | 0.0-0.9 | Calculated |
| SGOT / AST | 33.0 | U/L | 1-30 | UV Kinetic (IFCC) |
| SGPT / ALT | 22.0 | U/L | 1-45 | UV Kinetic (IFCC) |
| Alkaline Phosphatase | 85.0 | U/L | 43-115 | PNPP |
| Gamma Glutaryl Transferase (GGT) | 23.0 | U/L | 0.0-55.0 | Reflect Spectrophoto |
| Total Protein | 7.2 | g/dl | 6.4-8.3 | Biuret |
| Albumin | 4.6 | g/dL | 3.5-5.2 | BCG |
| Globulin | 2.6 | g.dl | 2.0-3.5 | Calculated |
| A/G Ratio | 1.77 | % | 1.0-2.3 | Calculated |

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DEPARTMENT OF BIOCHEMISTRY-SPECIAL

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

PROSTATE SPECIFIC ANTIGEN (TOTAL) - PSA , SERUM

| | | | | |
|-----------|------|-------|---------|------|
| Total PSA | 1.21 | ng/ml | 0.0-4.0 | CLIA |
|-----------|------|-------|---------|------|

NOTE :-

P.S.A is a highly specific for prostate tissue and may be increased in prostate cancer, benign prostate hyperplasia (BPH) and prostatitis. At present a cut off 4.1 ng/ml is used for prostate cancer screening.

PSA values greater then 10.0 ng/ml are highly predictive of cancer.

PSA levels by itself can not be used to detremine whether a patient has Prostate cancer confined to the organ.

Determination of Free PSA along with total PSA is usefull in the differentiation of Prostate cancer from benign condition.

After radical prostatectomy, serum PSA levels are (< 0.2 ng/ml), 93% of patients with undetectable serum PSA concentration have no clinical tumour recurrence.

Comments:-

1. False negative / positive results are observed in patiens receiving mouse monoclonal antibodies for diagnosis or therapy.
- 2.PSA total and free levels may appear consistently elevated/ depressed due to the interference by heterophilic antibodies and nonspecific protein binding.
- 3.Results obtained with different assay kits cannot be used interchangeably.
- 4.All results should be corelated with clinical findings and result of other investigations.



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DEPARTMENT OF BIOCHEMISTRY-SPECIAL

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------------------------------|--------|--------|-----------------|--------------------|
| THYROID PROFILE-I, SERUM | | | | |
| Trilodothyronine Total (TT3) | 1.39 | ng/dL | 0.6-1.8 | Chemilluminescence |
| Thyroxine (TT4) | 10.53 | µg/dL | 4.5-10.9 | Chemilluminescence |
| Thyroid Stimulating Hormone (TSH) | 2.440 | µIU/ml | 0.35-5.50 | Chemilluminescence |

COMMENT :- Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH

| TSH | NEW BORN | INFANT | CHILD | ADULT |
|-----------|-----------|---------|---------|---------|
| (u IU/ml) | 0.52-38.9 | 1.7-9.1 | 0.7-6.4 | 0.3-5.6 |

PREGNENCY RELATED GUIDELINES FOR REFERENCE RANGES FOR TSH

| TSH | 1st Trimester | 2nd & 3rd Trimester |
|-----------|---------------|---------------------|
| (u IU/ml) | 0.2 - 2.5 | 0.3 - 3.0 |

NOTE :- TSH levels are subject to circadian variation, reaching peak levels between 2-4 AM and at a minimum between 6-10 PM. Dose and time of drug intake also influence the test result.

Ultrasensitive kits used.

Serum T3/ FT3, T4/FT4 and TSH measurements form three components of thyroid screening panel.

- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values alongwith depressed TSH level.
- Primary hypothyroidism is accompanied by elevated serum T3 & T4 values & elevated serum TSH level.
- Normal T3 & T4 levels with high TSH indicate mild / subclinical HYPOTHYROIDISM.
- slightly elevated T3 levels may be found in pregnancy and in estrogen therapy while depressed levels may be encountered in severe illness, malnutrition, renal failure and during therapy with drugs like propranolol.
- Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (secondary hyperthyroidism).



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DEPARTMENT OF CLINICAL PATHOLOGY

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|-----------|--------|------|-----------------|--------|
|-----------|--------|------|-----------------|--------|

CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

| | | | | |
|------------------|-------|--|-------------|----------|
| Colour | STRAW | | | Visual |
| Appearance | Clear | | | Visual |
| pH | 6.0 | | 5.0-7.5 | Dipstick |
| Specific Gravity | 1.010 | | 1.002-1.030 | Dipstick |

Chemical Examination

| | | | | |
|------------------------------|--------|--|--------|--------------------|
| Albumin Urine/ Protein Urine | NIL | | NIL | Dipstick/Heat Test |
| Glucose Urine | NIL | | NIL | Dipstick/Benedict |
| Urobilinogen | NIL | | NIL | Dipstick/Ehrlichs |
| Ketones | NIL | | NIL | Dipstick/Rotheras |
| Bile Salts | ABSENT | | ABSENT | Dipstick |
| Bile Pigments | ABSENT | | ABSENT | Dipstick/Fouchets |
| Nitrite | ABSENT | | ABSENT | Dipstick |

Microscopic Examination.

| | | | | |
|---------------------|------------------|------|------------------|--|
| Pus Cells | 1-2 | /Hpf | 0-2 | |
| Epithelial Cells | 2-3 | Hpf | <10 | |
| RBC | ABSENT | /Hpf | ABSENT | |
| Casts | ABSENT | | ABSENT | |
| Crystals | ABSENT | | ABSENT | |
| Bacteria | NORMALLY PRESENT | | NORMALLY PRESENT | |
| Budding Yeast Cells | Absent | | Absent | |

*** End Of Report ***



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KUMAR, SUSHIL
 Patient ID 159905
 01/13/2024
 12:31:06pm

Male
 51yrs Indian
 Meds:

