



					April 07, 2022 - April 06, 2024
Patient Name Mrs Sla	long Shorms	MRN : 602 7	8 Age 32 s	Sex Da	te/Time 20 1 0 /) 2
Investigations : (Pleas	se Tick)			Mo	ob No
CBC	Secret Edward -				14-128
ESR					W-60
CRP					
S-Vit D3					BP-101/65
S-Vit B12					
RBS					P-72
Sugar - F/PP					,
HbA1C					
LFT/KFT					
PT					
INR BA Factor					
RA Factor Anti CCP					
HLA B27					
ANA			COR A		
HIV			ESTI		
HBsAg			, . R	Plo 1	wint
Anti HCV			ESR Tother. R	years.	
Vitals				(Garg
P.R.				Dr. Bh	DIP.GO, PGDHA DIP.GO, PGDHA No. MPMC-18035 No. MPMC-18035 No. MPMC-18035 No. MPMC-18035 No. MPMC-18035 No. MPMC-18035
SPO2				Reg.	No. Mr. Superinterio
Temp				Deputy N	DIP.GO, L. 18035 NO. MPMC-18035 No.
Medical Illness				, -	
Hypertension					
Diabetes					
Thyroid					
Cardiac Disease					
Drug Allergies					

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Next Appointment/Follow up

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002 Ph. No.: 0751-2454600, 2450500 www.apollospectra.com Registered Vide No. NH/1542/MAR-2016

Signature:





: Mrs.SHALINI SHARMA

Age/Gender

: 32 Y 0 M 0 D /F

UHID/MR NO Visit ID : ILK.00037352 : ILK.109561

Ref Doctor

: Dr.ARCOFEMI HEALTHCARE LIMITED

(1005/352

Collected

: 20/Jan/2024 09:29AM

Received

: 20/Jan/2024 09:54AM : 20/Jan/2024 12:01PM

Reported Status

: Final Report

Client Name

: INSTA

DEPARTMENT OF HEMATOLOGY

COMPLETE BLOOD COUNT- CBC / HAEMOGRAM, WHOLE BLOOD EDTA						
Haemoglobin (Hb%)	11.5	gm%	11.5-16.0	Cyanmeth		
P.C.V (Hematocrit)	35.6	%	35-49	Cell Counter		
RBC Count	4.3	Mill./cu mm	4.00-5.50	Cell Counter		
Mean Corpuscular Volume(MCV)	82.2	fL	76-96	Calculated		
Mean Corpuscular Hb. (MCH)	28.6	pg	27.0-32.0	Calculated		
Mean Corp. Hb. Conc.(MCHC)	32.4	g/dl	30.0-35.0	Calculated		
RDW	16.3	%	11-16	Calculated		
Total WBC count (TLC)	7,900	/cu mm	4000-11000	Cell Counter		

Differential Count by Flowcytometry/Microscopy

Neutrophils	56.5	%	50-70	Cell Counter
Lymphocytes	34.6	%	20-40	
Monocytes	6.8	%	01-10	Cell Counter
Eosinophils	1.7	%	01-06	Cell Counter
Basophils	0.5	%	00-01	Cell Counter

Absolute Leucocyte Count

Neutrophil (Abs.)	4,454	per cumm	2000 - 8000	Calculated
Lymphocyte (Abs.)	2729	per cumm	600-4000	Calculated
Monocyte (Abs.)	532	per cumm	0-600	Calculated
Eosinophil (Abs.)	132	per cumm	40-440	Calculated
Basophils (Abs.)	36	per cumm	0-110	Calculated
Platelet Count	3.00	Lac/cmm	1.50-4.00	Cell Counter

ERYTHROCYTE SEDIMENTATION RATE (ESR)							
Erythrocyte Sedimentation Rate (ESR) 38 mm lst hr. 0-20 Wester Green							

Page 1 of 9





DR. ASHOK KUMAR M.D. (PATH)

RJN Apollo Spectra Hospitals

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

• Results may vary from lab to lab and from time to time for the same parameter for the same patient • Assays are performed in accordance with standard procedures.

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





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DEPARTMENT OF HEMATOLOGY

BLO	OD GROUPING(A,B,O) AND RH FACTOR, W	VHOLE BLOOD EDTA
Blood Grouping	0	Slide/Tube Agglutination
Rh (D) Type	NEGATIVE	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.

