DOB

Age

# MYSORE-BALLAL CIRCLE



:04 Jan 1999 :23Y/FEMALE

Wisit ID :712226223

Phone No :9052296362

--- A MEDALL COMPANY ---

Date 27-Aug-2022 10:55 AM

Eustomer Name : MRS.UMA M

Ref Dr Name : MediWheel

Customer Id :MED111268982

Email Id :

Corp Name : MediWheel

Address :

Package Name: Mediwheel Full Body Health Checkup Female Below 40

s.No	Modality	Study	Accession No	Time	Seq	Signature
1	LAB	BLOOD UREA NITROGEN			1	
		(BUN)				
2	LAB	GLUCOSE - FASTING	Not given			
3	LAB	GLUCOSE - POSTPRANDIAL				
		(2 HRS)				
4	LAB	GLYCOSYLATED				
		HAEMOGLOBIN (HbA1c)				
5	LAB	LIPID PROFILE	Luck direct			
6	LAB	LIVER FUNCTION TEST (LFT)				
7	LAB	URIC ACID				
8	LAB	URINE GLUCOSE - FASTING	- not don.			
9	LAB	URINE GLUCOSE -				
		POSTPRANDIAL (2 Hrs)				
10	LAB	COMPLETE BLOOD COUNT				
		WITH ESR				
11	LAB	THYROID PROFILE/ TFT( T3,				
		T4, TSH)				
12	LAB	STOOL ANALYSIS - ROUTINE	= por glu			
13	LAB	URINE ROUTINE				
14	LAB	CREATININE				
15	LAB	BLOOD GROUP & RH TYPE				
	1 3	(Forward Reverse)				

	AM		Patient Details Print Page	
	_AB	BUN/CREATININE RATIO		
	OTHERS	physical examination	MYS2718179102651	
18	us	ULTRASOUND ABDOMEN	MYS2718179103462	
19	OTHERS	Treadmill / 2D Echow dow	MYS2718179127528	
20	OTHERS	EYE CHECKUP	MYS2718179135592	
21	X-RAY	X RAY CHEST	MYS2718179145199	
22	OTHERS	Consultation Physician	MYS2718179148004	
23	ЕСНО	EEETROGARDIOGRAM ECG/	MYS2718179149333	

H \_ 150 Cm wt - 65 cm Bp - 110 170 montheg. pulse - 82 bpoor. teip - 38 sneh vaid 28 sneh

Registerd By

(A.JAYASHREE)



Customer	MRS.UMA M	Customer 1D	MED111268982
Name Age & Gender	23Y/FEMALE	Visit Date	27/08/2022
Pof Doctor	MediWheel		

### ABDOMINO-PELVIC ULTRASONOGRAPHY

LIVER is normal in shape, size and has uniform echopattern. No evidence of focal lesion or intrahepatic biliary ductal dilatation. Hepatic and portal vein radicals are normal.

GALL BLADDER show normal shape and has clear contents.
Gall bladder wall is of normal thickness. CBD is of normal calibre.

**PANCREAS** has normal shape, size and uniform echopattern. No evidence of ductal dilatation or calcification.

SPLEEN show normal shape, size and echopattern.

**KIDNEYS** move well with respiration and have normal shape, size and echopattern. Cortico- medullary differentiations are well madeout. No evidence of calculus or hydronephrosis.

	Bipolar length (cms)	Parenchymal thickness (cms		
Right Kidney	9.7	1.7		
Left Kidney	10.4	1.7		

#### URINARY BLADDER empty.

**UTERUS** is anteverted and has normal shape and size. It has uniform myometrial echopattern. Endometrial echo is of normal thickness 6.2 mms.

Uterus measures as follows: LS: 5.2cms

AP: 3.5cms

TS: 4.3cms.

OVARIES are not visualised.

POD & adnexa are free.

No evidence of ascites.

### **IMPRESSION:**

> NO SIGNIFICANT ABNORMALITY DETECTED.

CONSULTANT RADIOLOGISTS

DR. ANITHA ADARSH

DR. MOHAN B



# Medall Diagnostics Ballal Circle(Ashoka circle) - Mysore



Customer Name	MRS.UMA M	Customer ID	MED111268982
	23Y/FEMALE	Visit Date	27/08/2022
Age & Gender Ref Doctor	MediWheel		









You can also conveniently view the reports and trends through our App. Scan QR code to download the App.



Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.



Customer	MRS.UMA M	Customer ID	MED111268982
Age & Gender	23Y/FEMALE	Visit Date	27/08/2022
Pof Doctor	MediWheel		

# 2 D ECHOCARDIOGRAPHIC STUDY

# M mode measurement:

AORTA : 2.4cms

LEFT ATRIUM : 2.4cms

LEFT VENTRICLE (DIASTOLE) : 4.1cms

(SYSTOLE) : 2.2cms

VENTRICULAR SEPTUM (DIASTOLE) : 0.8cms

(SYSTOLE) : 1.0cms

POSTERIOR WALL (DIASTOLE) : 0.8cms

(SYSTOLE) : 1.1cms

EDV : 71ml

ESV : 28ml

FRACTIONAL SHORTENING : 37%

EJECTION FRACTION : 61%

RVID: 1.3cms

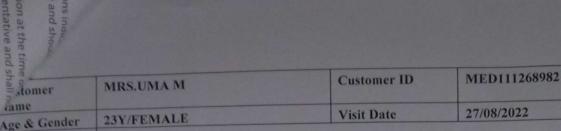
# **DOPPLER MEASUREMENTS:**

MITRAL VALVE : 'E' - 0.81m/s 'A' - 0.27m/s NO MR

AORTIC VALVE : 0.99m/s NO AR

TRICUSPID VALVE : 'E' - 0.75m/s 'A' - 0.40m/s NO TR

PULMONARY VALVE : 0.78m/s NO PR





# 2D ECHOCARDIOGRAPHY FINDINGS:

Ref Doctor

MediWheel

Left ventricle : Normal size, Normal systolic function.

No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

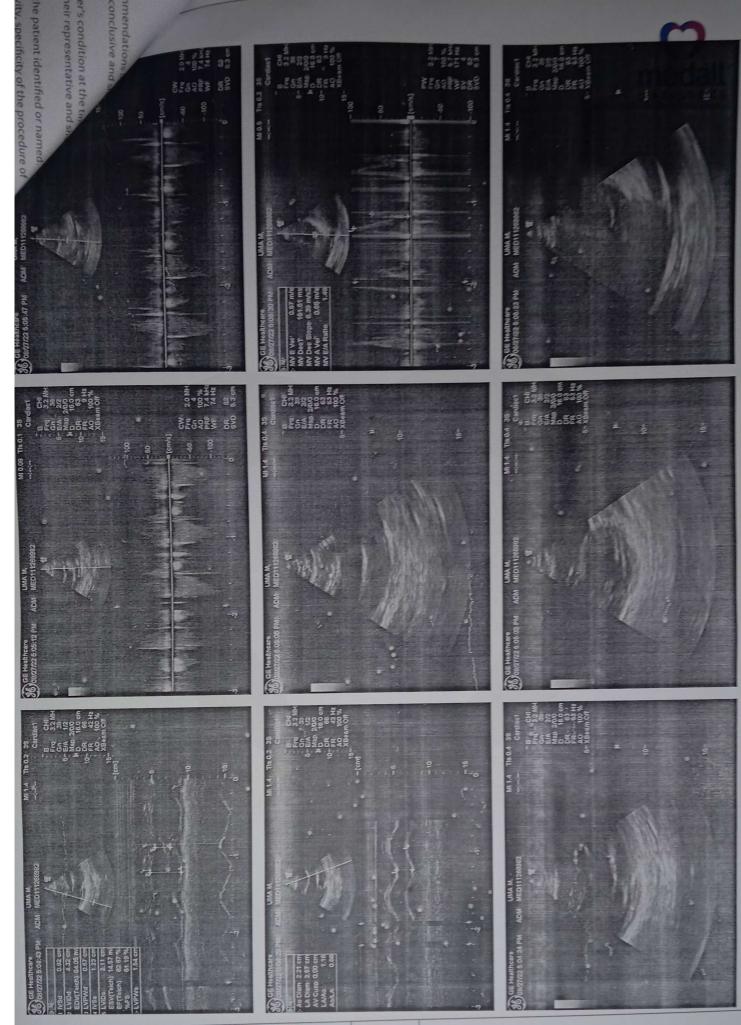
### **IMPRESSION:**

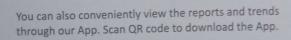
- > NORMAL SIZED CARDIAC CHAMBERS.
- > NORMAL LV SYSTOLIC FUNCTION. EF: 61%.
- > NO REGIONAL WALL MOTION ABNORMALITIES.
- > NORMAL VALVES.
- > NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.

Vicent

DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST
NB/TG









Please produce bill copy at the time of collecting the reports. Request you to provide your mobile number or customer id during your subsequent visits.

MEDAU



# NETHRADHAMA SUPER SPECIALITY EYE HOSPITAL

(A Unit of Nethradhama Hospitals Pvt. Ltd.)