Tabular Summary

BRUCE: Total Exercise Time 07:42
 Max HR: 144 bpm 85% of max predicted 169 bpm HR at rest: 102
 Max BP: 130/90 mmHg Max RPP: 16900 mmHg*bpm
 Maximum Workload: 11.20 METS

Max. ST: -0.75 mm, 0.00 mV/s in V6; RECOVERY 03:00
 Arrhythmia: A:6
 ST/HR index: 1.07 μ V/bpm
 Location Number: * 0 *

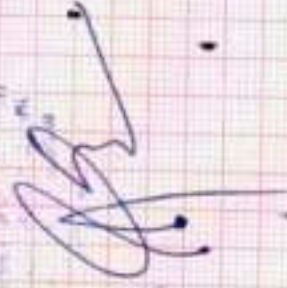
Test Reason:
 Medical History:

Ref. MD: Ordering MD:
 Technician: Test Type:
 Comment:

| Phase Name | Stage Name | Time in Stage | Speed (mph) | Grade (%) | Workload (METs) | HR (bpm) | BP (mmHg) | RPP (mmHg*bpm) | VE (/min) | ST Level (V6 mm) | Comment |
|------------|------------|---------------|-------------|-----------|-----------------|----------|-----------|----------------|-----------|------------------|---------|
| PRETEST | SUPINE | 00:23 | 0.50 | 0.00 | 1.1 | 110 | | | 0 | -0.25 | |
| EXERCISE | STAGE 1 | 03:00 | 2.20 | 0.00 | 2.6 | 112 | 120/80 | 13440 | 0 | -0.10 | |
| | STAGE 2 | 03:00 | 3.00 | 12.00 | 8.2 | 133 | 130/90 | 17290 | 0 | -0.35 | |
| | STAGE 3 | 01:42 | 3.80 | 14.00 | 11.2 | 144 | | | 0 | -0.35 | |
| RECOVERY | | 03:04 | 0.00 | 0.00 | 1.0 | 123 | 120/80 | 14760 | 0 | -0.75 | |

Test is Negative for Exercise Induced Ischemia.

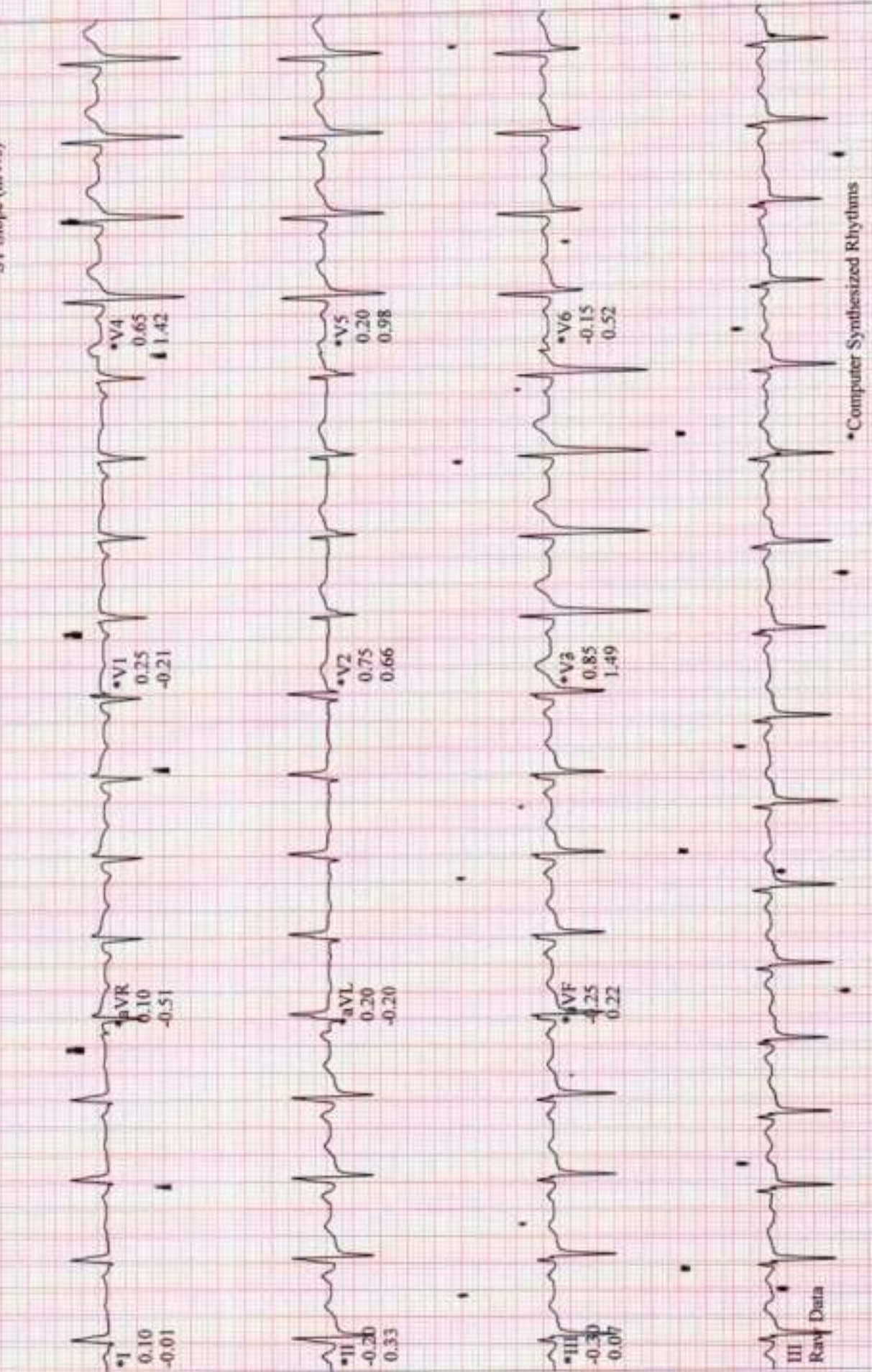
Dr. Abhishek Sharma



Lead

ST Level (mm)

ST Slope (mV/s)