Page 2 of 9





DR. ASHOK KUMAR M.D. (PATH)

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: 20/Jan/2024 09:54AM

Reported Status : 20/Jan/2024 12:04PM

Client Name

: Final Report : INSTA

DEPARTMENT OF	BIOCHEMISTRY-ROUTINE
---------------	----------------------

Test Name	Result	Unit	Bio. Ref. Range	Method	

GLUCOSE - FASTING	(FBS	, NAF PLASMA
--------------------------	------	--------------

Fasting Glucose	95.0	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	109.0	mg/dL	90-140	2hrs. aftergm
				glucose/lunch

Ref.for Biological Reference Intervals: American Diabetic Assiosation.

Page 3 of 9





A.K. Payony

DR. ASHOK KUMAR M.D. (PATH)

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DEPARTMENT OF BIOCHEMISTRY-ROUTINE					
Test Name	Result	Unit	Bio. Ref. Range	Method	

GLYCOSYLATED HAEMOGLOBIN (GHB/HBA1C), WHOLE BLOOD EDTA							
Glycosylated Haemoglobin HbA1c	5.1	%	Normal: <5.7 Pre-Diabetes: 5.7-6.4 Diabetes: 6.5	NEPHELOMETRY			
Approximate mean plasma glucose	99.96			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%

Page 4 of 9





A.K. Fayer

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DEPARTMENT	OF	BIOCHEMISTRY-ROUTIN	ΙE
------------	----	---------------------	----

Test Name	Result	Unit	Bio. Ref. Range	Method
	COMPLETE KIDNEY PRO	OFILE (RFT/KFT)	, SERUM	
Urea	22.88	mg/dL	13.0-43.0	Urease
Creatinine	0.5	mg/dL	0.5-1.3	Enzymatic
Uric Acid	5.3	mg/dL	2.6-6.0	Urease
Sodium	139.0	Meq/L	135-155	Direct ISE
Potassium	4.2	Meq/L	3.5-5.5	Direct ISE
Chloride ,	105.0	mmol/L	96-106	Direct ISE
Calcium	9.5	mg/dL	8.6-10.0	OCPC
Phosphorous	3.4	mg/dL ~	2.5-5.6	PMA Phenol
BUN	10.69	mg/dL	6.0-20.0	Reflect Spectrothoto

Page 5 of 9





A. E. Fat J.

DR. ASHOK KUMAR M.D. (PATH)

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: 20/Jan/2024 12:04PM : Final Report

Status Client Name

: INSTA

|--|

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

	LIPID PROI	FILE , SERUM		
Type OF Sample	SERUM			
Total Cholesterol	153.0	mg/dl	up to 200	End Point
Total Triglycerides	195.0	mg/dL	Borderline High Risk : 150-199 High Risk: 200-499 Very High Risk: >500	End Point
HDL Cholesterol	43.0	mg/dL	Optimal: >55 Border Line High Risk: 35-55 High Risk:- <35	Reflect Spectrothoto
Non - HDL Cholesterol	110	mg/dL	<130	
LDL Cholesterol	71	mg/dL	63-167	Reflect Spectrothoto
VLDL Cholesterol	39	mg/dL	5.0-40.0	Reflect Spectrothoto
Chol / HDL Ratio	3.56		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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DR ASHOK KUMA

DR. ASHOK KUMAR M.D. (PATH)

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Patient NAME : Mrs.SHALINI SHARMA

Age/Gender : 32 Y 0 M 0 D /F UHID/MR NO : ILK.00037352

Visit ID : ILK.109561

Ref Doctor : Dr.ARCOFEMI HEALTHCARE LIMITED

Collected : 20/Jan/2024 09:29AM

Received : 20/Jan/2024 09:54AM Reported : 20/Jan/2024 12:04PM

Status : Final Report Client Name : INSTA

	DEPARTMENT OF BIO	CHEMISTRY-RO	DUTINE	
Test Name	Result	Unit	Bio. Ref. Range	Method

