

NABH ACCREDITED

PRAKASH

EYE HOSPITAL & LASER CENTRE

Dr. AMIT GARG

M.B.B.S., D.N.B. (Oph.)

I-Lasik (Femto) Bladefree Topical Micro Phaco


& Medical Retina Specialist

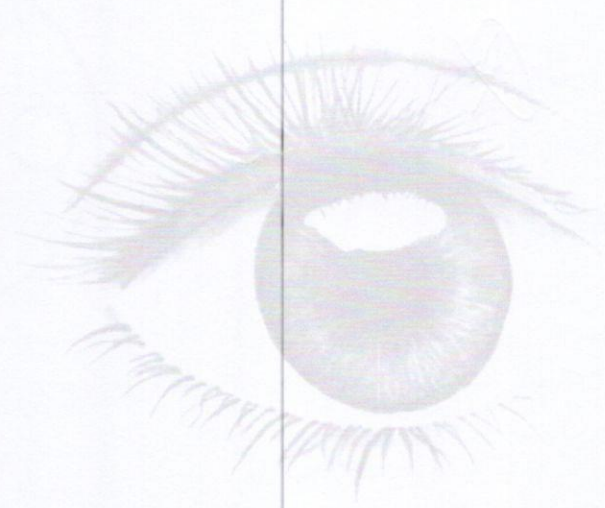
Ex. Micro Phaco Surgeon

Venu Eye Institute & Research Centre, New Delhi

Name Mr Pradeep Kumar Age/Sex 37/ M C/o Date 26/Dec/22

Routine Eye Check up


Dr. AMIT GARG
M.B.B.S., D.N.B.
Garg Pathology, Meerut



प्रकाश आँखों का अस्पताल एवं लेजर सेंटर



Website: www.prakasheyehospital.in
Facebook: <http://www.prakasheyehospital.in>

Counsellor 9837066186
7535832832
Manager 7895517715
OT 7302222373
TPA 9837897788

Timings Morning : 9:30 am to 1:30 pm.
Evening : 5:00 pm to 7:00 pm.
Sunday : 9:30 am to 1:30 pm.
Near Nai Sarak, Garh Road, Meerut
E-mail : prakasheyehosp@gmail.com

First NABH ECO

Accredited Eye Hospital Western U.P.