Computer Synthesized Rhythms

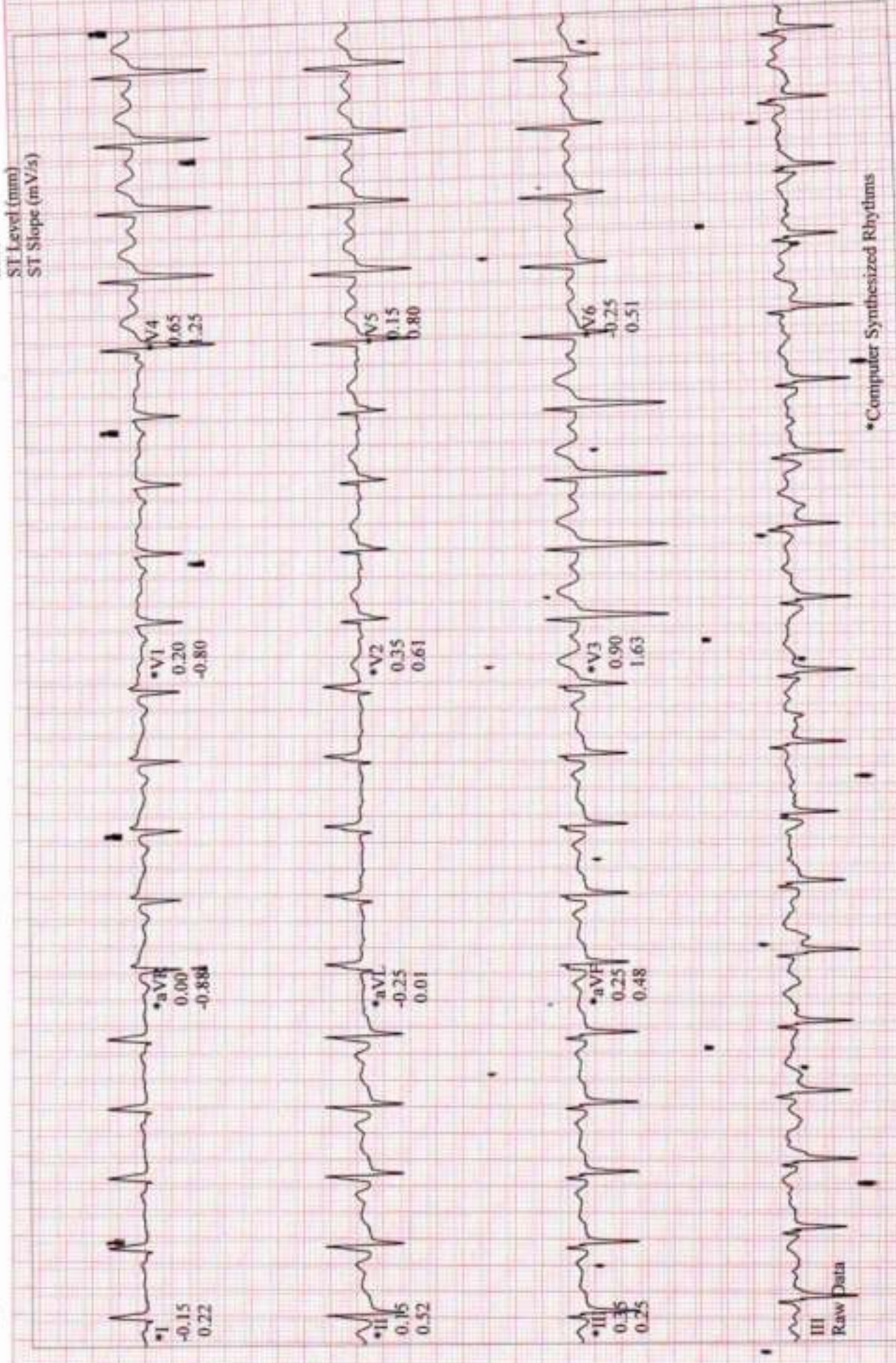
KUMAR, SUSHIL
Patient ID 159905
01/13/2024
12:34:19pm

BRUCE
2.2 mph
0.0 %

EXERCISE
STAGE 1
02:50

114 bpm
120/80 mmHg

Lead
ST Level (mm)
ST Slope (mV/s)