LIVER	FUNCTION TEST	(LFT) WITH GGT	, SERUM	
Total Bilirubin	0.6	mg/dL	0.2-1.2	Jendrassik-Grof
Direct Bilirubin	0.1	mg/dL	0.0-0.3	Jendrassik-Grof
Indirect Bilirubin	0.5	mg/dL	0.0-0.9	Calculated
SGOT / AST	22.0	U/L	1-30	UV Kinetic (IFCC)
SGPT / ALT	33.0	U/L	1-34	UV Kinetic (IFCC)
Alkaline Phosphatase	83.0	U/L	43-115	PNPP
Gamma Glutaryl Transferase (GGT)	49.0	U/L	0.0-55.0	Reflect Spectrophoto
Total Protein	7.6	g/dl	6.4-8.3	Biuret
Albumin	4.5	g/dL	3.5-5.2	BCG
Globulin	3.1	g.dl	2.0-3.5	Calculated
A/G Ratio	1.45	%	1.0-2.3	Calculated

Page 7 of 9





A.K. Keyliff.

DR. ASHOK KUMAR M.D. (PATH)

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Age/Gender

: 32 Y 0 M 0 D /F

UHID/MR NO Visit ID

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Ref Doctor

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Collected

: 20/Jan/2024 09:29AM

Received

: 20/Jan/2024 12:31PM

Reported Status

: 20/Jan/2024 01:34PM

Client Name

: Final Report : INSTA

	DEPARTMENT OF BIO	CHEMISTRY-S	PECIAL	
Test Name	Result	Unit	Bio. Ref. Range	Method

	THYROID PR	OFILE-I, SERUM		R
Trilodothyronine Total (TT3)	1.58	ng/dL	0.6-1.8	Chemilluminisence
Thyroxine (TT4)	9.57	μg/dL	4.5-10.9	Chemilluminisence
Thyroid Stimulating Hormone (TSH)	2.140	μIU/ml	0.35-5.50	Chemilluminisence

COMMENT: Above mentioned reference ranges are standard reference ranges.

AGE RELATED GUIDLINES FOR REFERENCE RANGES FOR TSH

TSH	NEW BORN	INFANT	CHILD	ADULT
(u lu/ml)	0.52-38.9	1.7-9.1	0.7-6.4	0.3-5.6
PREGNENCY R	ELATED GUIDLINES FOR F	REFERENCE RANGE	S FOR TSH	
TSH	1st Trimester	2nd & 3rd Tri	mester	
(u lu/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.

Ultrasensetive kits used.

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

- :-Primary hypethyroidism 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.
- :-.singhtly 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 propanolol .
- :-Although elevated TSH levels are nearly always indicative of primary hypothyroidism. Rarely they can result from TSH secreting pituitary tumours (seconday huperthyroidism).

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DR. ASHOK KUMAR

M.D. (PATH)

RJN Apollo Spectra Hospitals

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: 20/Jan/2024 09:29AM

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: 20/Jan/2024 09:54AM

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Client Name

: Final Report : INSTA

DEPARTMENT OF CLINICAL PATHOLOGY					
Test Name	Result	Unit	Bio. Ref. Range	Method	

CUE - COMPLETE URINE ANALYSIS , URINE

Physical Examination

Colour	STRAW		Visual
Appearance	Slightly Turbid		Visual
рН	6.5	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	2-3	/Hpf	0-5	
Epithelial Cells	5-7	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 ***

Page 9 of 9





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ECHO CARDIOGRAPHY REPORT

Patient Name : Mrs SHALINI SHARMA

Date : 20/01/2024

AGE & Sex :32yrs/F

Echocardiography was performed on vivid T8

Quality Of Imaging: Adequate
Mitral Valve: Normal
Tricuspid Valve: Normal

Tricuspid Valve : Normal
Aortic Valve : Normal
Pulmonary Valve : Normal
Left Atrium : 3.4cms

Left Ventricle :

IVSD : 1.2 cms LVPWD : 1.2cms

EDD : 4.6 cms EF 60% ESD : 2.8 cms FS 32%

RWMA : NO REGIONAL WALL MOTION ABNORMALITY

Right Atrium : Normal
Right Ventricle : Normal
Aorta : 3.1cms
IAS IVS : Intact
Pulmonary Artery : Normal
Pericardium : Normal
SVC, IVC : Normal
Pulmonary Artery : Normal
Pulmonary Artery : Normal

Intracardiac Masses : Nil
Doppler : E > A

Conclusion:

