



BHAILAL AMIN
GENERAL HOSPITAL



CONCLUSION OF HEALTH CHECKUP

ECU Number : 578	MR Number : 22457969	Patient Name: FENALI NILKANTH RAMI
Age : 37	Sex : Female	Height : 159
Weight : 44	Ideal Weight : 58	BMI : 17.40
Date : 10/12/2022		

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.



BHAILAL AMIN GENERAL HOSPITAL



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Date : 10/12/2022

Past H/O : K/C/O HYPOTHYROID SINCE CHILDHOOD.

Present H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Family H/O : FATHER : DIABETES ; IHD.
MOTHER : HYPOTHYROID ; DIABETES ; DYSLIPIDAEMIA

Habits : NO HABITS.

Gen.Exam. : G.C. GOOD

B.P : 110/70 mm Hg

Pulse : 97/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



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Patient Name: FENALI NILKANTH RAMI
Height : 159
BMI : 17.40

Ophthalmic Check Up :	Right	Left
Ext Exam		
Vision Without Glasses	-	
Vision With Glasses	-WITH OWN GL. 6/6	6/6
Final Correction	NORMAL	NORMAL
Iris	NORMAL	
Colour Vision	NORMAL	
Advice	NIL	

Orthopedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



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Patient Name: FENALI NILKANTH RAMI
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BMI : 17.40

Gynaec Check Up :

OBSTETRIC HISTORY ML - 7 YRS.
MENSTRUAL HISTORY 15/11/2022 OPERATED LAPRASCOPY FOR OV. CYST TREATED.
PRESENT MENSTRUAL CYCLE -
PAST MENSTRUAL CYCLE -
CHIEF COMPLAINTS IRREGULAR CYCLES
PA SOFT
PS Cx - HYPERTROPHIC Vg - CLEAR DISCHARGE
PV UT NS Fx CLEAR
BREAST EXAMINATION RIGHT NORMAL
BREAST EXAMINATION LEFT NORMAL
PAPSMEAR TAKEN
BMD
MAMMOGRAPHY
ADVICE FOLLOWUP WITH REPORTS.

Dietary Assesment

ECU Number : 578 MR Number : 22457969 Patient Name: FENALI NILKANTH RAMI
Age : 37 Sex : Female Height : 159
Weight : 44 Ideal Weight : 58 BMI : 17.40
Date : 10/12/2022

Body Type : Normal / Underwight / Overwight
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional
Frequency of consuming Sweets : / Day / or occasional
Frequency of consuming outside food : / Day / Week or occasional
Amount of water consumed / day : Glasses / liters

Life style assessment :
Physical activity : Active / moderate / Sedentary / Nil
Alcohol intake : Yes / No
Smoking : Yes / No
Allergic to any food : Yes / No
Are you stressed out ? : Yes / No
Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regalarly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 seervings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Mrs. FENALI NILKANTH RAMI
 Gender / Age : Female / 37 Years 3 Months 16 Days
 MR No / Bill No. : 22457969 / 231053732
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 92302
 Request Date : 10/12/2022 08:23 AM
 Collection Date : 10/12/2022 08:22 AM
 Approval Date : 10/12/2022 01:12 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	<u>9.8</u>	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.44	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	<u>33.1</u>	%	36 - 46
Mean Corpuscular Volume (MCV)	<u>74.5</u>	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	<u>22.1</u>	pg	27 - 32
MCH Concentration (MCHC)	<u>29.6</u>	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	<u>16.2</u>	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	44.5	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	<u>3.15</u>	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	48	%	40 - 80
Lymphocytes	<u>42</u>	%	20 - 40
Eosinophils	1	%	1 - 6
Monocytes	9	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	<u>1.54</u>	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.35	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<u>0.00</u>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.25	thou/cmm	0.2 - 1
Basophils (Abs. Value)	<u>0.01</u>	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.0	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	221	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	10	mm/1 hr	0 - 12

Test results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / repeat may be requested.

365' Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. FENALI NILKANTH RAMI	Type	: OPD
Gender / Age	: Female / 37 Years 3 Months 16 Days	Request No.	: 92302
MR No / Bill No.	: 22457969 / 231053732	Request Date	: 10/12/2022 08:23 AM
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Rakesh Vaidya
MD (Path). DCP.