III
Raw Data

*Computer Synthesized Rhythms

KUMAR, SUSHIL
Patient ID 159905
01/13/2024
12:37:19pm

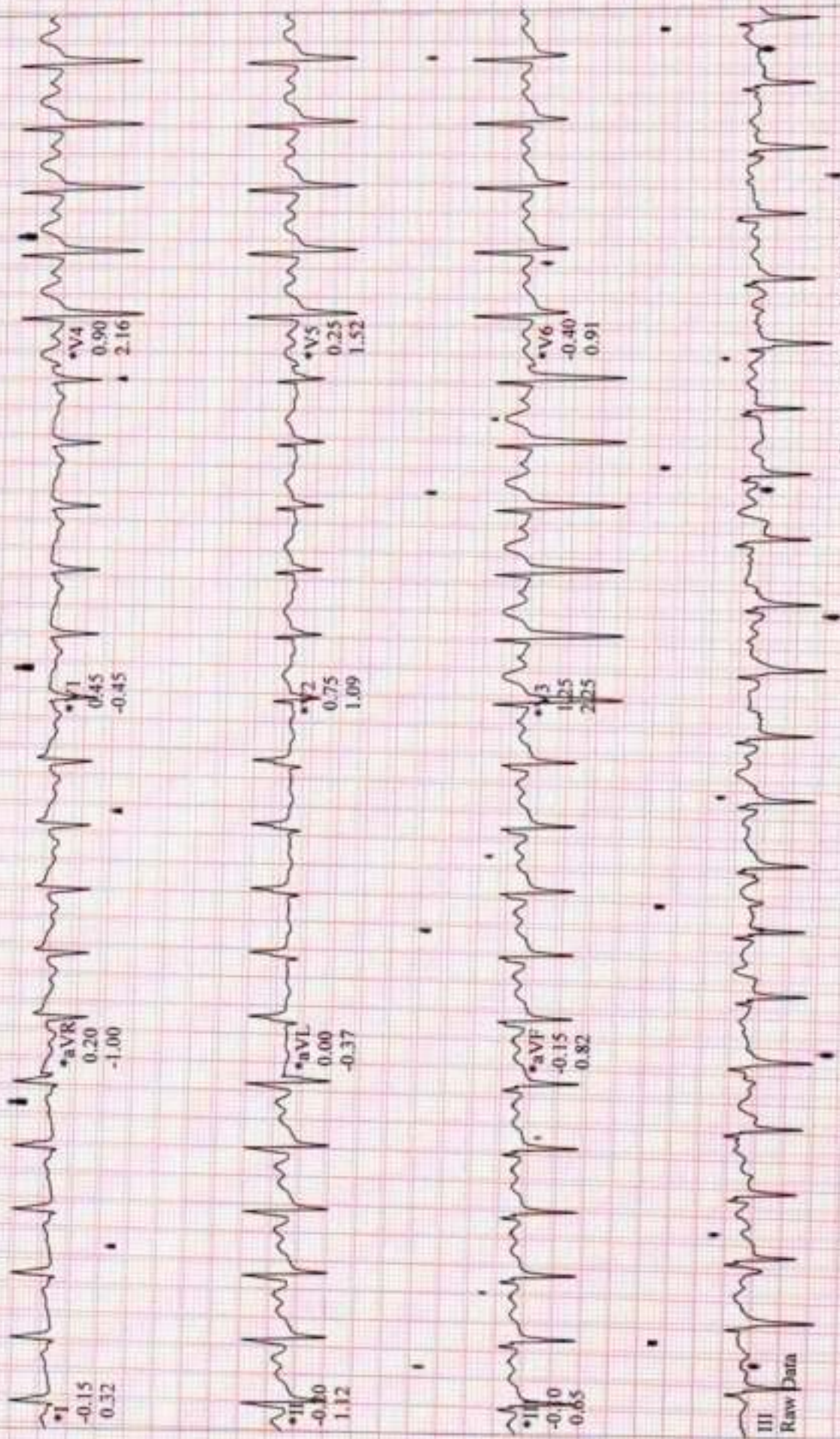
133 bpm
130/90 mmHg

Linked Medians
EXERCISE
STAGE 2
05:50

BRUCE
3.0 mph
12.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms

KUMAR, SUSHIL
Patient ID 159905
01/13/2022
12:39:08pm

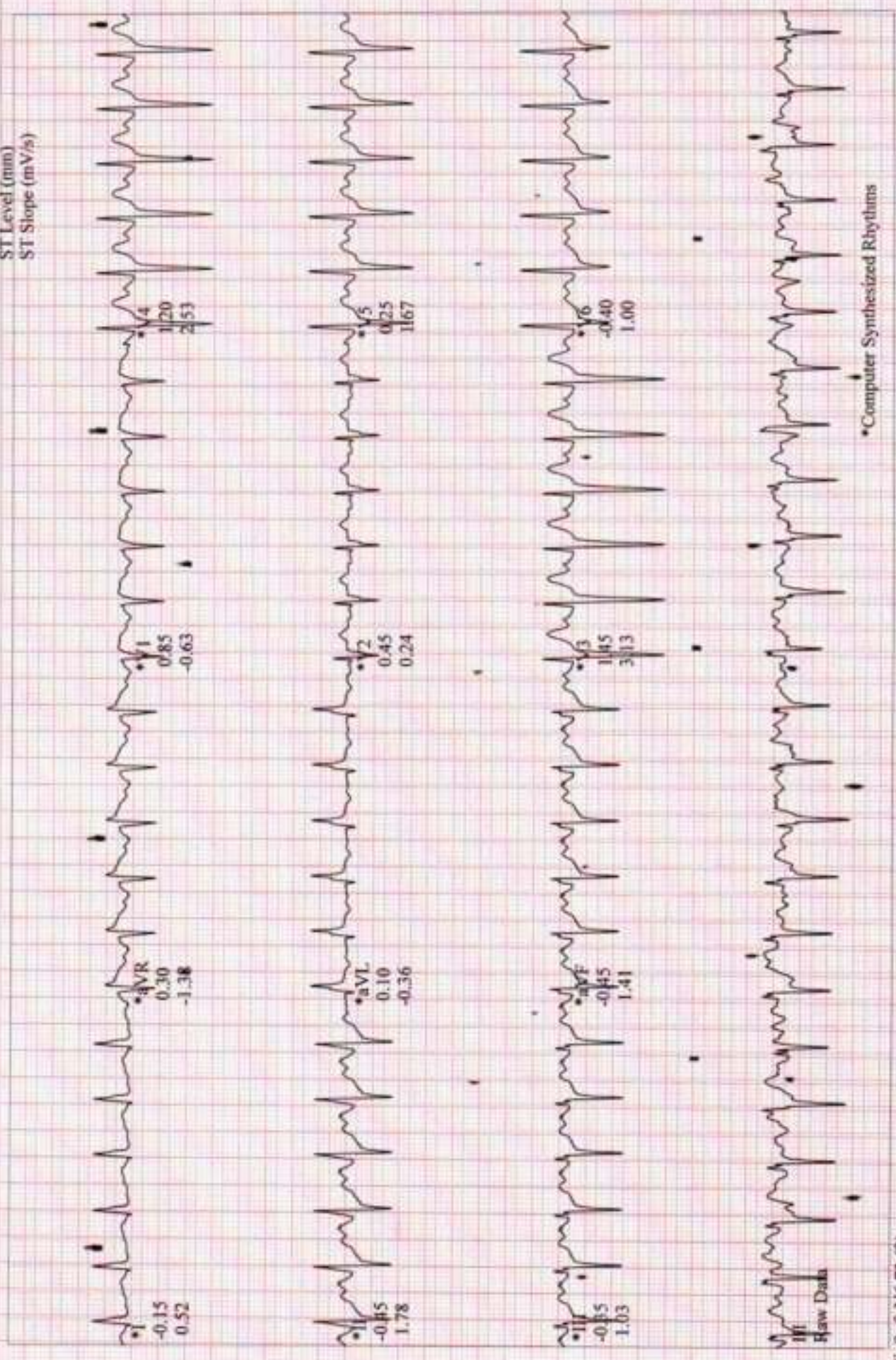
142 bpm

Linked Medians