NORMAL CARDIAC CHAMBERS DIMENSION .
NO REGIONAL WALL MOTION ABNORMALITY
NORMAL LV SYSTOLIC FUNCTION , LVEF-60%
NORMAL VALVES
INTACT SEPTUM
NO CLOT /VEGETATION /PERICARDIAL EFFUSION

Or. Abhishels Sharma
SS,MI (Modifyne SNB (Cardiology)
Isultant Interpentional Cardiology
RJN Apollo Spectra Hospitals
Reg No MP 12056

Consultant

Dr. Abhishek sharma (DNB)

(Interventional Cardiologist)

RATAN JYOTI NETRALAYA PRIVATE LIMITED

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Patient Name Staliui Sta	MRN:	Age 32 Sex F	Date/Time 20/1/24
Investigations : (Please Tick)			Mob No
CBC			
ESR			
CRP	Health	Chelepup	
S-Vit D3			
S-Vit B12			
RBS			
Sugar - F/PP HbA1C LFT/KFT O	Surperted co	8 8	
PT			
INR -	alu n		
NA Factor			
Anti CCP . S	teuin in		
ANA	*	1.	
HIV GE	en. garge w	H'S	
HBsAg	en. gengin		
Vitals	DisJurgert	i'on c	8 8
P. P.R.			
SPO2			
Temp .			
Medical Illness	Chalon	DDS H/W	
Hypertension	Cuerc		
Diabetes			
Thyroid	1 miles aller		
Cardiac Disease	Chown busio dut passe	1	
Drug Allergies	park		
Next Appointment/Follow up	1 1	Sign	ature :

RATAN JYOTI NETRALAYA PRIVATE LIMITED

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	0.	April 07, 2022 - April 06, 2024	
Patient Name	lin Harm MRN:	Age 32 Sex . E. Date/Time 20/1/25	7_
Investigations : (Ple	ease Tick)	Mob No	
CBC	buse rion,	, 1	
ESR	ala - Ma	elt chah ub	
CRP	90		
S-Vit D3			
S-Vit B12		0 / 200	
RBS	0/6-	& NAD	
B-Sugar - F/PP	72		
HDA1C	can		
LFT/KFT PT			
INR			
RA Factor	10 10 60 1		
Anti CCP	Norg	1 a A C	
HLA B27		100	
ANA			
HIV	Thick		
HBsAg			1
Anti HCV		a tower	X
	\cap - :	hue En Conce	
Vitals	No Da	hue ENT goterunt	
B_P.	100		
F.N.		a Minil dunta	
SPO2		SYS (ENT)	
Temp		Reg. No. MP13378 RUN April Special Applies	į.
		KIN OFFICE STREET	
Medical Illness		-	
Hypertension			
Diabetes			
Thyroid			
Cardiac Disease			

RATAN JYOTI NETRALAYA PRIVATE LIMITED

CIN: U85110MP2013PTC030901

Next Appointment/Follow up

Drug Allergies

Registered Office: 18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002

RJN APOLLO SPECTRA HOSPITALS

18, Vikas Nagar, Near Sai Baba Mandir, Gwalior - 474002 Ph. No.: 0751-2454600, 2450500 www.apollospectra.com Registered Vide No. NH/1542/MAR-2016

Signature:



RATAN JYOTI NETRALAYA

OPHTHALMIC INSTITUTE & RESEARCH CENTRE





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. NAME

AGE/SEX

1903601

MRS SHALINI SHARMA : 32 YRS / FEMALE

DATE

MRD NO.

: R-114069

CITY

GWALIOR

MISION	DISTANCE		NEAR	
VISION	OD	os	OD	os
UNAIDED	6/24	6/24		
WITH GLASSES	6/6	6/6		
WITH PIN HOLE	6/6	6/6		
WITH COLOR				
VISION				

IOP READING OD METHOD TIME OD OS METHOD 16 NCT 10:07AM



PENTACAM (BE) (NW)

TREATMENT PLAN

: -CSG

REFFERED TO

NEXT REVIEW

: AS PER DR. ADVISED

DR. SAVITRI DEVAL

NOTE

: Kindly continue medications as advised for the period advised.

