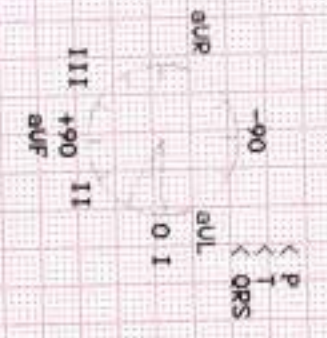


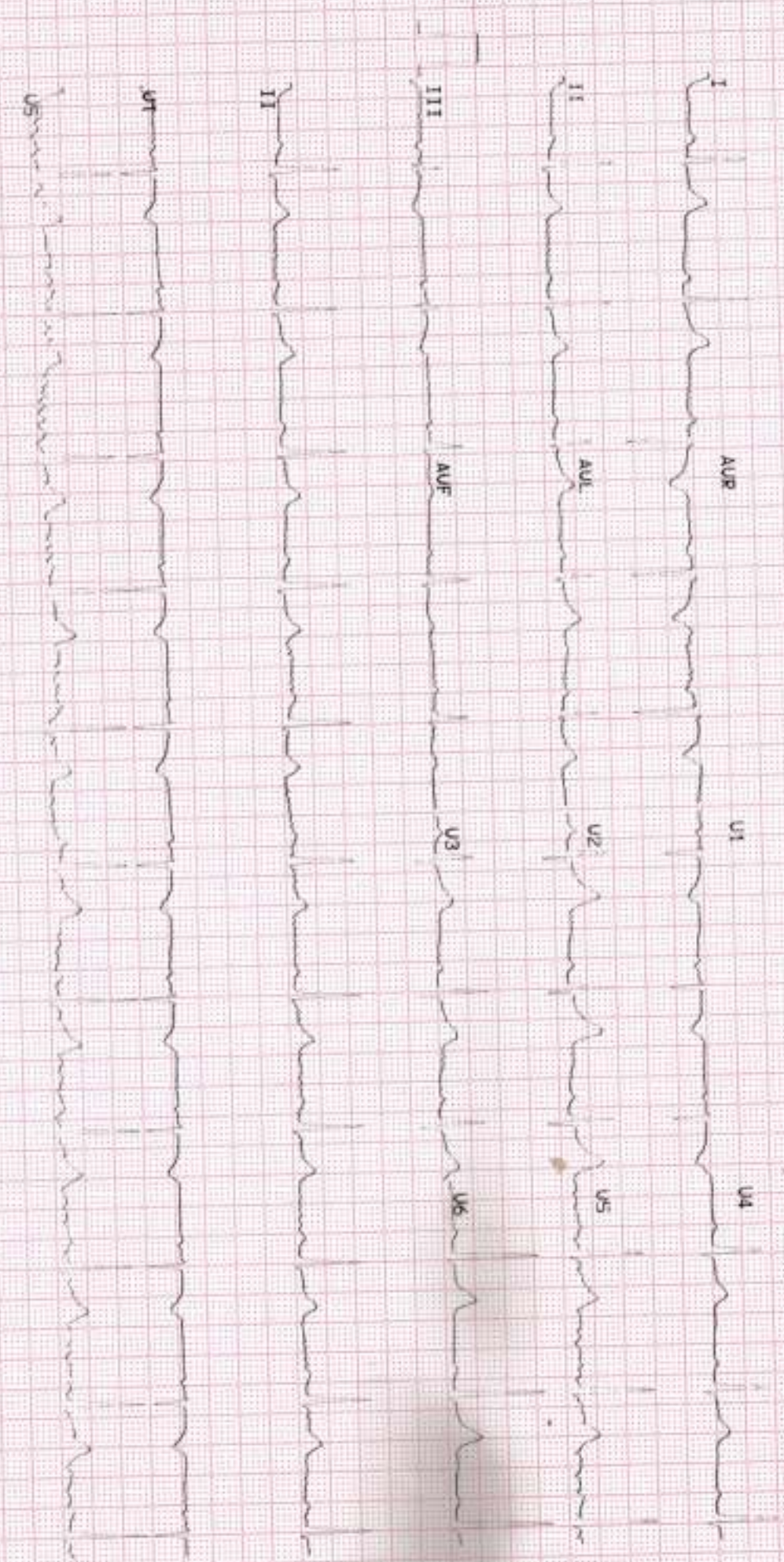
Measurement Results:

PRP 86 ms  
QRS 424 / 437 ms  
QT/QTcB 168 ms / 106 ms  
P 922 / 935 ms  
PR/PP 21 / 34 / 4 degrees  
P/QRS/T



Interpretation:  
12SL - Interpretation:  
Normal sinus rhythm  
Normal ECG

Unconfirmed report.





Dr. Abiramasundari D.  
 Dr. Ajay R Kaushik  
 Dr. Andrea Jose  
 Dr. Archana Terasa P.  
 Dr. Ashraya Nayaka T.E  
 Dr. Ashwin Segi  
 Dr. Chitra Ramamurthy  
 Dr. Fijo Kuraikose  
 Dr. Gautam Kukadia  
 Dr. Gitansha Shreyas Sachdev  
 Dr. Gopal R.  
 Dr. Gopinathan G.S  
 Dr. Hemanth Murthy  
 Dr. Iris  
 Dr. Jasinder Singh  
 Dr. Jezeela K.  
 Dr. Krishnan R.  
 Dr. Maimunnisa M.  
 Dr. Manjula  
 Dr. Mohamed Faizal S.  
 Dr. Mugdha Kumar  
 Dr. Muralidhar R.  
 Dr. Muralidhar N.S.  
 Dr. Nagesh  
 Dr. Naveen P.  
 Dr. Neha Prakash Zanjal  
 Dr. Neha Rathi Kamal  
 Dr. Nihaal Ahmed F.D.  
 Dr. Patil Sandip Dattatray  
 Dr. Pavithra  
 Dr. Praburam Niranjan G  
 Dr. Pranesh Ravi  
 Dr. Praveen Murthy  
 Dr. Preethi  
 Dr. Priyanka R.  
 Dr. Priyanka Anandamoorthi  
 Dr. Priyanka Shyam  
 Dr. Priyanka Singh  
 Dr. Raline Solomon  
 Dr. Ramamurthy D.  
 Dr. Rashmita Kukadia  
 Dr. Ravi J.  
 Dr. Rifky Kamil K.  
 Dr. Sagar Basu  
 Dr. Sahana Manish  
 Dr. Sakthi Rajeswari N.  
 Dr. Sethukarasi  
 Dr. Shalini Butola  
 Dr. Sharmila M.  
 Dr. Shreesh Kumar K.  
 Dr. Shreyas Ramamurthy  
 Dr. Smitha Sharma  
 Dr. Soundarya B.  
 Dr. Srinivas Rao V.K.  
 Dr. Suchieta Jennil P  
 Dr. Sumanth  
 Dr. Swathi Baliga  
 Dr. Tamilarasi S.  
 Dr. Thenarasun S.A.  
 Dr. Umesh Krishna  
 Dr. Uma M.  
 Dr. Vamsi K.  
 Dr. Vidhya N.  
 Dr. Vijay Kumar S.  
 Dr. Visalatchi



# THE EYE FOUNDATION

SUPER SPECIALITY EYE HOSPITALS

City Shopping Centre, Kokkirakulam, Trivandrum Road, Tirunelveli - 627 003.

Tel : 0462 435 6655 / 6622

E-mail : tirunelveli@theeyefoundation.com Website : www.theeyefoundation.com

H.O : D.B. Road, Coimbatore - 641 002.



Date: 9/3/24

## Eye Fitness Certificate

This is to certify that Mr/Mrs/Ms. Joseph Antony Steffina Age 31 yrs

Male/Female, our MRNO... 13026247

	OD	OS
Visual Acuity	<u>+1.25 x 180 6/6</u>	<u>+0.75 x 180 6/6</u>
Near Vision	<u>N6</u>	<u>N6</u>
Colour Vision	<u>Normal</u>	<u>Normal</u>
B.S.V	<u>Present</u>	<u>Present</u>
Central Fields	<u>Normal</u>	<u>Normal</u>
Anterior Segment	<u>Normal</u>	<u>Normal</u>
Fundus	<u>Normal</u>	<u>Normal</u>

Medical Consultant,  
 The Eye Foundation,  
 Tirunelveli.

**Dr. PATIL SANDIP DATTATRAY**  
 MBBS, M.S. (OPHTHAL)  
 REG. No : G 59864  
 THE EYE FOUNDATION  
 TIRUNELVELI.

# MEDICAL EXAMINATION REPORT

Name F. JOSEPH ANTONY STEFFWA Gender M/F Date of Birth 11/09/1990

Position Selected For  Identification marks

## A. HISTORY:

1. Do you have, or are you being treated for, any of the following conditions? (please tick all that apply)?

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Anxiety                        | <input type="checkbox"/> Cancer  | <input type="checkbox"/> High Blood Pressure                        |
| <input type="checkbox"/> Arthritis                      | <input type="checkbox"/> Depression/ bipolar disorder  | <input type="checkbox"/> High Cholesterol                           |
| <input type="checkbox"/> Asthama, Bronchitis, Emphysema | <input type="checkbox"/> Diabetes  | <input type="checkbox"/> Migraine Headaches                         |
| <input type="checkbox"/> Back or spinal problems        | <input type="checkbox"/> Heart Disease   | <input type="checkbox"/> Sinusitis or Allergic Rhinitis (Hay Fever) |
| <input type="checkbox"/> Epilepsy                       | <input type="checkbox"/> Any other serious problem for which you are receiving medical attention |   |

2. List the medications taken Regularly.

3. List allergies to any known medications or chemicals

4. Alcohol : Yes  No  Occasional

5. Smoking : Yes  No  Quit (more than 3 years)

6. Respiratory Function :

- a. Do you become unusually short of breath while walking fast or taking stair - case? Yes  No
- b. Do you usually cough a lot first thing in morning? Yes  No
- c. Have you vomited or coughed out blood? Yes  No

7. Cardiovascular Function & Physical Activity :

- a. Exercise Type: (Select 1)
- No Activity
  - Very Light Activity (Seated At Desk, Standing)
  - Light Activity (Walking on level surface, house cleaning)
  - Moderate Activity (Brisk walking, dancing, weeding)
  - Vigorous Activity (Soccer, Running)
- b. Exercise Frequency: Regular (less than 3 days/ week) / Irregular (more than 3 days/ Week)
- c. Do you feel pain in chest when engaging in physical activity? Yes  No

8. Hearing :

- a. Do you have history of hearing troubles? Yes  No
- b. Do you experiences ringing in your ears? Yes  No
- c. Do you experience discharge from your ears? Yes  No
- d. Have you ever been diagnosed with industrial deafness? Yes  No

9. Musculo - Skeletal History

- a. Neck : Have you ever injured or experienced pain? Yes  No
- b. Back : If Yes : approximate date (MM/YYYY)
- c. Shoulder, Elbow, Wrists, Hands : Consulted a medical professional ? Yes  No
- d. Hips, Knees, Ankles, Legs : Resulted in time of work? Yes  No
- Surgery Required ? Yes  No
- Ongoing Problems ? Yes  No

**10. Function History**

- a. Do you have pain or discomfort when lifting or handling heavy objects? Yes  No
  - b. Do you have knee pain when squatting or kneeling? Yes  No
  - c. Do you have back pain when forwarding or twisting? Yes  No
  - d. Do you have pain or difficulty when lifting objects above your shoulder height? Yes  No
  - e. Do you have pain when doing any of the following for prolonged periods (Please circle appropriate response)
- Walking : Yes  No       •Kneeling : Yes  No       •Squatting : Yes  No
- Climbing : Yes  No       •Sitting : Yes  No
- Standing : Yes  No       •Bending : Yes  No
- f. Do you have pain when working with hand tools? Yes  No
  - g. Do you experience any difficulty operating machinery? Yes  No
  - h. Do you have difficulty operating computer instrument? Yes  No

**B. CLINICAL EXAMINATION :**

Chest - 36  
Hip - 25

Pulse - 73

a. Height       b. Weight       Blood Pressure  mmhg

Chest measurements: a. Normal       b. Expanded

Waist Circumference       Ear, Nose & Throat

Skin       Respiratory System

Vision       Nervous System

Circulatory System       Genito-urinary System

Gastro-intestinal System       Colour Vision

Discuss Particulars of Section B :-

**C. REMARKS OF PATHOLOGICAL TESTS :**

Chest X-ray       ECG

Complete Blood Count       Urine routine

Serum cholesterol       Blood sugar

Blood Group       S.Creatinine

**D. CONCLUSION :**

Any further investigations required       Any precautions suggested

**E. FITNESS CERTIFICATION**

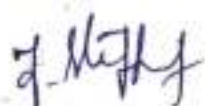
Certified that the above named recruit does not appear to be suffering from any disease communicable or otherwise, constitutional weakness or bodily infirmity except \_\_\_\_\_

\_\_\_\_\_ . I do not consider this as disqualification for employment in the Company. S

Candidate is free from Contagious/Communicable disease



Signature of Medical Adviser  
**Dr. S. MANIKANDAN, M.D., D.M.**  
 Reg.No: 61785, Consultant Cardiologist  
**Medall Diagnostics**  
 Tirunelveli - 3

Date : 10.3.24  


Name : Mrs. JOSEPH ANTONY STEFFINA  
 PID No. : MED121727126  
 SID No. : 624006329  
 Age / Sex : 33 Year(s) / Female  
 Ref. Dr : MediWheel

Register On : 09/03/2024 9:31 AM  
 Collection On : 09/03/2024 9:57 AM  
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 Type : OP



**Investigation**                                      **Observed Value**                                      **Unit**                                      **Biological Reference Interval**

**IMMUNOHAEMATOLOGY**

**BLOOD GROUPING AND Rh TYPING (Blood /Agglutination)**      'O' 'Positive'

**HAEMATOLOGY**

*Complete Blood Count With - ESR*

<b>Haemoglobin</b> (Blood/Spectrophotometry)	9.2	g/dL	12.5 - 16.0
<b>Packed Cell Volume(PCV)/Haematocrit</b> (Blood/Derived from Impedance)	32.9	%	37 - 47
<b>RBC Count</b> (Blood/Impedance Variation)	4.15	mill/cu.mm	4.2 - 5.4
<b>Mean Corpuscular Volume(MCV)</b> (Blood/Derived from Impedance)	79	fL	78 - 100
<b>Mean Corpuscular Haemoglobin(MCH)</b> (Blood/Derived from Impedance)	22.1	pg	27 - 32
<b>Mean Corpuscular Haemoglobin concentration(MCHC)</b> (Blood/Derived from Impedance)	27.9	g/dL	32 - 36
<b>RDW-CV</b> (Derived from Impedance)	16.1	%	11.5 - 16.0
<b>RDW-SD</b> (Derived from Impedance)	44.52	fL	39 - 46
<b>Total Leukocyte Count (TC)</b> (Blood/ Impedance Variation)	7000	cells/cu.mm	4000 - 11000
<b>Neutrophils</b> (Blood/Impedance Variation & Flow Cytometry)	50.9	%	40 - 75
<b>Lymphocytes</b> (Blood/Impedance Variation & Flow Cytometry)	38.7	%	20 - 45
<b>Eosinophils</b> (Blood/Impedance Variation & Flow Cytometry)	3.0	%	01 - 06
<b>Monocytes</b> (Blood/Impedance Variation & Flow Cytometry)	7.2	%	01 - 10
<b>Basophils</b> (Blood/Impedance Variation & Flow Cytometry)	0.2	%	00 - 02

**INTERPRETATION:** Tests done on Automated Five Part cell counter. All abnormal results are reviewed and confirmed microscopically.