EXERCISE
STAGE 3
07:39

BRUCE
3.8 mph
14.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms

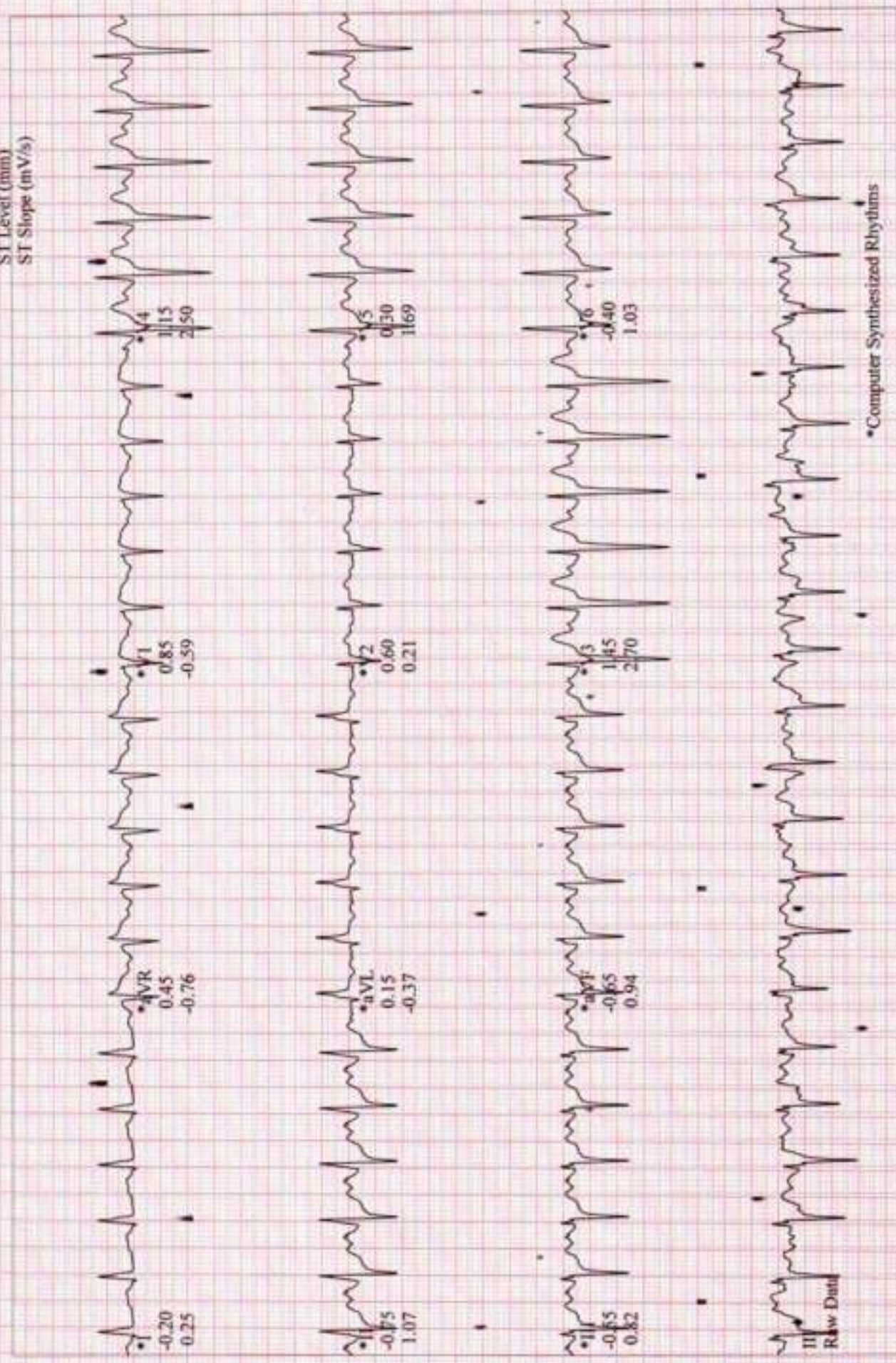
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 Patient ID 159905
 01/13/2024
 12:39:10pm

RATAN JYOTI DALMIA HEART INSTITUTE

Linked Medians (PEAK EXERCISE)
EXERCISE STAGE 3
 07:42
BRUCE
 3.8 mph
 14.0 %

144 bpm

Lead
 ST Level (mm)
 ST Slope (mV/s)