In case of redness or allergy please discontinue and inform, the doctor

: As per treating physician : Patient and Attendant(s) Counselled

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 🌘 कैशलैस इंश्योरेन्स एवं टी.पी.ए. सुविधा उपलब्ध

For Appointment Please Contact: 9111004046

स्वामी विद्यानंद भारती आई बैंक नेत्रदान

करें और करायें इसे अपने परिवार की परम्परा बनायें नेत्रदान के लिए सम्पर्क करें : 9111004044





MRS. SHALINI SHARMA 32Y/F PATIENT NAME

REFERRED BY HCP

20/01/2024 DATE

USG WHOLE ABDOMEN INVESTIGATION

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 is well distended. GB wall and lumen content appears normal. No echogenic focus within GB lumen. Visualized CBD is of normal caliber.

Spleen appears normal in size (~10.9cm), position, shape, echotexture and margin. No any focal lesion within splenic parenchyma. Splenic vein is normal and undilated.

Pancreas is well visualized, 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 ~9.7x4.3cm and left kidney ~11.3x4.3cm. Both kidneys are normal in position, size, shape, surface, echotexture and cortico-medullary differentiation. Bilateral PC systems are compact. No significant calculus or hydronephrosis on either side. Ureters are undilated on either side.

Urinary Bladder is normal in shape, wall and content.

TAS:-

Uterus is anteverted, appears grossly normal in size measures ~8.1x4.3cm. No abnormal measurable mass or cyst in adnexal region.

No obvious ascites.

OPINION:- Features are suggestive of-

Grade I fatty liver.

Suggested clinical correlation/Follow up imaging.

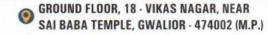


DR. SAKSHI CHAWLA (MD RADIODIAGNOSIS)

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.

गर्भाशय कन्या भ्रुण की जाँच एवं हत्या दण्डनीय अपराध है।

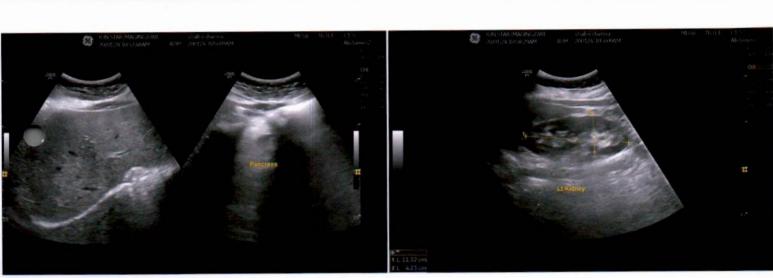
बेटी बचाओ - बेटी पढ़ाओ

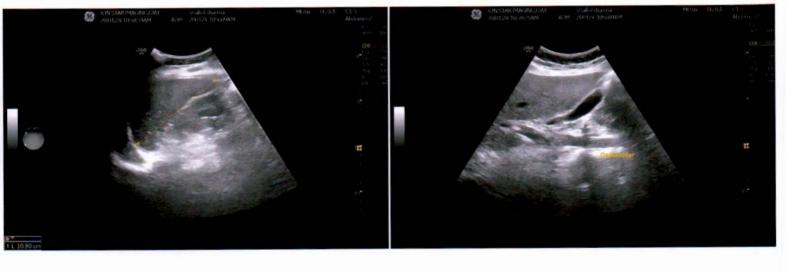














6 PH100B CL F 60~ 0.15-100 Hz 20-Jan-24 11:00:09 AM Sinus rhythm.....normal P axis, V-rate 50-99. Borderline short PR interval.....PR int <120mS 75 94 44 Unconfirmed Diagnosis Limb: 10 mm/mV Chest: 10.0 mm/mV - OTHERWISE NORMAL ECG -Ψ2 V3 Г sharma, shalini Female Speed: 25 mm/sec aVL aVF aVR 12 Lead; Standard Placement 1113 83 368 392 160278 32 Years --AXIS--Device: Rate PR QRSD QTC QRS III II II





Patient name	MRS. SHALINI SHARMA	Age/sex	32Y/F
Ref. By	160278	Date	20.01.24

XRAY CHEST

- The lung fields appear clear.
- Bilateral C.P. angles appear clear.
- Cardiac size within normal limits.
- Soft tissue shadow and bony thoracic cage appears normal.

Please correlate clinically.

DR. AKANKSHA MALVIYA MBBS, MD (RADIODIAGNOSIS)