<b>Absolute Neutrophil count</b> (Blood/ Impedance Variation & Flow Cytometry)	3.56	$10^3 / \mu\text{l}$	1.5 - 6.6
<b>Absolute Lymphocyte Count</b> (Blood/ Impedance Variation & Flow Cytometry)	2.71	$10^3 / \mu\text{l}$	1.5 - 3.5
<b>Absolute Eosinophil Count (AEC)</b> (Blood/ Impedance Variation & Flow Cytometry)	0.21	$10^3 / \mu\text{l}$	0.04 - 0.44
<b>Absolute Monocyte Count</b> (Blood/ Impedance Variation & Flow Cytometry)	0.50	$10^3 / \mu\text{l}$	< 1.0



Dr.R.Lavanya MD  
 Consultant - Pathologist  
 Reg No: 90632

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**PID No.** : MED121727126  
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**Age / Sex** : 33 Year(s) / Female  
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b>Absolute Basophil count</b> (Blood/Impedance Variation & Flow Cytometry)	0.01	10 <sup>3</sup> / μl	< 0.2
<b>Platelet Count</b> (Blood/Impedance Variation)	293	10 <sup>3</sup> / μl	150 - 450
<b>MPV</b> (Blood/Derived from Impedance)	8.4	fL	8.0 - 13.3
<b>PCT</b> (Automated Blood cell Counter)	0.25	%	0.18 - 0.28
<b>ESR (Erythrocyte Sedimentation Rate)</b> (Blood/Automated ESR analyser)	<b>35</b>	mm/hr	< 20

## BIOCHEMISTRY

<b>BUN / Creatinine Ratio</b>	10.12		
<b>Glucose Fasting (FBS)</b> (Plasma - F/GOD-PAP)	86.8	mg/dL	Normal: < 100 Pre Diabetic: 100 - 125 Diabetic: >= 126

**INTERPRETATION:** Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level.

<b>Glucose, Fasting (Urine)</b> (Urine - F)	Negative	Negative
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<b>Glucose Postprandial (PPBS)</b> (Plasma - PP/GOD-PAP)	94.5	mg/dL	70 - 140
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### **INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

<b>Urine Glucose(PP-2 hours)</b> (Urine - PP)	Negative	Negative
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<b>Blood Urea Nitrogen (BUN)</b> (Serum/Urease UV / derived)	8.50	mg/dL	7.0 - 21
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<b>Creatinine</b> (Serum/Modified Jaffe)	0.84	mg/dL	0.6 - 1.1
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<b>Uric Acid</b> (Serum/Enzymatic)	2.8	mg/dL	2.6 - 6.0
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### Liver Function Test

<b>Bilirubin(Total)</b> (Serum)	0.30	mg/dL	0.1 - 1.2
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<b>Bilirubin(Direct)</b> (Serum/Diazotized Sulfanilic Acid)	0.14	mg/dL	0.0 - 0.3
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<b>Bilirubin(Indirect)</b> (Serum/Derived)	0.16	mg/dL	0.1 - 1.0
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<b>SGOT/AST (Aspartate Aminotransferase)</b> (Serum/Modified IFCC)	22.9	U/L	5 - 40
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<b>SGPT/ALT (Alanine Aminotransferase)</b> (Serum)	13.2	U/L	5 - 41
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<b>GGT(Gamma Glutamyl Transpeptidase)</b> (Serum/IFCC / Kinetic)	12.1	U/L	< 38
---	------	-----	------



*R. Lavanya*  
**Dr. R. Lavanya MD**  
 Consultant - Pathologist  
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b>Alkaline Phosphatase (SAP)</b> (Serum/Modified IFCC)	89.9	U/L	42 - 98
<b>Total Protein</b> (Serum/Biuret)	7.32	gm/dL	6.0 - 8.0
<b>Albumin</b> (Serum/Bromocresol green)	3.98	gm/dL	3.5 - 5.2
<b>Globulin</b> (Serum/Derived)	3.34	gm/dL	2.3 - 3.6
<b>A : G RATIO</b> (Serum/Derived)	1.19		1.1 - 2.2
<b><u>Lipid Profile</u></b>			
<b>Cholesterol Total</b> (Serum/CHOD-PAP with ATCS)	174.5	mg/dL	Optimal: < 200 Borderline: 200 - 239 High Risk: >= 240
<b>Triglycerides</b> (Serum/GPO-PAP with ATCS)	112.0	mg/dL	Optimal: < 150 Borderline: 150 - 199 High: 200 - 499 Very High: >= 500

