

DATE	26.02.2022	REF. NO.	12703		
PATIENT NAME	AMIT KUMAR	AGE	33 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.

• 1.5 Tesla MRI • 64 Slice CT • Ultrasound  
• Doppler • Dexa Scan / BMD • Digital X-ray

Helpline Numbers : 0121-2792500, 2601901

PRENATAL DETERMINATION OF SEX IS BANNED,  
PREVENT FEMALE FOETICIDE

DATE	26.02.2022	REF. NO.	6410		
PATIENT NAME	AMIT KUMAR	AGE	33YRS	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 (20g) & echotexture.

### IMPRESSION

*Increased bowel gas shadow noted.*

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

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**PRENATAL DETERMINATION OF SEX IS BANNED,  
 PREVENT FEMALE FOETICIDE**

Helpline Numbers : 0121-2792500, 2601901

## DEPARTMENT OF NON-INVASIVE CARDIOLOGY

DATE : 26.02.2022 REFERENCE NO. : 3850  
 PATIENT NAME : AMIT KUMAR AGE/SEX : 33YRS/M  
 REFERRED BY : GARG PATHOLOGY ECHOGENECITY : NORMAL  
 REFERRING DIAGNOSIS : To rule out structural heart disease.

### **ECHOCARDIOGRAPHY REPORT**

DIMENSIONS	NORMAL	NORMAL
AO (ed) 2.4 cm	(2.1 - 3.7 cm)	IVS (ed) 0.8 cm (0.6 - 1.2 cm)
LA (es) 2.5 cm	(2.1 - 3.7 cm)	LVPW (ed) 0.9 cm (0.6 - 1.2 cm)
RVID (ed) 1.3 cm	(1.1 - 2.5 cm)	EF 60% (62% - 85%)
LVID (ed) 3.9 cm	(3.6 - 5.2 cm)	FS 30% (28% - 42%)
LVID (es) 2.8 cm	(2.3 - 3.9 cm)	

### MORPHOLOGICAL DATA :

Mitral Valve: AML : Normal Interatrial septum : Intact  
 PML : Normal Interventricular Septum : Intact  
 Aortic Valve : Normal Pulmonary Artery : Normal  
 Tricuspid Valve : Normal Aorta : Normal  
 Pulmonary Valve : Normal Right Atrium : Normal  
 Right Ventricle : Normal Left Atrium : Normal  
 Left Ventricle : 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	0.84	2.6
Tricuspid Valve	No	0.94	3.2
Pulmonary Valve	No	0.77	2.0
Aortic Valve	No	0.97	3.4

## IMPRESSION :

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



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

for

**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.

Typed by: