



CID : 2406818363  
Name : MRS.DEEPA SULE  
Age / Gender : 58 Years / Female  
Consulting Dr. : -  
Reg. Location : G B Road, Thane West (Main Centre)

Collected : 08-Mar-2024 / 10:55  
Reported : 09-Mar-2024 / 18:09

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Application To Scan the Code

**MEDIWHEEL FULL BODY HEALTH CHECKUP FEMALE ABOVE 40/2D ECHO**  
**PAP SMEAR REPORT**

**Specimen** : (G/SDC - 2882/24)

Received EziPrep vial.

**Adequacy** :

Satisfactory for evaluation.

Transformation zone component absent.

**Microscopic** :

Smear reveals mainly intermediate and fewer superficial squamous cells along with mild neutrophilic infiltrate.

**Interpretation** :

**Negative for intraepithelial lesion or malignancy.**

Report as per " THE BETHESDA SYSTEM" for cervicovaginal reporting.

**Note** : : Pap test is a screening test for cervical cancer with inherent false negative results.

LBC samples will be retained for a period of one month after release of report. Any further tests required eg. HPV testing (test code: PATH007131) may be ordered within this period.

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD SDRL, Vidyavihar Lab

\*\*\* End Of Report \*\*\*



*Harini R*

**Dr.HARINI RAJU**  
**M.D. (PATH)**  
**HISTOPATHOLOGIST &**  
**CYTOPATHOLOGIST**



CID : 2406818363  
Name : Mrs DEEPA SULE  
Age / Sex : 58 Years/Female  
Ref. Dr :  
Reg. Location : G B Road, Thane West Main Centre  
Reg. Date : 08-Mar-2024  
Reported : 13-Apr-2024 / 13:17

**USG WHOLE ABDOMEN**

**EXCESSIVE BOWEL GAS:**

**LIVER:** Liver appears normal in size and echotexture. There is no intra-hepatic biliary radical dilatation. No evidence of any focal lesion.

**GALL BLADDER:** Gall bladder is partially distended. No obvious calculus.

**PORTAL VEIN:** Portal vein is normal. **CBD:** CBD is normal.

**PANCREAS:** Pancreas appears normal in echotexture. There is no evidence of any focal lesion or calcification. Pancreatic duct is not dilated.

**KIDNEYS:** Right kidney measures 8.9 x 4.1 cm. Left kidney measures 9.0 x 4.3 cm. Both kidneys are normal in size, shape and echotexture. Corticomedullary differentiation is maintained. There is no evidence of any hydronephrosis, hydroureter or calculus.

**SPLEEN:** Spleen is normal in size, shape and echotexture. No focal lesion is seen.

**URINARY BLADDER:** Urinary bladder is distended and normal. Wall thickness is within normal limits.

**UTERUS AND OVARIES:** Post hysterectomy status. No adnexal mass seen.

No free fluid or significant lymphadenopathy is seen.

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**IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IS DETECTED.**

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations. Further/follow-up imaging may be needed in some cases for confirmation / exclusion of diagnosis.

-----End of Report-----

**Dr Gauri Varma**  
Consultant Radiologist  
MBBS / DMRE  
MMC- 2007/12/4113

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Reg. No. : 2406818363	Sex : FEMALE
NAME : MRS. DEEPA SULE	Age : 58 YRS
Ref. By : -----	Date : 13.04.2024

### MAMMOGRAPHY

Bilateral mammograms have been obtained using a low radiation dose film screen technique in the cranio-caudal and oblique projections. Film markers are in the axillary / lateral portions of the breasts.

Heterogeneously dense fibroglandular pattern is noted in both breasts limiting optimal visualization .

No evidence of any abnormal density mass lesion / nipple retraction is seen.

No architectural distortion is seen.

Both nipple shadows and subcutaneous soft tissue shadows appear normal .No abnormal skin thickening is seen. Few lymph nodes noted in both axilla with preserved fatty hilum.

On Sonomammography of both breasts mixed fibroglandular tissues are seen .


No focal solid or cystic mass lesion is seen in both breasts. No duct ectasia is seen. Both retromammary regions appear normal.No significant axillary lymphadenopathy is seen.

#### **IMPRESSION:**

**NO SIGNIFICANT ABNORMALITY IN BOTH BREASTS.**

**ACR BIRADS CATEGORY I BOTH BREASTS.**

Note:Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. USG is known to have inter-observer variations.



**DR.GAURI VARMA**  
**MBBS,DMRE**  
**(CONSULTANT RADIOLOGIST)**