**INTERPRETATION:** The reference ranges are based on fasting condition. Triglyceride levels change drastically in response to food, increasing as much as 5 to 10 times the fasting levels, just a few hours after eating. Fasting triglyceride levels show considerable diurnal variation too. There is evidence recommending triglycerides estimation in non-fasting condition for evaluating the risk of heart disease and screening for metabolic syndrome, as non-fasting sample is more representative of the `usual\_circulating level of triglycerides during most part of the day.

<b>HDL Cholesterol</b> (Serum/Immunoinhibition)	<b>44.7</b>	mg/dL	Optimal(Negative Risk Factor): >= 60 Borderline: 50 - 59 High Risk: < 50
<b>LDL Cholesterol</b> (Serum/Calculated)	<b>107.4</b>	mg/dL	Optimal: < 100 Above Optimal: 100 - 129 Borderline: 130 - 159 High: 160 - 189 Very High: >= 190
<b>VLDL Cholesterol</b> (Serum/Calculated)	22.4	mg/dL	< 30
<b>Non HDL Cholesterol</b> (Serum/Calculated)	129.8	mg/dL	Optimal: < 130 Above Optimal: 130 - 159 Borderline High: 160 - 189 High: 190 - 219 Very High: >= 220

**INTERPRETATION:** 1.Non-HDL Cholesterol is now proven to be a better cardiovascular risk marker than LDL Cholesterol.  
2.It is the sum of all potentially atherogenic proteins including LDL, IDL, VLDL and chylomicrons and it is the "new bad cholesterol" and is a co-primary target for cholesterol lowering therapy.



  
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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<b>Total Cholesterol/HDL Cholesterol Ratio</b> (Serum/Calculated)	3.9		Optimal: < 3.3 Low Risk: 3.4 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0 High Risk: > 11.0
<b>Triglyceride/HDL Cholesterol Ratio</b> <b>(TG/HDL)</b> (Serum/Calculated)	2.5		Optimal: < 2.5 Mild to moderate risk: 2.5 - 5.0 High Risk: > 5.0
<b>LDL/HDL Cholesterol Ratio</b> (Serum/ Calculated)	2.4		Optimal: 0.5 - 3.0 Borderline: 3.1 - 6.0 High Risk: > 6.0
<b><u>Glycosylated Haemoglobin (HbA1c)</u></b>			
<b>HbA1C</b> (Whole Blood/Ion exchange HPLC by D10)	5.4	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

**INTERPRETATION:** If Diabetes - Good control : 6.1 - 7.0 % , Fair control : 7.1 - 8.0 % , Poor control >= 8.1 %

**Estimated Average Glucose** (Whole Blood) 108.28 mg/dL

**INTERPRETATION: Comments**

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations. Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency, hypertriglyceridemia, hyperbilirubinemia, Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values. Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly, Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

**IMMUNOASSAY**

**THYROID PROFILE / TFT**

**T3 (Triiodothyronine) - Total** (Serum/  
Chemiluminescent Immunometric Assay  
(CLIA)) 1.21 ng/mL 0.7 - 2.04

**INTERPRETATION:**

**Comment :**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

**T4 (Tyroxine) - Total** (Serum/  
Chemiluminescent Immunometric Assay  
(CLIA)) 10.45 µg/dL 4.2 - 12.0

**INTERPRETATION:**

**Comment :**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.



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<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
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<b>TSH (Thyroid Stimulating Hormone)</b> (Serum /Chemiluminescent Immunometric Assay (CLIA))	3.76	μIU/mL	0.35 - 5.50
--	------	--------	-------------

**INTERPRETATION:**

Reference range for cord blood - upto 20  
1 st trimester: 0.1-2.5  
2 nd trimester 0.2-3.0  
3 rd trimester : 0.3-3.0  
(Indian Thyroid Society Guidelines)

**Comment :**

- 1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
- 2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM.The variation can be of the order of 50%,hence time of the day has influence on the measured serum TSH concentrations.
- 3.Values&amp;lt;0.03 μIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.