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 Approval Date : 10/12/2022 12:45 PM

HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Hemoglobin (HbA1c)	5.5	%	
estimated Average Glucose (e AG) *	111.15	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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ESTD. 1966

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mrs. FENALI NILKANTH RAMI
Gender / Age : Female / 37 Years 3 Months 16 Days
MR No / Bill No. : 22457969 / 231053732
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Approval Date : 10/12/2022 12:46 PM

Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea <i>(By Urease Kinetic method on RXL Dade Dimension)</i>	13	mg/dL	10 - 45
Creatinine <i>(By Modified Kinetic Jaffe Technique)</i>	0.54	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate <i>(Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)</i>	More than 60		
Uric acid <i>(By Uricase / Catalase method on RXL Siemens)</i>	3.5	mg/dL	2.2 - 5.8

--- End of Report ---

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MD (Path). DCP.

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Patient Name : Mrs. FENALI NILKANTH RAMI
 Gender / Age : Female / 37 Years 3 Months 16 Days
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 Consultant : Dr. Manish Mittal
 Location : OPD

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.85	mg/dL	0 - 1
Bilirubin - Direct	0.22	mg/dL	0 - 0.3
Bilirubin - Indirect	0.63	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	57	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	78	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	115	U/L	42 - 98
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	27	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	7.64	gm/dL	6.4 - 8.2
Albumin	3.73	gm/dL	3.4 - 5
Globulin	3.91	gm/dL	3 - 3.2
A : G Ratio	0.95		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.



Patient Name : Mrs. FENALI NILKANTH RAMI
 Gender / Age : Female / 37 Years 3 Months 16 Days
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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension < 150 Normal 150-199 Borderline High 200-499 High > 499 Very High)	49	mg/dL	1 - 150
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension <200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High)	141	mg/dL	1 - 200
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 40 Low > 60 High)	56	mg/dL	40 - 60
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol < 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High)	85	mg/dL	1 - 130
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension < 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High)	78	mg/dL	1 - 100
VLDL Cholesterol (calculated)	9.8	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	1.39		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	2.52		3.5 - 5

---- End of Report ----

Dr. Rakesh Vaidya
MD (Path). DCP.



Patient Name : Mrs. FENALI NILKANTH RAMI
 Gender / Age : Female / 37 Years 3 Months 16 Days
 MR No / Bill No. : 22457969 / 231053732
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 92302
 Request Date : 10/12/2022 08:23 AM
 Collection Date : 10/12/2022 08:22 AM
 Approval Date : 10/12/2022 01:20 PM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
Triiodothyronine (T3) (Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411. Reference interval (ng/ml) 1 - 3 days : 0.1 - 7.4 1-11 months : 0.1 - 2.45 1-5 years : 0.1 - 2.7 6-10 years : 0.9 - 2.4 11-15 years : 0.8 - 2.1 16-20 years : 0.8 - 2.1 Adults (20 - 50 years) : 0.7 - 2.0 Adults (> 50 years) : 0.4 - 1.8 Pregnancy (in last 5 months) : 1.2 - 2.5 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	2.08	ng/ml	
Thyroxine (T4) (Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411. Reference interval (mcg/dL) 1 - 3 days : 11.8 - 22.6 1-2 weeks : 9.8 - 16.6 1 - 4 months : 7.2 - 14.4 4 - 12 months : 7.8 - 16.5 1-5 years : 7.3 - 15.0 5 - 10 years : 6.4 - 13.3 10 - 20 years : 5.6 - 11.7 Adults / male : 4.6 - 10.5 Adults / female : 5.5 - 11.0 Adults (> 60 years) : 5.0 - 10.7 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	3.71	mcg/dL	
Thyroid Stimulating Hormone (US-TSH) (Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411. Reference interval (microIU/ml) Infants (1-4 days) : 1.0 - 39 2-20 weeks : 1.7 - 9.1 5 months - 20 years : 0.7 - 6.4 Adults (21 - 54 years) : 0.4 - 4.2 Adults (> 55 years) : 0.5 - 8.9 Pregnancy : 1st trimester : 0.3 - 4.5 2nd trimester : 0.5 - 4.6 3rd trimester : 0.8 - 5.2 (Reference : Tietz - Clinical guide to laboratory test, 4th edition))	<0.005(Rechecked)	microIU/ml	

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / retest may be requested.

— End of Report —

Dr. Sejal Odedra
M.D.Pathology



Patient Name : Mrs. FENALI NILKANTH RAMI Type : OPD
 Gender / Age : Female / 37 Years 3 Months 16 Days Request No. : 92302
 MR No / Bill No. : 22457969 / 231053732 Request Date : 10/12/2022 08:23 AM
 Consultant : Dr. Manish Mittal Collection Date : 10/12/2022 08:22 AM
 Location : OPD Approval Date : 10/12/2022 11:24 AM

Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
<i>Physical Examination</i>			
Quantity	50	mL	
Colour	Pale Yellow		
Appearance	Clear		
<i>Chemical Examination (By Reagent strip method)</i>			
pH	6.0		
Specific Gravity	<=1.005		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Bile Salt	Absent		Absent
Leucocytes	Trace		Negative
Bile Pigments	Absent		Absent
Nitrite	Negative		Negative
<i>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</i>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	1 - 5	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		



---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 22457969 Report Date : 10/12/2022
 Request No. : 190044253 10/12/2022 8.23 AM
 Patient Name : Mrs. FENALI NILKANTH RAMI
 Gender / Age : Female / 37 Years 3 Months 16 Days

X-Ray Chest AP

Both lung fields are clear.
 Both costophrenic sinuses appear clear.
 Heart size is normal.
 Hilar shadows show no obvious abnormality.
 Aorta is normal.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED



Dr. Priyanka Patel, MD
 Consultant Radiologist





DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 22457969 Report Date : 10/12/2022
Request No. : 190044223 10/12/2022 8.23 AM
Patient Name : Mrs. FENALI NILKANTH RAMI
Gender / Age : Female / 37 Years 3 Months 16 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

USG : Abdomen (Excluding Pelvis) Or Upper Abdomen

Liver is normal in size and shows subtle altered echopattern. No mass lesion identified. The hepaticveins are clear and patent. PV patent. No dilated IHBR.

Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.

Pancreas shows no obvious abnormality. Tail obscured. Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen.

Uterus is anteverted, normal in size and echo pattern. Endometrium thickness is about 5 mm. No obvious mass lesion seen.

Uterine length : 64 mm.
A.P. : 32 mm.

**Right ovary measures 18mm x 27mm. in size and foci of calcification.
Left ovary shows simple cyst measures 23mm x 18mm. in size.**

Urinary bladder is well distended and appears normal.

No ascites.

COMMENT:

**Subtle altered echopattern of liver—needs LFTs.
Left ovarian simple cyst.**

Kindly correlate clinically

Hasani

Dr.Perna C Hasani, MD
Consultant Radiologist



• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

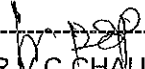
Patient No. : 22457969 Report Date : 10/12/2022
Request No. : 190044304 10/12/2022 8.23 AM
Patient Name : Mrs. FENALI NILKANTH RAMI
Gender / Age : Female / 37 Years 3 Months 16 Days

Echo Color Doppler

MITRAL VALVE : ELONGATED AML, NO MVP, NO MS, MILD MR
AORTIC VALVE : TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE : NORMAL, NO TR, NO PAH
PULMONARY VALVE : NORMAL, NO PR, NO PS
LEFT ATRIUM : NORMAL SIZE
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LVEF -65%, NO RWMA AT REST
RIGHT ATRIUM : NORMAL SIZE
RIGHT VENTRICLE : NORMAL SIZE
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NO EFFUSION
COLOUR/DOPPLER FLOW MAPPING : MILD MR, NO AR // TR, NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS, NO LVH
2. NORMAL LV SYSTOLIC FUNCTION LVEF - 65%
3. NO RESTING REGIONAL WALL MOTION ABNORMALITY
4. ELONGATED AML, NO MVP, NORMAL REST OF THE CARDIAC VALVES
5. NO MITRAL / AORTIC STENOSIS, INTACT IAS // IVS
6. NORMAL RIGHT HEART SIZE AND RV PRESSURES
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.


DR. V.C. CHAUHAN, M.D.
INTERVENTIONAL CARDIOLOGIST

Patient No. : 22460469 Report Date : 10/12/2022
Request No. : 190044279 10/12/2022 8.32 AM
Patient Name : Mr. NARENDRA T. DHUMAL
Gender / Age : Male / 55 Years 8 Months 2 Days

Echo Doppler Screening

MITRAL VALVE : NORMAL, NO MS, TRIVIAL MR
AORTIC VALVE : TRILEAFLET, NO AS, NO AR
TRICUSPID VALVE : NORMAL, TRIVIAL TR, NO PAH
PULMONARY VALVE : NORMAL, NO PR, NO PS
LEFT ATRIUM : NORMAL SIZE
AORTA : NORMAL
LEFT VENTRICLE : NORMAL LVEF – 60%, NO RWMA AT REST
RIGHT ATRIUM : NORMAL SIZE
RIGHT VENTRICLE : NORMAL SIZE
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NO EFFUSION
COLOUR/DOPPLER FLOW MAPPING : TRIVIAL MR, TR NO PAH

FINAL CONCLUSION:

1. NORMAL SIZED ALL CARDIAC CHAMBERS
2. NORMAL LV SYSTOLIC FUNCTION LVEF – 60%
3. NO RESTING RWMA
4. GRADE I LV DIASTOLIC DYSFUNCTION
5. NORMAL VALVES, NO MITRAL / AORTIC STENOSIS
6. NORMAL RIGHT HEART SIZE AND RV PRESSURE
7. NO PERICARDIAL EFFUSION, CLOT OR VEGETATION SEEN, SR+.