*Computer Synthesized Rhythms

KUMAR, SUSHIL
Patient ID 159905
01/13/2024
12:40:01pm

Linked Medians
RECOVERY
#1
00:50

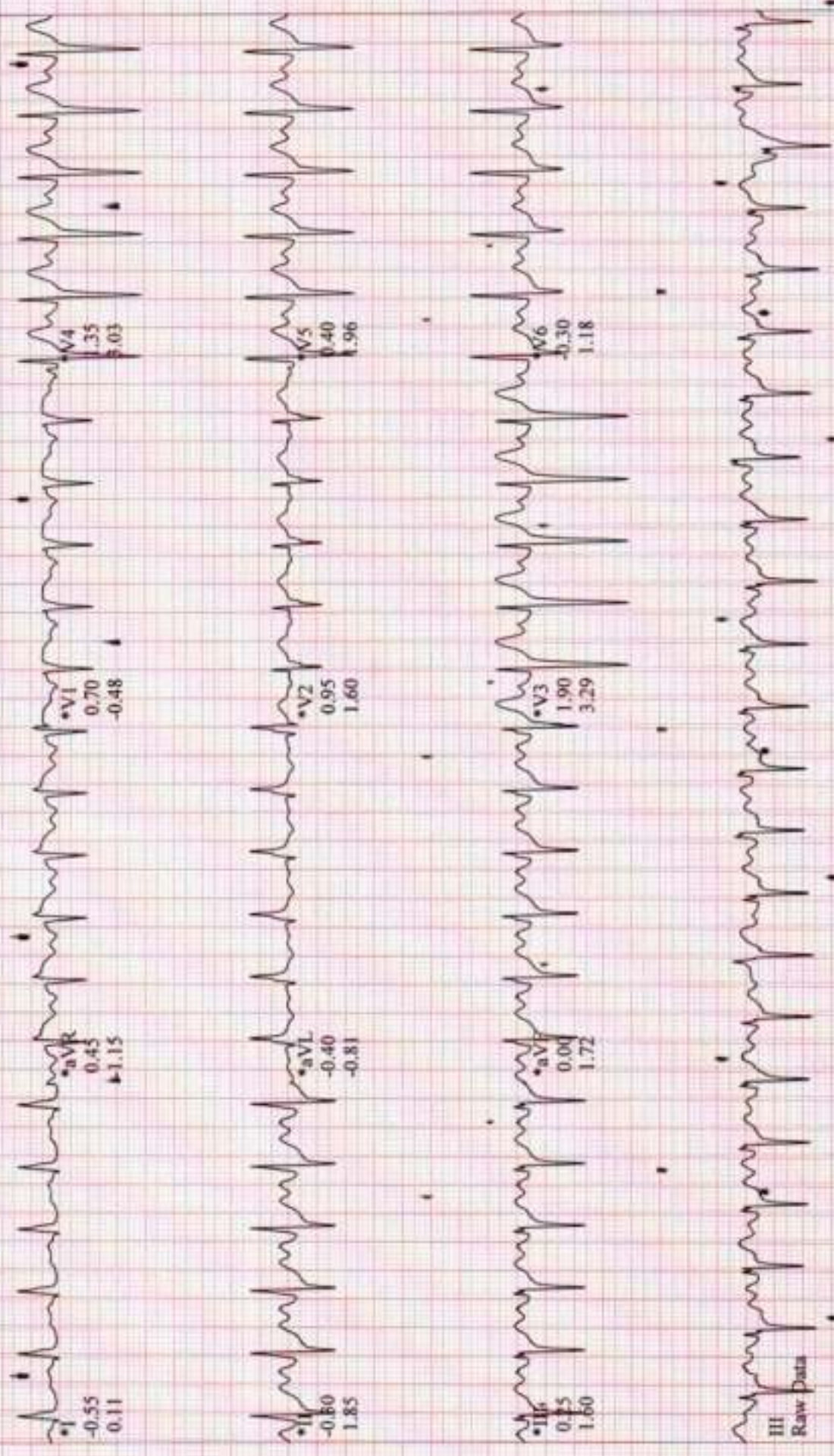
137 bpm

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BRUCE
1.5 mph
0.0 %

Lead

ST Level (mm)
ST Slope (mV/s)



III
Raw Data

*Computer Synthesized Rhythms

KUMAR, SUSHIL
Patient ID 159905
01/13/2024
12:40:11 pm

Linked Medians
RECOVERY
#1
01:00

133 bpm

BRUCE
1.5 mph
0.0 %

RATAN JYOTI DALMIA HEART INSTITUTE

Lead
ST Level (mm)
ST Slope (mV/s)



III
Raw Data

•Computer Synthesized Rhythms

KUMAR, SUSHIL
Patient ID 159905
01/13/2024
12:42:12pm

Linked Medians

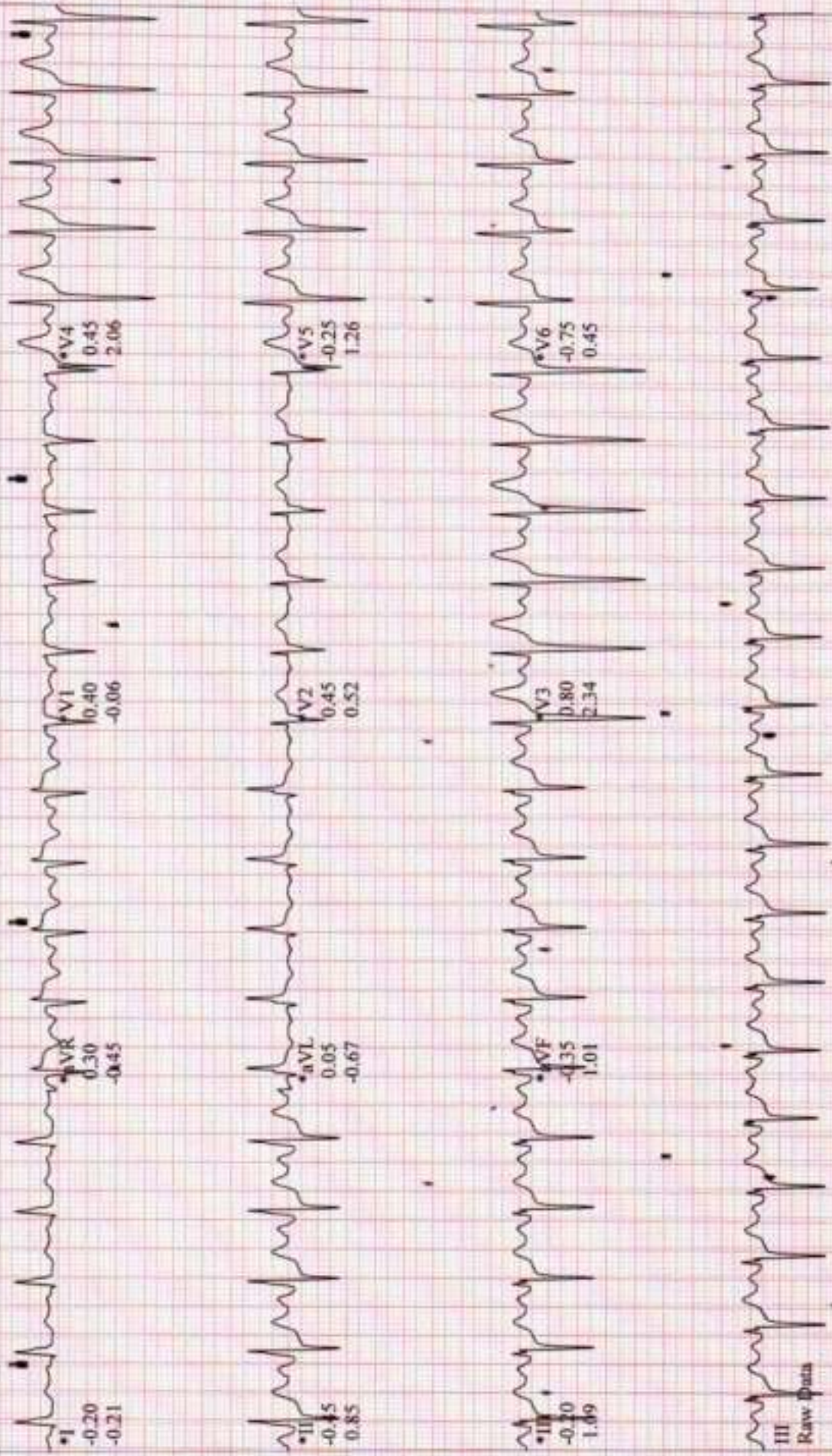
125 bpm
120/80 mmHg

RECOVERY
#1
03:00

BRUCE
0.0 mph
0.0 %

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Lead
ST Level (mm)
ST Slope (mV/s)



*Computer Synthesized Rhythms



RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE

Hospital Reg. No. : 071



18, Vikas Nagar, Near Sai Baba Mandir, Gwalior-2 (M.P) INDIA Tel. : 2423350/51, Web : www.ratanjyotigroup.org, Email : rjneye@gmail.com
Opp. Medical College, Gate No. 3 Jhansi-284128 (U.P.) Ph. 0510-2322311 (M) 9109973225

SR.NO. : 1902349 DATE : 13-January-2024
 NAME : MR SUSHIL KUMAR MRD NO. : R-113701
 AGE/SEX : 51 YRS / MALE CITY : GWALIOR

| VISION | DISTANCE | | NEAR | |
|---------------|----------|-----|------|----|
| | OD | OS | OD | OS |
| UNAIDED | | | | |
| WITH GLASSES | 6/6 | 6/6 | N6 | N6 |
| WITH PIN HOLE | 6/6 | 6/6 | | |
| WITH COLOR | | | | |
| VISION | | | | |

| IOP READING | | | | |
|-------------|----|-----------|----|-----------|
| TIME | OD | OD METHOD | OS | OS METHOD |
| 10:29AM | 17 | | 19 | |

Rx. EYE From To Instructions

1 SENSIEYES PLUS EYE DROPS 1*10ML
 (POLYETHYLENE GLYCOL 400 % PROPYLENE
 GLYCOL OPHTHALMIC SOLUTION)
 ONE DROP 4 TIMES A DAY FOR 182 DAYS BOTH EYE 13-Jan-2024 12-Jul-2024

TREATMENT PLAN : CONTINUE SAME GLASSES.
 REFERRED TO :

DR. SHRILANT THAPAK
 Reg No. 149005

NEXT REVIEW : 13-Jul-2024 11:23AM OR EARLIER IN CASE OF ANY PROBLEM

NOTE : Kindly continue medications as advised for the period advised.
 In case of redness or allergy please discontinue and inform the doctor.
 Nutritional Advice : As per treating physician
 Instructions : Patient and Attendant(s) Counseled
 Advised medicine may be replaced with a good quality generic medicine.

Speciality Clinics : * Comprehensive Ophthalmology Clinic * Cataract & IOL Clinic * Vitreo Retina & Uvea Clinic * Spectacle Removal
 Clinic (Lasik/Femto Lasik/Phakic Lens) * Cornea Clinic * Glaucoma Clinic * Orbit & Oculoplasty Clinic * Trauma Clinic * Squint Clinic
 * Paediatric Ophthalmology Clinic * Low Vision Aid Clinic * Contact Lens Clinic

CONSULTATION TIMINGS : MORNING 9:00 A.M. TO 6:00 P.M. (SUNDAY OFF)

- केन्द्रीय कर्मचारियों के लिए मान्यता प्राप्त ● कैंशलैस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध
- For Appointment Please Contact : 9111004046

स्वामी विद्यानंद भारती आई बैंक
नेत्रदान

हॉट और कारांचे इथे अपने परिवार की सहायता करांचे
 नेत्रदान के लिए संपर्क करें : 9111004046

PATIENT NAME - MR. SUSHIL KUMAR 51Y/M
REFERRED BY - H.C.P
DATE - 13/01/24
INVESTIGATION - USG WHOLE ABDOMEN

IMAGING FINDINGS:-

Liver appears normal in size, position, shape and margin. Parenchyma shows increased echogenecities. The intrahepatic biliary and portal venous radicles appear normal. Hepatic veins and portal vein are normal.

Gall Bladder Wall echo shadow seen in the GB fossa region (Patient is post prandial status)

Spleen appears normal in size (~ 7.4cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Visualized Pancreas appears normal in size, shape and echotexture. Pancreatic duct is not dilated. No USG evidence of obvious measurable focal lesion.

Both Kidneys: Measurements are right kidney - 11.1x5.2cm and left kidney - 11.1x4.8cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Ureters are undilated on either side. Mild prominence of renal pelvises seen

Urinary Bladder is normal in shape, wall and content.

Prostate appears normal in size (~ 8.1cc), shape and echotexture.

No obvious ascites.

OPINION:- Features are suggestive of-

- Wall echo shadow in the GB fossa region- ? Cholelithiasis. Review USG empty stomach is suggested
- Grade I fatty liver
- Mildly prominent bilateral renal pelvises- ? due to distended urinary bladder. Follow up is advisable

Suggested clinical correlation/Follow up imaging.