**OPD SHEET** 

Patient's Name: Mys. uma. M

24/F

Date: 27/8/22

OP No..... 1 208408

2:50 PM

Dr. Roopashree. C.R

MBBS.MS, FPRS

Consultant-Phaco & Refractive KMC No: 105152

De medical coefficate

AS: BE WIL

UWAY 616, NG

fundus: BE. COR 0.3

FRF

(slow vioiso)

- efw sos /24

Jayanagar Branch: 080-26088000 / 2663 3533 / 2663 3609 / 2245 Mobile: 94480 71816

Rajajinagar Branch: 080-4333 4111 / 2313 2777 / Mobile: 99728 53918

Indiranagar Branch: 080-4333 2555 Mobile: 81973 51609 Mysore Branch: 0821-4293000 Mobile: 94490 03771 Mangalore Lasik Centre: 0824-2213801 Mobile: 97410 26389 Davangere Lasik Centre: 08192-226607/08 Mobile: 94820 01795



UMA M 23 MED111268982 F CHEST PA 8/27/2022 01:21 PM MEDALL CLUMAX DIAGNOSTIC

PID No. : MED111268982

: 712226223

Age / Sex : 23 Year(s) / Female

**Type** : OP

SID No.

Ref. Dr : MediWheel Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

Report On : 27/08/2022 5:55 PM

: 28/08/2022 2:43 PM **Printed On** 



<u>Investigation</u>	<u>Observed</u>	<u>Unit</u>	<u>Biological</u>
-	<u>Value</u>		Reference Interval

# **HAEMATOLOGY**

### Complete Blood Count With - ESR

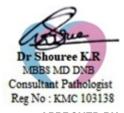
Haemoglobin	<b>12.3</b> g/dL	12.5 - 16.0
-------------	------------------	-------------

(EDTA Blood/Spectrophotometry)

INTERPRETATION: Haemoglobin values vary in Men, Women & Children. Low haemoglobin values may be due to nutritional deficiency, blood loss, renal failure etc. Higher values are often due to dehydration, smoking, high altitudes, hypoxia etc.

Remark: Kindly correlate clinically.

PCV (Packed Cell Volume) / Haematocrit (EDTA Blood/Derived)	37.2	%	37 - 47
RBC Count (EDTA Blood/Automated Blood cell Counter)	4.62	mill/cu.mm	4.2 - 5.4
MCV (Mean Corpuscular Volume) (EDTA Blood/Derived from Impedance)	80.0	fL	78 - 100
MCH (Mean Corpuscular Haemoglobin) (EDTA Blood/Derived)	26.6	pg	27 - 32
MCHC (Mean Corpuscular Haemoglobin concentration) (EDTA Blood/Derived)	33.1	g/dL	32 - 36
RDW-CV (Derived)	13.8	%	11.5 - 16.0
RDW-SD (Derived)	38.64	fL	39 - 46
Total WBC Count (TC) (EDTA Blood/Derived from Impedance)	11270	cells/cu.mm	4000 - 11000
Remark: Kindly correlate clinically.			
Neutrophils (Blood/Impedance Variation & Flow Cytometry)	70	%	40 - 75



**APPROVED BY** 

PID No. : MED111268982

: 712226223 SID No.

Age / Sex : 23 Year(s) / Female

Type : OP

Ref. Dr : MediWheel Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

Report On : 27/08/2022 5:55 PM

: 28/08/2022 2:43 PM **Printed On** 

(7)
MEDALL

Investigation	Observed <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
Lymphocytes (Blood/Impedance Variation & Flow Cytometry)	24	%	20 - 45
Eosinophils (Blood/Impedance Variation & Flow Cytometry)	02	%	01 - 06
Monocytes (Blood/Impedance Variation & Flow Cytometry)	04	%	01 - 10
Basophils (Blood/Impedance Variation & Flow Cytometry)	00	%	00 - 02
Absolute Neutrophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	7.89	10^3 / μΙ	1.5 - 6.6
Absolute Lymphocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	2.70	10^3 / μl	1.5 - 3.5
Absolute Eosinophil Count (AEC) (EDTA Blood/Impedance Variation & Flow Cytometry)	0.23	10^3 / μl	0.04 - 0.44
Absolute Monocyte Count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.45	10^3 / μΙ	< 1.0
Absolute Basophil count (EDTA Blood/Impedance Variation & Flow Cytometry)	0.00	10^3 / μl	< 0.2
Platelet Count (EDTA Blood/Derived from Impedance)	354	10^3 / μl	150 - 450
MPV (Blood/ <i>Derived</i> )	9.8	fL	8.0 - 13.3
PCT	0.35	%	0.18 - 0.28
ESR (Erythrocyte Sedimentation Rate)	12	mm/hr	< 20



**APPROVED BY** 

(Citrated Blood/Automated ESR analyser)

PID No. : MED111268982

: 712226223

Age / Sex : 23 Year(s) / Female

Type : OP

SID No.