DR. KILLOL KANERIA MD,DM
INTERVENTIONAL CARDIOLOGIST

22457969
37 Years

10-Dec-22

9:30:44 AM FENALI N RAMI
Female

Dept: OPD

BAGH

Rate 76

PR 172

QRSD 84

QTc 392

QTc 441

--AXIS--

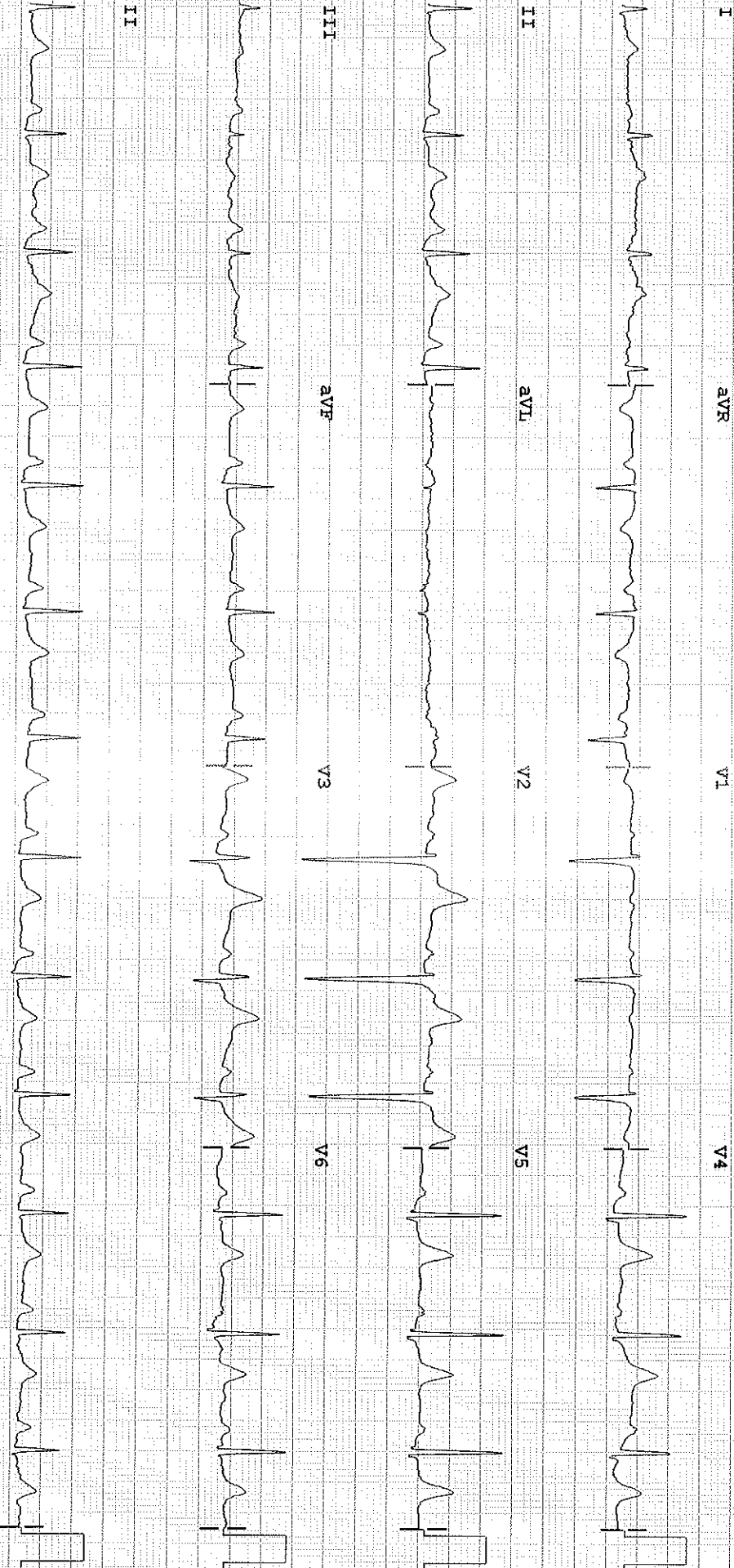
P 83

QRS 65

T 65

Doctor MANISH MITTAL

for review



Dev:

Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV

F 50~ 0.5-150 HZ W

PH08

P?