



# Dept. of Radiology

(For Report Purpose Only)



REQ. DATE : 23-MAR-2024

REP. DATE : 23-MAR-2024

NAME : MISS PATIL SWAPNIL R

PATIENT CODE : 123410

AGE/SEX : 37 YR(S) / FEMALE

REFERRAL BY : Dr. HOSPITAL PATIENT

## USG ABDOMEN AND PELVIS

### OBSERVATION :

**Liver** : Is normal in size , shape & echotexture. No focal lesion / IHBR dilatation.

**CBD & PV** : Normal in caliber.

**G.B.** : Moderately distended, Normal.

**Spleen** : Is normal in size , shape & echotexture. No focal lesion.

**Pancreas** : Normal in size, shape & echotexture.

**Both kidneys** are normal in size, shape & echotexture, CMD maintained.  
No calculus/ hydronephrosis / hydroureter on either side.

Right kidney measures : 10 x 4.2 cm.

Left kidney measures : 9.8 x 4.5 cm.

**Urinary bladder** : Moderately distended, normal.

**Uterus** measures : 71 x 35 x 39 mm.

**Rt. ovary** measures : 23 x 16 x 20 mm. **Lt. ovary** measures : 25 x 21 x 16 mm.

**Uterus** : Anteverted, normal in size, shape & echotexture. No fibroid.  
Endometrium show normal appearance. ET = 65.3 mm.

**Both ovaries** : show normal features.

No demonstrable small bowel / RIF pathology.

No ascites / lymphadenopathy.

### IMPRESSION :

**No significant abnormality noted in the present study.**

- Kindly correlate clinically.

Dr. SAURABH PATIL  
(MBBS, MD(RADIOLOGY))



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## BILATERAL SONOMAMMOGRAPHY

### RT. BREAST.

**Prominent dense fibro-glandular parenchyma in the area of palpable nodule, however no discernible mass seen.**

Rest of the fibro-glandular tissue appear normal.

Skin and subcutaneous tissue appear normal.

Nipple appear normal.

No e/o axillary lymphadenopathy.

### LT. BREAST.

**Prominent dense fibro-glandular parenchyma in the area of palpable nodule, however no discernible mass seen.**

Rest of the fibro-glandular tissue appear normal.

Skin and subcutaneous tissue appear normal.

Nipple appear normal.

No e/o axillary lymphadenopathy.

### IMPRESSION :

**USG reveals, Changes of Fibroadenosis in b/l breast. (Hormonal alterations with oestrogen dominance over progesterone is considered to be an important factor).**

**No focal lesion / duct dilatation / fibroadenoma / cyst / abscess seen.**

Kindly co-relate. All abnormalities cannot be detected on USG.

Dr. SAURABH PATIL  
(MBBS, MD(RADIOLOGY))

*Patil*

**2D ECHO / COLOUR DOPPLER**

NAME : MS. SWAPNIL PATIL  
REF BY : DR. HOSPITAL PATIENT

37Yrs/F

OPD  
23-Mar-24

**M - Mode values**

**Doppler Values**

AORTIC ROOT (mm)	28	TAPSE (mm)	24
LEFT ATRIUM (mm)	28	PULMONARY PG (mmHg)	3
RV (mm)		AORTIC VEL (m/sec)	1.3
LVID - D (mm)	37	PG (mmHg)	7
LVID - S (mm)	21	MITRAL E VEL (m/sec)	0.8
IVS - D (mm)	10	A VEL (m/sec)	0.5
LVPW -D (mm)	09	TRICUSPID VEL. (m/sec)	
EJECTION FRACTION (%)	60	PG (mmHg)	

**REPORT**

Normal LV size & wall thickness.  
No regional wall motion abnormality  
Normal LV systolic function, LVEF 60%  
Normal sized other cardiac chambers.

Pliable mitral valve., No Mitral regurgitation.  
Normal mitral diastolic flows

Trileaflet aortic valve., Trivial aortic regurgitation. No aortic stenosis.

Normal Tricuspid & pulmonary valve. No tricuspid regurgitation,  
PA pressure = 20 mmHg - normal

Intact IAS & IVS  
No PDA, coarctation of aorta.  
No clots, vegetations, pericardial effusion noted.

**IMPRESSION :**

No regional wall motion abnormality.  
Normal biventricular function, LVEF 60%  
Normal PA pressure.

