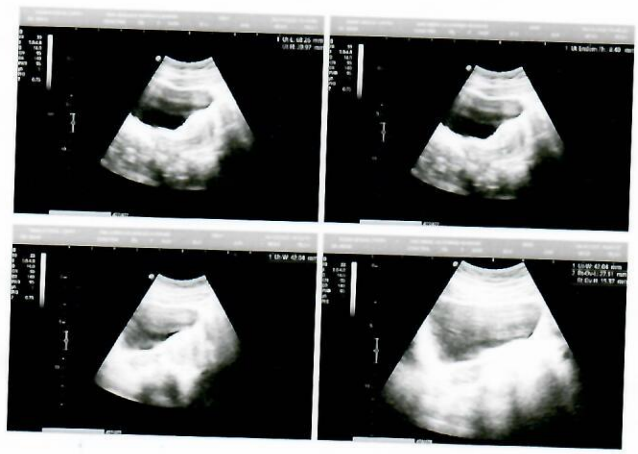

GYN Report

Patient Information

Patient Name: [illegible]
Birth Date: 29/04/1994
ID(Housing):
Comments:

Patient ID: 38541
Gender: Female

Exam Date: 30/11/2022
Accession#:

Exam Information

Exam Type: GYN
Gravida:
Ectopic:
Sonographer: DR. REHAB
Chief Complaint:
Past History:
Comments:

Height(cm):
Para:
LMP: 11/11/2022
Referring M.D:

Weight(kg):
Aborta:
Menopausal: No
Performing M.D:

Measurements

2D Mode

Item	M1 M5	Value	Unit
Left Side			
Ovary			
D Ov L	34.20	34.20 (Last)	mm
D Ov H	20.80	[illegible]	