## CLINICAL PATHOLOGY

### Urine Analysis - Routine

<b>Colour</b> (Urine)	Pa;le yellow		Yellow to Amber
<b>Appearance</b> (Urine)	Clear		Clear
<b>Protein</b> (Urine)	Negative		Negative
<b>Glucose</b> (Urine)	Negative		Negative
<b>Pus Cells</b> (Urine)	<b>2-4</b>	/hpf	NIL
<b>Epithelial Cells</b> (Urine)	<b>1-3</b>	/hpf	NIL
<b>RBCs</b> (Urine)	Nil	/hpf	NIL

-- End of Report --



  
Dr.R.Lavanya MD  
Consultant - Pathologist  
Reg No: 90632

Name	MRS.JOSEPH ANTONY STEFFINA	ID	MED121727126
Age & Gender	33Y/FEMALE	Visit Date	09 Mar 2024
Ref Doctor Name	MediWheel		



Thanks for your reference  
SONOGRAM REPORT  
WHOLE ABDOMEN

Poor penetration of USG due to thick abdominal wall

**Liver:** The liver is normal in size and shows uniform echotexture with no focal abnormality. There is no intra or extra hepatic biliary ductal dilatation.

**Gallbladder** The gall bladder is well distended with no demonstrable calculus. Wall thickness appears normal.

**Pancreas** The pancreas shows a normal configuration and echotexture. The pancreatic duct is normal.

**Spleen** The spleen is normal.

**Kidneys** The right kidney measures 9.1 x 4.2 cm. Normal architecture.

The collecting system is not dilated.

The left kidney measures 10.1 x 4.4 cm. Normal architecture.

The collecting system is not dilated.

**Urinary bladder:** The urinary bladder is smooth walled and uniformly transonic.

There is no intravesical mass or calculus.

**Uterus:** The uterus is anteverted, and measures 8.0 x 3.2 cm.

Name	MRS.JOSEPH ANTONY STEFFINA	ID	MED121727126
Age & Gender	33Y/FEMALE	Visit Date	09 Mar 2024
Ref Doctor Name	MediWheel		



Myometrial echoes are homogeneous.  
The endometrium is central and normal measures 5 mm in thickness.

**Ovaries** The right ovary measures 2.2 x 2.1 cm.  
The left ovary measures 3.4 x 2.7 cm.  
No significant mass or cyst is seen in the ovaries.  
Parametria are free.

**RIF** Iliac fossae are normal.  
No mass or fluid collection is seen in the right iliac fossa.  
The appendix is not visualized.  
There is no free or loculated peritoneal fluid.  
No para aortic lymphadenopathy is seen.

### IMPRESSION

- No significant abnormality.

DR.T.ANNIE STALIN MBBS.,F.USG.,  
SONOLOGIST.

Name	MRS.JOSEPH ANTONY STEFFINA	ID	MED121727126
Age & Gender	33Y/FEMALE	Visit Date	09 Mar 2024
Ref Doctor Name	MediWheel		



Name	MRS.JOSEPH ANTONY STEFFINA	ID	MED121727126
Age & Gender	33Y/FEMALE	Visit Date	09 Mar 2024
Ref Doctor Name	MediWheel		



Name	Mrs. JOSEPH ANTONY STEFFINA	ID	MED121727126
Age & Gender	33Y/F	Visit Date	Mar 9 2024 9:21AM
Ref Doctor	MediWheel		

*Thanks for your reference*

**DIGITAL X- RAY CHEST PA VIEW**

Trachea appears normal.

Cardiothoracic ratio is within normal limits.

Costo and cardiophrenic angles appear normal.


Bilateral lung fields appear normal.

Visualised bony structures appear normal.

Extra thoracic soft tissues shadow grossly appears normal.

**IMPRESSION:**

- i. NOSIGNIFICANTABNORMALITDEMONSTRATED.



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