  
**DR. RAJDATT DEORE**  
MD,DM-CARDIOLOGIST  
MMC 2005/03/1520

(NORMAL 2D-ECHO & COLOR DOPPLER DOESN'T RULE OUT ISCHAEMIC HEART DISEASE)

ID : 2403230004

Name :  
Sex :

Divisions:

HR 77 bpm  
P Dur/PR int 92 / 129ms  
QRS Dur 94 ms  
QT/QTc int 333/351 ms  
P/QRS/T axis 44/46/37°

Data Time: 2024-03-23 09:46

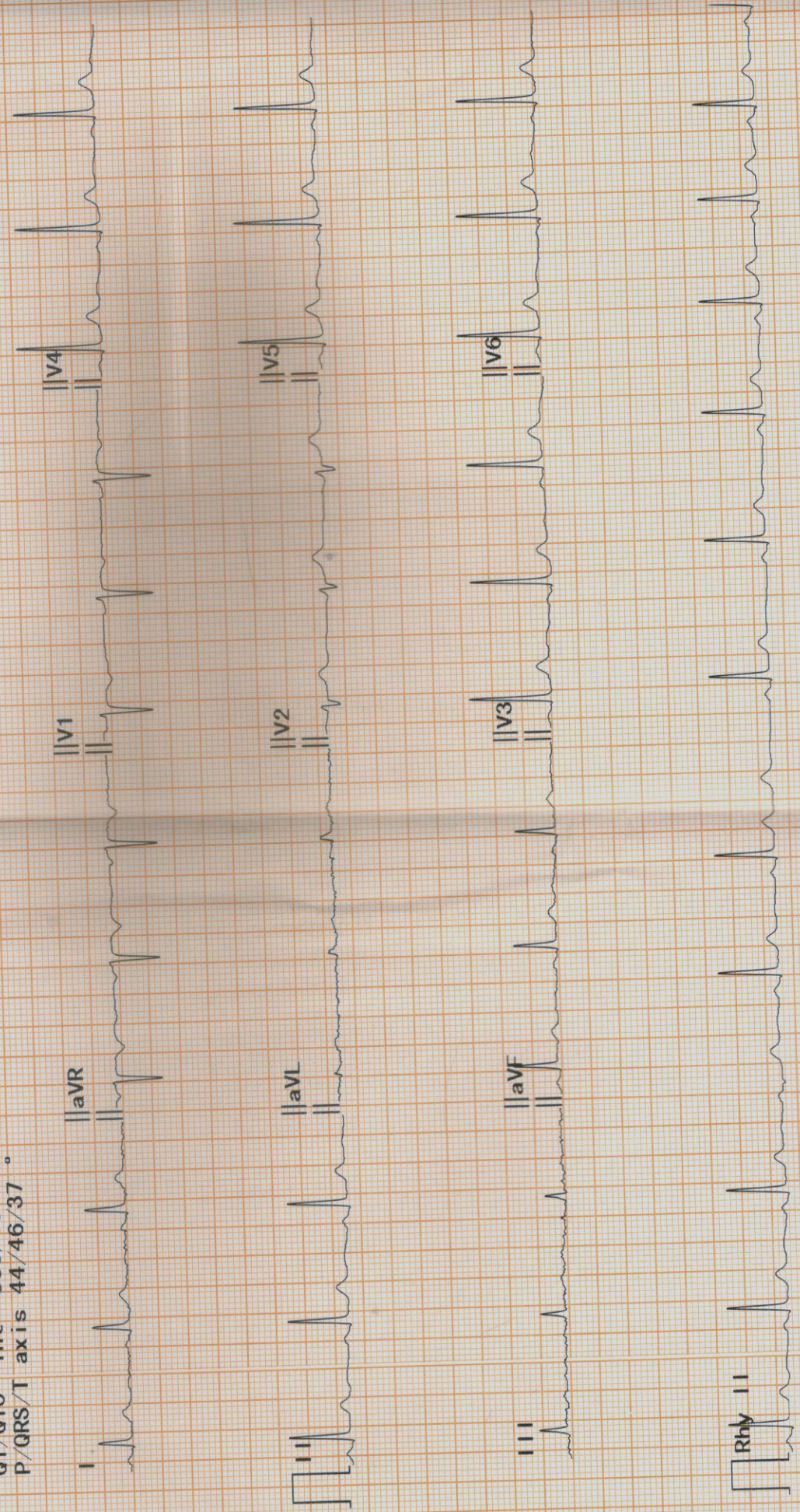
Age :  
BP : mmHg

Bed No. :  
RV5/SV1 amp 1.478/0.934mV  
RV5+SV1 amp 2.412mV  
RV6/SV2 amp 1.444/0.231mV

Hospital :  
Height : cm  
Weight : kg  
Hospital No. :

Minnesota Code  
8-9-1  
8-9-2  
9-4-1 (V3)

Diagnosis Info  
821: Sinus Arrhythmia  
851: SA Block



Diagnosis for reference, ask your doctor to confirm  
AUTO PRINT 3X4+1R 77bpm  
10 mm/mV 0.50Hz-25Hz AG 50Hz 25 mm/sec  
MICRO MED CORP  
Confirmed By:

**PATIL, SWAPNIL**  
 Patient ID 34110  
 23.03.2024  
 10:02:56

Female  
 37yrs  
 Meds:

Test Reason: Screening for CAD  
 Medical History: NO HISTORY.

Ref. MD: Ordering MD:  
 Technician: RUPALI Test Type: Treadmill Stress Test  
 Comment:

**Tabular Summary**

BRUCE: Total Exercise Time 06:16  
 Max HR: 200 bpm 109% of max predicted 183 bpm HR at rest: 93  
 Max BP: 160/95 mmHg BP at rest: 130/85 Max RPP: 28000 mmHg\*bpm  
 Maximum Workload: 7.70 METS  
 Max. ST: -0.17 mV, 0.00 mV/s in V6; EXERCISE STAGE 1 02:50  
 Arrhythmia: A:72, PVC:12, PSVC:6  
 ST/HR index: 2.35  $\mu$ V/bpm

**Reasons for Termination:** Dyspnea

**Summary:** Resting ECG: normal. Functional Capacity: normal. HR Response to Exercise: appropriate. BP Response to Exercise: normal resting BP - appropriate response. Chest Pain: none. Arrhythmias: none. ST Changes: none. Overall impression: Normal stress test.

**Conclusion:** GOOD EFFORT TOLERANCE  
 ACHIEVED 109 % THR ON RX.

NORMAL-BP RESPONSE

NO SIGNIFICANT ST-T CHANGES NOTED FOR THE GIVEN WORKLOAD  
 TACHYCARDIA NOTED DURING TEST.

STRESS TEST IS NEGATIVE FOR INDUCIBLE ISCHEMIA

DR. RAJDAJI DEORE  
 MD,DM-CARDIOLOGIST  
 MMC 2005/03/1520

Phase Name	Stage Name	Time in Stage	Speed (mph)	Grade (%)	Workload (METS)	HR (bpm)	BP (mmHg)	RPP (mmHg*bpm)	VE (/min)	ST Level (V6 mV)	Comment
PRETEST	SUPINE	00:25	0.00	0.00	1.0	78	130/85	10140	0	0.01	
	STANDING	00:08	0.00	0.00	1.0	82			0	0.01	
	HYPERV.	02:25	0.50	0.00	1.3	130	130/85	16900	0	-0.01	
EXERCISE	STAGE 1	03:00	1.70	10.00	4.6	179	130/85	23270	3	-0.09	
	STAGE 2	03:00	2.50	12.00	7.0	196	135/85	26460	0	-0.07	
	STAGE 3	00:16	3.40	14.00	7.7	200	140/85	28000	0	-0.17	
RECOVERY		02:51	0.00	0.00	1.0	126	160/95	20160	0	0.01	

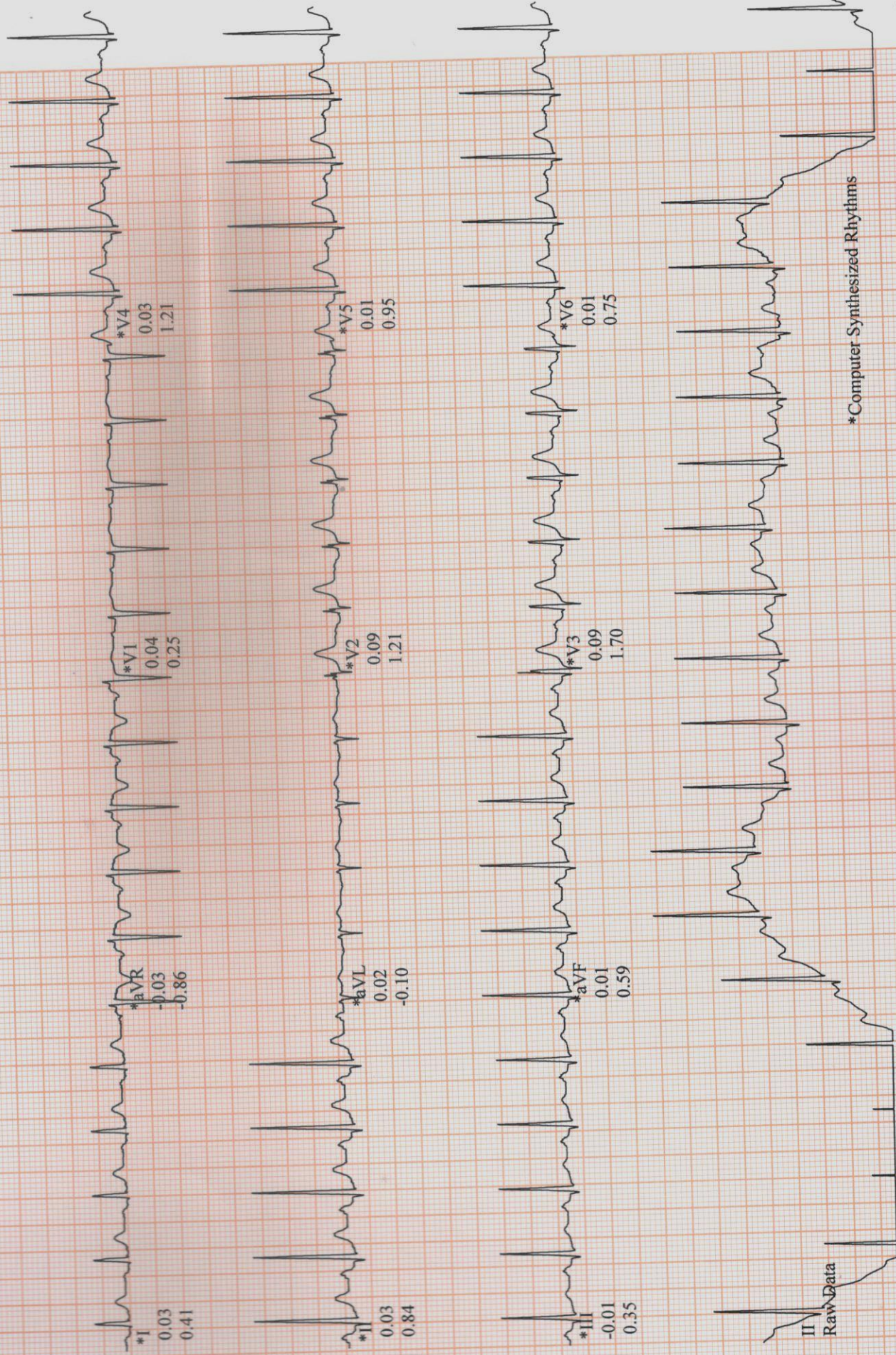
PATIL, SWAPNIL  
Patient ID 34110  
23.03.2024  
10:15:00

125 bpm  
160/95 mmHg

Linked Medians  
RECOVERY  
#1  
02:50

BRUCE  
0.0 mph  
0.0 %

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





बैंक ऑफ बड़ोदा  
Bank of Baroda



Ms. SWAPNIL RAMESH PATIL

123441

*[Signature]*

*[Signature]*  
Signature of holder

प्रति,

समन्वयक,  
Mediwheel (Arcofemi Healthcare Limited)  
हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी जिनका विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MS. PATIL SWAPNIL RAMESH
क.कू.संख्या	123441
पदनाम	START-UP CHAMP
कार्य का स्थान	PUNE, GEN_NEXT
जन्म की तारीख	11-06-1986
स्वास्थ्य जांच की प्रस्तावित तारीख	23-03-2024
बुकिंग संदर्भ सं.	23M123441100099798E

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 13-03-2024 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)





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**CHEST X-RAY PA VIEW**

**OBSERVATION :**

Both lungs appear clear.  
Heart and mediastinum are normal.  
Diaphragm and both CP angles are normal.  
Visualised bones & extra-thoracic soft tissues appear normal.

**IMPRESSION :**

No significant abnormality noted in the present study.

-Kindly correlate clinically. (ENTRY LEVEL)

*Patil*

**DR. SAURABH PATIL  
(MBBS, MD RADIOLOGY)  
CONSULTANT RADIOLOGIST**