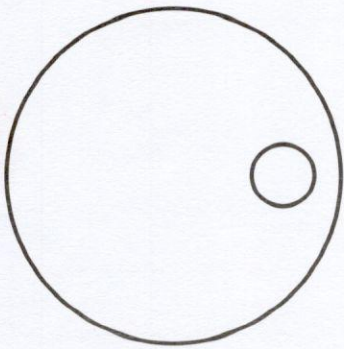
Vn
 R 6/6
 L 6/6

PH
 R 6/6
 L 6/6

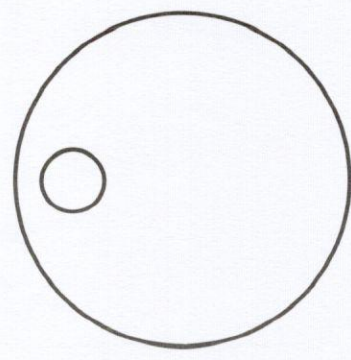
IOP
 R 12
 L 14
 mmHg

Colour vision
 NORMAL
 NORMAL

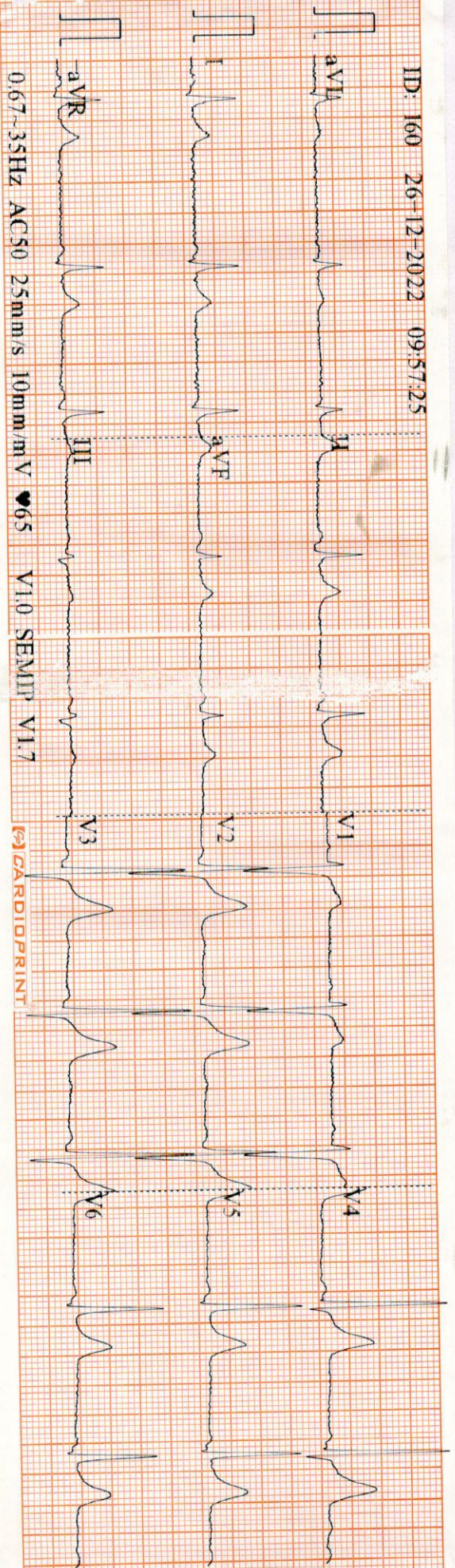
	RIGHT EYE				LEFT EYE			
	Sph.	Cyl.	Axis	Vision	Sph.	Cyl.	Axis	Vision
Distance		plano		6/6		plano		6/6
Near				N/6				N/6



Dr. AMIT GARG
 M.B.B.S., D.N.B
 Garg Pathology, Mr. ...



ID: 160 26-12-2022 09:57:25



0.67~35Hz AC50 25mm/s 10mm/mV ♣65 V1.0 SEMIP V1.7

CARDIOPRINT

ID: 160

Male
37Years

cm

kg

KPa

Diagnosis Information:
Sinus Rhythm
Normal ECG

Dr. MONIKA GARG
M.B.B.S., M.D. (Path.),
GARG PATHOLOGY

HR	:	(60)	bpm
P	:	110	ms
PR	:	135	ms
QRS	:	92	ms
QT/QTc	:	399/399	ms
P/QRS/T	:	58/32/49	°
RV5/SV1	:	1.52/1.416	mV

Report Confirmed by:

Monika Garg

भारत सरकार
GOVERNMENT OF INDIA

 ప్రదీప్ కుమార్
Pradeep Kumar
పుట్టిన తేదీ/ DOB: 23/08/1985
పురుషుడు / MALE

8360 9719 3871

ఆధార్-సామాన్యమానవుడి హక్కు

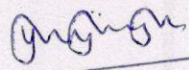


Dr. MONIKA GARG
M.B.B.S., M.D. (Path.)
GARG PATHOLOGY

भारतीय विशिष्ट पहचान प्राधिकरण
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

चिपनामा: Address:
S/O: बुध प्रकाश गौयल, 84, S/O: Budh Prakash Goyal, 84,
अमाणुल्लापुर, जानी, अमापुर, Amanullapur, Jani, Amaapur,
Meerut,
अमापुर, मीरठ, Uttar Pradesh - 250502
ఉత్తర ప్రదేశ్ - 250502

Aadhaar-Aam Admi ka Adhikar



DEPARTMENT OF NON-INVASIVE CARDIOLOGY

DATE : 26/12/2022 REFERENCE NO. : 60800
PATIENT NAME : PRADEEP KUMAR AGE/SEX : 37YRS/M
REFERRED BY : DR. MONIKA GARG ECHOGENECITY : NORMAL
REFERRING DIAGNOSIS : To rule out structural heart disease.

ECHOCARDIOGRAPHY REPORT

DIMENSIONS	NORMAL	NORMAL
AO (ed) 2.3 cm	(2.1 - 3.7 cm)	IVS (ed) 0.8 cm (0.6 - 1.2 cm)
LA (es) 2.6 cm	(2.1 - 3.7 cm)	LVPW (ed) 0.8 cm (0.6 - 1.2 cm)
RVID (ed) 1.3 cm	(1.1 - 2.5 cm)	EF 60% (62% - 85%)
LVID (ed) 4.0 cm	(3.6 - 5.2 cm)	FS 30% (28% - 42%)
LVID (es) 2.9 cm	(2.3 - 3.9 cm)	

MORPHOLOGICAL DATA :

Mitral Valve: AML : Normal

PML : Normal

Aortic Valve : Normal

Tricuspid Valve : Normal

Pulmonary Valve : Normal

Right Ventricle : Normal

Left Ventricle : Normal

Interatrial septum : Intact

Interventricular Septum : Intact

Pulmonary Artery : Normal

Aorta : Normal

Right Atrium : Normal

Left Atrium : Normal

Cont. Page No. 2

:: 2 ::

2-D ECHOCARDIOGRAPHY FINDINGS :

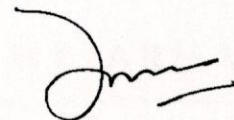
LV normal in size with normal contractions. No LV regional wall motion abnormality seen. RV normal in size with adequate contractions. LA and RA normal. All cardiac valves are structurally normal. No chamber hypertrophy/ intracardiac mass. Estimated LV ejection fraction is 60%.

DOPPLER STUDIES :

Valve	Regurgitation	Velocity m/sec	Gradient mmHg
Mitral Valve	No	0.88	2.8
Tricuspid Valve	No	0.69	2.1
Pulmonary Valve	No	0.78	2.3
Aortic Valve	No	0.94	3.3

IMPRESSION :

- No RWMA.
- Normal LV Systolic Function (LVEF = 60%).



DR. HARIOM TYAGI
MD, DM (CARDIOLOGY)
(Interventional Cardiologist)
for Director, Lokpriya Heart Centre

NOTE: Echocardiography report given is that of the procedure done on that day and needs to be correlated clinically. This is not for medico legal purpose, as patient's identity is not confirmed. No record of this report is kept in the Hospital

DATE	26.12.2022	REF. NO.	13623		
PATIENT NAME	PRADEEP KUMAR	AGE	37 YRS	SEX	M
INVESTIGATION	X-RAY CHEST PA VIEW	REF. BY	GARG (PATHOLOGY)		

REPORT

- Trachea is central in position.
- **Both lung show mildly prominent broncho vascular marking.**
- Cardiac size is within normal limits.
- Both costophrenic angles are clear.
- Both domes of diaphragm are normal in contour and position.

IMPRESSION

Both lung show mildly prominent broncho vascular marking.

Dr. P.D. Sharma
 M.B.B.S., D.M.R.D. (VIMS & RC)
 Consultant Radiologist and Head

1. Impression is a professional opinion & not a diagnosis
2. All modern machines & procedures have their limitations. If there is variance clinically this examination may be repeated or reevaluated by other investigations
Ps. All congenital anomalies are not picked upon ultrasounds.
3. Suspected typing errors should be informed back for correction immediately.
4. Not for medico-legal purpose. Identity of the patient cannot be verified.

5

DATE	26.12.2022	REF. NO.	4047		
PATIENT NAME	PRADEEP KUMAR	AGE	37YRS	SEX:	M
INVESTIGATION	USG WHOLE ABDOMEN	REF. BY	GARG (PATHOLOGY)		

REPORT

Liver - appears normal in size and echotexture. No mass lesion seen. Portal vein is normal.

Gall bladder - Wall thickness is normal. No calculus / mass lesion seen. CBD is normal.

Pancreas- appears normal in size and echotexture. No mass lesion seen.

Spleen- is normal in size and echotexture.

Right Kidney - Normal in size and echotexture. Show well maintained corticomedullary differentiation. No calculus / hydronephrosis is noted.

Left Kidney - Normal in size and echotexture. Show well maintained corticomedullary differentiation. No calculus / hydronephrosis is noted.

Urinary bladder - appears distended. Wall thickness is normal. No calculus / mass seen.

Prostate - Normal in size (19g) & echotexture.

IMPRESSION

Essentially normal study

Dr. P.D. Sharma
 M.B.B.S. / D.M.R.D. (VIMS & RC)
 Consultant Radiologist and Head

1. Impression is a professional opinion & not a diagnosis
2. All modern machines & procedures have their limitations. If there is variance clinically this examination may be repeated or reevaluated by other investigations
Ps. All congenital anomalies are not picked upon ultrasounds.
3. Suspected typing errors should be informed back for correction immediately.
4. Not for medico-legal purpose. Identity of the patient cannot be verified.