

Dr. Siddharth Malaiya

MBBS, MS (Ophthalmology), FLVPEI, Hyd. (Cornea & LASIK)

FBHEC, Australia (Ocular surface & Stem cells)

Fellow L V Prasad Eye Institute, Hyderabad, Ex-Faculty ASG Eye Hospital, Jodhpur

Consultant Ophthalmologist & Cornea Super-specialist

Phaco-refractive & Cornea transplant surgeon

Name: Agostha vandanoi Toppo Age/Sex: 4-3/1=

Date 14/09/2024

C/O MHC

Vision	UCVA	Glasses	Dinhal
RE	110	/ / / /	Pinhole
	619	616	611-
LE	110	1	0.0
	69	616	611

	R-0-25-10-78
AR	1000/050
	102

Wision & 3813B BE

Eye	Sphere	Cylinder		
RE		Cymidel	Axis	BCVA
		0.7,	80.	616
LE.	0.71	-0.25	100	616
Add	+ , 0	2 0		
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Ms Opholel, FLVPEI (Cornea), FCORE

Consultant Opper Streetogy & Comea Specialist
Regularia: HMP-12058

Apollo Sage Hospital - Bhopal Regd No. NH/7272/Sept. 2022 (A unit of S. R. Associates)

(A unit of S. R. Associates)

KH.No. 98/3-99-100, E-8 Arera Colony, Bhopal - 462026 (MP) India

Apollo Sage ECHOCARDIOGRAPHY REPORT

Patient's Name	Agatha Vandana Toppo	Date	14/09/2024	
Age/Sex	43Y/F	UHID	HC-48452	
Referred By	Health Check Up	Done By	Dr. Akhil Tiwari	

- -Left Ventricle: Normal Left Ventricular Size, Wall Thickness & Function.
- -Left Ventricular Ejection Fraction is within Normal Limits (LVEF: 60%)
- -Left Atrium : Normal Left Atrial Size & Functions.
- -Right Ventricle: Normal Right Ventricular Size & Functions.
- -Right Atrium : Normal Right Atrial Size & Function.
- -Valvular Structures : Normal Mitral, Tricuspid, Pulmonic & Aortic Valve Structures.
- -Trivial TR
- -Aortic Root is Normal.
- -No Evidence of Pericardial Effusion.

-No LA / LV Clot

DR. AKHIL KUMAR TIWAR

MD, FRCP (UK)

Senior Consultant, Internal Medicine Clinical Cardiology

Patient Name:	AGATHA VANDANA TOPPO	Patient ID:	ASHB.000004845	
7 (7) (3) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	43 Years	Sex:	F	HOSPITALS
Accession Number:	17101.124015250	Modality:	CR	
	Akhil Kumar Tiwari	Study:	BREAST	
	14-Sep-2024	100		

BILATERAL SONOMAMMOGRAY

Mammogram was done by routine procedure and obtaining projections of both breasts in mediolateral oblique MLO view and craciocaudal CC views.

B/L breasts parenchyma shows dense heterogeneous fibro glandular tissue parenchyma- Type C breast.

No obvious focal mass lesion.

No architectural distortion is noted.

Retroareolar region is normal.

No evidence any suspicious microcalcification is seen.

Skin and subcutaneous tissue appears normal.

Prominent right axillary fat pad is seen. No significant axillary lymphadenopathy is seen.

On USG correlation:

No obvious discrete focal mass lesion or architectural distortion. No abnormal ductal dilatation is seen on right side.

Few mildly prominent ducts seen in left retroareolar region largest measuring ~ 3.6 mm in maximum diameter with intra ductal echofree lumen

Bilateral axilla shows few subcentimetric lymph nodes with maintained fatty hilum. Left axilla shows an oval subcentrimetric lymph node (SAD about 5.2 mm) with borderline increase in cortical thickness measuring $\sim 3.3 \text{mm}$.

<u>Imp</u>:- Bilateral sonomammogram study reveals:-

- Right breast BIRADS category 1 (Negative).
- Left breast mild duct ectasia with intra ductal echofree lumen -BIRADS category 3 (Probably benign).
- Prominent right axillary fat pad with assessory breast tissue and no underlying breast mass lesion.
- Left axillary an oval subcentrimetric lymph node (SAD about 5.2mm) with borderline increased cortical thickness —? Nature likely reactive.

Adv:-Clinical correlation.

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Patient Name:	AGATHA VANDANA TOPPO	Patient ID:	ASHB.0000048452
Age:	43 Years	Sex:	F
Accession Number:	17101.224010367	Modality:	US
Referring Physician:	Akhil Kumar Tiwari	Study:	ULTRASOUND - WHOLE ABDOMEN
Study Date:	14-Sep-2024		

Liver:- is normal in size and shows mild increase in hepatic parenchymal echotexture. Portal and hepatic venous system appears normal. Intra and extra hepatic biliary radicals are not dilated.

Gall Bladder:- is normal in size and shape. Its lumen is echofree.

Pancreas is normal in size outline and echopattern.

Spleen is normal in size and echopattern.

Both kidneys are normal in size, shape and echogenicity. Central pelvicalyceal sinus and corticomedullary ratio are normal.

Right kidney measures: - 9.6x4.0cm.

Left kidney measures:- 10.7x4.9cm.

No evidence of ascites is seen.

Urinary bladder is normal in shape and contour. Its wall is normal.

Uterus:- Uterus is anteverted and shows inhomogeneous echopattern. Cervix shows normal echopattern.

Uterus measures: - 5.3x1.9x3.2cm (Post menopausal status).

Endometrial thickness is indistinct.

Ovaries:- Both ovaries are not visualized consistent with post surgical status.

No adnexal mass.

No free fluid in POD.

IMPRESSION:- Sonography Study Reveals:-

- Grade-I fatty liver.
- · Post bilateral oophorectomy status.

ADV:- Clinical Correlation.

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Patient Name:	AGATHA VANDANA TOPPO	Patient ID:	ASHB.0000048452
Age:	43 Years	Sex:	F
Accession Number:	17101.124015251	Modality:	DX
Referring Physician:	Akhil Kumar Tiwari	Study:	CHEST
Study Date:	14-Sep-2024		

X-RAY CHEST (AP VIEW)

Mid inspiratory phase film.

Mild prominence of bronchovascular marking in right para cardiac region.

Rest of the both lung fields are clear. No active pleural or parenchymal lesion is seen.

The hila, mediastinum, bony thoracic cage and the diaphragmatic domes are normal.

The costophrenic and cardiophrenic angles are clear.

Mild apparent cardiomegaly.

ADV:- Clinical Correlation.

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