

Patient Name : Ms.VIDYA AWASTHI	Visit No : CHA250033700
Age/Gender : 27 Y/F	Registration ON : 25/Feb/2025 09:24AM
Lab No : 10130996	Sample Collected ON : 25/Feb/2025 09:26AM
Referred By : Dr.QMH	Sample Received ON : 25/Feb/2025 09:50AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 25/Feb/2025 11:03AM
Doctor Advice : BETA hCG,USG TVS	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>BETA HCG</b>				
Beta HCG	0.33	mIU/mL	0.10 - 2.90	CLIA

Weeks of Pregnancy	Ranges HCG mIU/ml ( 5-95th percentile )
3	5.8 -71.2
4	9.50 -750
5	217 - 7138
6	158 - 31795
7	3697- 163563
8	32065 - 149571
9	63803 - 151410
10	46509 - 186977
12	27832 - 210612
14	13950 - 62530
15	12039 - 70971
16	9040 - 56451
17	8175 - 55868
18	8099 - 58176

**COMMENTS:**

This assay is capable of detecting whole molecule (intact) HCG as well as free  $\beta$ -HCG subunits. For diagnostic purposes, HCG results should always be used in conjunction with clinical findings and other tests. If the HCG levels are inconsistent with clinical impressions, results should be confirmed by an alternate HCG method. Low levels of HCG can occur in apparently healthy, non pregnant subjects.  $\beta$ -HCG values double approximately every 48 hrs in a normal pregnancy; patients with very low levels should be resampled and retested after 48 hrs. Specimens tested as positive during initial days after conception may later be negative due to natural termination of pregnancy. Natural termination occurs in 31% of overall pregnancies. Falsely depressed or falsely elevated results may occur due to presence of interfering substances (such as heterophilic antibodies, non-specific proteins, or HCG like substances).

In men, Increased levels of b-HCG are associated with testicular cancer and should be correlated with other findings.

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



[Checked By]

Print.Date/Time: 25-02-2025 12:21:42

\*Patient Identity Has Not Been Verified. Not For Medicolegal

DR. NISHANT SHARMA  
PATHOLOGIST

DR. SHADAB  
PATHOLOGIST

*Dr. Aditi D Agarwal*  
DR. ADITI D AGARWAL  
PATHOLOGIST

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### **TRANSVAGINAL ULTRASOUND**

- **Uterus** is normal in size, measures 79 x 42 mm and shows homogenous myometrial echotexture. Endometrial thickness measures 9.4 mm and **shows heteroechoic in echotexture with haemorrhagic fluid.**
- **Cervix** is normal in size measures 32 x 27mm & echotexture.
- **Both ovaries** are normal in size & echotexture. Right ovary measures 20 x 11 x 23 mm vol. 2.9 cc. Left ovary measures 22 x 10 x 30 mm vol. 3.5 cc.
- **A well defined rounded complex cystic lesion of size 33 x 27 x 39 mm vol. 18.5 cc is seen in right tubo-ovarian region.**
- No free fluid is seen in Cul-de-Sac.

#### **OPINION:**

- **HETEROECHOIC ENDOMETRIUM WITH HEMORRHAGIC FLUID.**
- **COMPLEX RIGHT TUBO-OVARIAN CYST – POSSIBILITY OF ECTOPIC PREGNANCY (NEEDS :  $\beta$ -HCG CORRELATION AND FOLLOW UP).**

**Clinical correlation is necessary.**

**DR. NISMA WAHEED  
MD, RADIODIAGNOSIS**

(Transcribed by Rachna)

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

