

## TEST REPORT

Lab.Id	: CM70608553	Hospital UHID	: 700470973	Reg.Date	: 17-Aug-2023 02:34 PM
Name	: Mrs. K VIJAYALAKSHMI			Collection	: 17-Aug-2023 02:53 PM
Age/Gender	: 46Y-7M-15D/Female			Received	: 18-Aug-2023 08:50 AM
Collected At	: Aster CMI Hospital			Report	: 18-Aug-2023 01:45 PM
Referred Dr.	: Dr.WELLNESS CONSULTANT	Report Status	: Final	Dispatch	: 21-Aug-2023 12:13 PM

## PAP SMEAR REPORT

**PAP Smear No** P 7188/23

**LMP** 11/08/23

**Specimen Source** Cervix

**Specimen Type:** Conventional PAP Smear  
Received 2 slides.

**Specimen Adequacy** Satisfactory for evaluation. Transformation zone elements are seen.

**General Categorization** Negative for intraepithelial lesion or malignancy.

**Microscopic Examination :** Smears studied show intermediate squamous epithelial cells, superficial squamous cells, metaplastic squamous cells and endocervical cells in papillae and clusters. Background shows many neutrophils and doderlein bacilli.

**Organisms** Nil

**Other Non Neoplastic Findings** Nil

**Interpretation:** **Negative for intraepithelial lesion or malignancy.**  
**Polypoidal endocervicitis.**

**NOTE:**

1. Reported in compliance with Bethesda 2014 update
2. PAP smear test is only a screening test for detection of pre-malignant and malignant conditions of the cervix with inherent false negative and false positive results. This is not a diagnostic procedure and should not be used as sole means of detecting cervical cancer. The test result needs to be correlated with relevant clinical findings.
3. Please note this report has been generated using speech recognition software and may contain errors related to that system software including errors in grammar, punctuation, spellings as well as words and phrases that may be inappropriate. If there are any questions or concerns, please feel free to contact the reporting pathologist for any clarification.

Issued slide(s)/block(s) with the report. Please preserve them carefully.

*[Signature]*  
Dr.Kshitija R Tanga  
DNB Pathology  
Consultant

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

• Images included in this report are for information only and are not intended for diagnosis  
• All benign specimens are preserved for 1 month and malignant specimens are preserved for 3 months. The laboratory will not be responsible for specimen requests beyond the mentioned archival period.  
• Please note this report has been generated using speech recognition software and may contain errors related to that system software including errors in grammar, punctuation, spellings as well as words and phrases that may be inappropriate. If there are any questions or concerns, please feel free to contact the reporting pathologist for any clarification.

**Important Instructions:**

- Test results released pertain to specimen submitted.
- All results are dependent upon the quality of specimen received in the laboratory.
- Lab investigation is only a tool to facilitate in concluding a diagnosis, and should be clinically correlated by the referring physician.
- Certain tests may require further testing, at an additional cost for derivation of exact value, kindly submit request within 2 days, post reporting.
- Sample repeats are accepted on request of Referring Physician within sample stability period.
- Test results may show inter-laboratory variation.
- Results are for informational purposes, and not intended to replace the care of medical practitioner and does not recommend self-diagnosis and/or self-medication
- Aster clinical Lab LLP does not make any warranties expressed or implied with respect to information herein.
- Test results are not valid for medico legal purposes. • The courts/forum at Cochin/Bangalore shall have exclusive Jurisdiction in all disputes/claims concerning the request and/or result of test(s). • Contact customer care 9680396803 for all queries related to test results

# Aster CMI HOSPITAL

We'll Treat You Well



21/8/23

Mrs. Vijaylaxmi

46 yr

Sup: ? Central poly

Adv:

TVS

CA  
Dr. Chelane ✓



No : OP7/CA24/152038

Aster ID : 700470973

Patient Name : Mrs. K VIJAYALAKSHMI

Payer : SELF-ACMI

Bill Date : 22/08/2023 11:35

Gender/Age : Female/46 Yr 7 Mth

Contact No : 9845875522

Presc. Doctor : Dr. CHETANA V

Referred By : Self

Patient Address : 6116 PRESTIGE ROYALE GARDEN  
AVALAHALLI DODDABALLAPUR RD  
YELAHANKA, Bangalore, Karnataka,  
India

GSTIN :

State Code 29

Payer Address :

SN	SrCode	SAC Service Particulars	Rate (₹)	Unit	Total	Concession	Net Amt	Pat Amt	Payer Amt
1	I-USS-00137	USG - TRANSVAGINAL SONOGRAPHY (TVS) ( )	2950.00	1	2950.00	0.00	2950.00	2950.00	0.00
Total Amount								2950.00	
Net Amount								2950.00	
Payer Amount								0.00	
Patient Amount								2950.00	
Amt Received								2950.00	

By Cash: 2950.00

Received from Mrs. K VIJAYALAKSHMI, an amount of (INR ) Two Thousand Nine Hundred Fifty Only

(POOVAMMA PS)

(Signature)

Printed By: 115453

Prepared By: POOVAMMA PS

An Aster  
DM Healthcare  
VentureAster CMI Hospital No. 43/2, New Airport Road NH 7, Dr  
Puneeth Rajkumar Rd, Sahakar Nagar, Bengaluru,  
Karnataka 560092For Appointment- 080-43420100  
For Emergency- 91-80-4647464

Note:- One complementary follow up shall be given within 7 working days. This is not applicable in certain specialities CGHS &amp; Corporate customers.

**IMPRESSION:**

- Left ovarian hemorrhagic cyst. *Suggested follow up.*

\*Suggested clinical correlation

JS/SP

**Dr Sushmitha S Prasad**  
 Resident, Radiology  
 Reg No. KMC - 116344

NAME	K VIJAYALAKSHMI	STUDY	22-08-2023 12:19:10
AGE/GENDER	46Y 7M 19D / F	UHID	700470973
ACC NO	70095984	MOD	US
REFERER	Dr. CHETANA V	REPORT	22-08-2023 12:57:55

## ULTRASOUND PELVIS (TVS)

**UTERUS:** Anteverted, normal in size, measures: 8.2 x 5.1 x 4.3 cm  
Myometrial echoes appear normal.  
Endometrium appears normal, measures: 12 mm.  
Adnexa normal.

### **OVARIES:**

Right ovary appear normal in size and echotexture measures 2.3 x 1.3 cm  
Left ovary measures 3.0 x 2.1 cm. A cystic lesion measuring 2.0 x 1.5 cm is noted with thin interlacing septations, likely hemorrhagic cyst.

Minimal free fluid noted in POD.

### IMPRESSION:

- Left ovarian hemorrhagic cyst. *Suggested follow up.*

*\*Suggested clinical correlation*

JS/SP



**Dr Sushmitha S Prasad**  
Resident, Radiology  
Reg No. KMC - 116344

# Ultrasound Image Report

nt  
Name  
Birth Date  
Gender

700470973  
VIJAYALAKSHMI, K  
02011977  
Female

Exam  
Accession #  
Exam Date  
Description  
Sonographer

7009598  
2208202

USG - TRANSVAGINAL SO...