DR. SAKSHI CHAWLA
(MD RADIODIAGNOSIS)

Disclaimer: The science of radiology is based upon interpretation of shadows of normal and abnormal tissue. This is neither complete nor accurate; hence, findings should always be interpreted in to the light of clinico-pathological correlation. This is a professional opinion, not a diagnosis. Not meant for medico legal purposes. For any kind of typing error, please intimate us within 7 days of reporting.



Patient Name Sushil Kumar MRN : _____ Age 37 Sex M Date/Time 13/1/24

Mob No. _____

Investigations : (Please Tick)

- CBC
- ESR
- CRP
- S-Vit D3
- S-Vit B12
- RBS
- B Sugar - F/PP
- A1C
- LFT/KFT
- PT
- INR
- RA Factor
- Anti CCP
- HLA B27
- ANA
- HIV
- HBsAg
- Anti HCV

cto - health check up.

Ear R] EAC - clear
L] TM intact
 Ext NAS
 None → AIR sched
 midline
 muc @
 patency

Throat

L NAS

No Actual ENT Interc

[Signature]
 Dr. Sushil Kumar
 MS (ENT)
 Reg. No. MPE 1379
 R.J.N. Apollo Spectra Hospitals

Vitals

- B.P.
- SPO2
- Temp

Medical Illness

- Hypertension
- Diabetes
- Thyroid
- Cardiac Disease
- Drug Allergies

Next Appointment/Follow up

Signature :

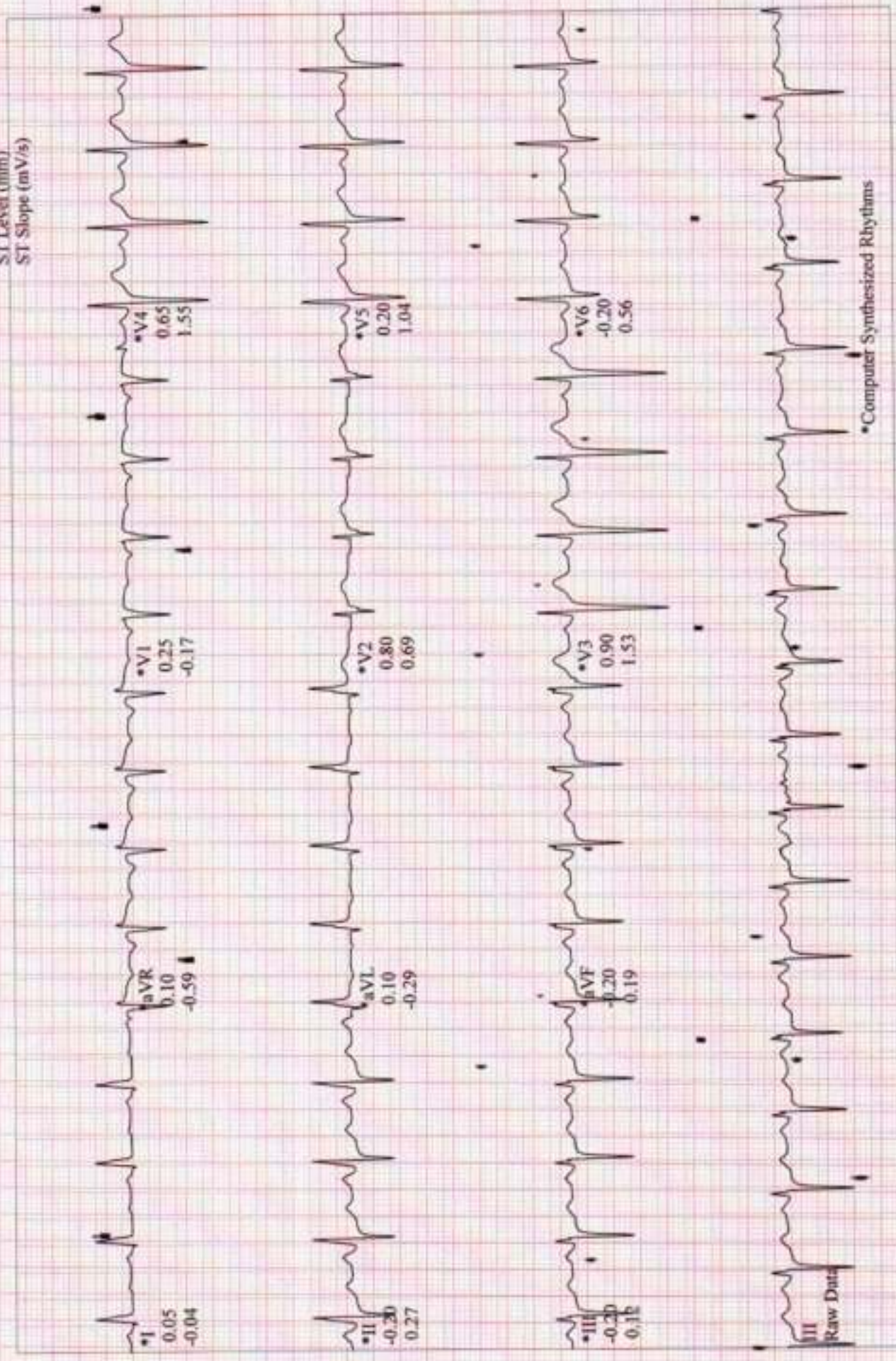
KUMAR, SUSHIL
Patient ID 159905
01/13/2024
12:31:05pm

104 bpm

ECG

Lead

ST Level (mm)
ST Slope (mV/s)



Raw Data

Computer Synthesized Rhythms

| | | | |
|---------------------|-------------------------|----------------|-----------------|
| Patient name | MR. SUSHIL KUMAR | Age/sex | 51Y/M |
| Ref. By | 159905 | Date | 13.01.24 |

XRAY CHEST

- **CT ratio increased –mild cardiomegaly .**
- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Soft tissue shadow and bony thoracic cage appears normal.

Please correlate clinically.


DR.AKANKSHA MALVIYA
MBBS, MD (RADIOLOGIST)