Ref. Dr : MediWheel Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

Report On : 27/08/2022 5:55 PM

: 28/08/2022 2:43 PM **Printed On** 



Investigation	Observed Value	<u>Unit</u>	<u>Biological</u> Reference Interval
<b>BIOCHEMISTRY</b>			
Liver Function Test			
Bilirubin(Total) (Serum/Diazotized Sulfanilic Acid)	0.5	mg/dL	0.1 - 1.2
Bilirubin(Direct) (Serum/Diazotized Sulfanilic Acid)	0.1	mg/dL	0.0 - 0.3
Bilirubin(Indirect) (Serum/Derived)	0.40	mg/dL	0.1 - 1.0
Total Protein (Serum/Biuret)	6.7	gm/dl	6.0 - 8.0
Albumin (Serum/Bromocresol green)	4.2	gm/dl	3.5 - 5.2
Globulin (Serum/Derived)	2.50	gm/dL	2.3 - 3.6
A : G Ratio (Serum/Derived)	1.68		1.1 - 2.2
INTERPRETATION: Remark: Electrophoresis is the p	oreferred method		
SGOT/AST (Aspartate Aminotransferase) (Serum/IFCC / Kinetic)	20	U/L	5 - 40
SGPT/ALT (Alanine Aminotransferase) (Serum/IFCC / Kinetic)	14	U/L	5 - 41
Alkaline Phosphatase (SAP) (Serum/PNPP / Kinetic)	73	U/L	42 - 98
GGT(Gamma Glutamyl Transpeptidase) (Serum/IFCC / Kinetic)	10	U/L	< 38



PID No. : MED111268982 Register On : 27/08/2022 10:56 AM

**Printed On** 

Type : OP

Ref. Dr : MediWheel



<u>Investigation</u>	Observed Value	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
Glycosylated Haemoglobin (HbA1c)			
HbA1C (Whole Blood/ <i>HPLC</i> )	5.7	%	Normal: 4.5 - 5.6 Prediabetes: 5.7 - 6.4 Diabetic: >= 6.5

: 28/08/2022 2:43 PM

INTERPRETATION: If Diabetes - Good control: 6.1 - 7.0 %, Fair control: 7.1 - 8.0 %, Poor control >= 8.1 %

Remark: Kindly correlate clinically.

Estimated Average Glucose 116.89 mg/dL

(Whole Blood)

#### **INTERPRETATION: Comments**

HbA1c provides an index of Average Blood Glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

Conditions that prolong RBC life span like Iron deficiency anemia, Vitamin B12 & Folate deficiency,

hypertriglyceridemia,hyperbilirubinemia,Drugs, Alcohol, Lead Poisoning, Asplenia can give falsely elevated HbA1C values. Conditions that shorten RBC survival like acute or chronic blood loss, hemolytic anemia, Hemoglobinopathies, Splenomegaly,Vitamin E ingestion, Pregnancy, End stage Renal disease can cause falsely low HbA1c.

Dr Shouree K.R MBBS MD DNB Consultant Pathologist Reg No : KMC 103138 APPROVED BY

PID No. : MED111268982 Register On : 27/08/2022 10:56 AM

**Printed On** 

Type : OP

Ref. Dr : MediWheel



<u>Investigation</u>	<u>Observed</u> <u>Un</u>	<u>it</u> <u>Biological</u>
	Value	Reference Interval

: 28/08/2022 2:43 PM

# **IMMUNOASSAY**

### THYROID PROFILE / TFT

T3 (Triiodothyronine) - Total 0.80 ng/ml 0.7 - 2.04

(Serum/Chemiluminescent Immunometric Assay (CLIA))

#### INTERPRETATION:

#### **Comment:**

Total T3 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T3 is recommended as it is Metabolically active.

T4 (Thyroxine) - Total 8.89 Microg/dl 4.2 - 12.0

(Serum/Chemiluminescent Immunometric Assay

(CLIA))

#### INTERPRETATION:

#### **Comment:**

Total T4 variation can be seen in other condition like pregnancy, drugs, nephrosis etc. In such cases, Free T4 is recommended as it is Metabolically active.

TSH (Thyroid Stimulating Hormone) 1.281 µIU/mL 0.35 - 5.50

(Serum/Chemiluminescent Immunometric Assay

(CLIA))

#### INTERPRETATION:

Reference range for cord blood - upto 20

1 st trimester: 0.1-2.5 2 nd trimester 0.2-3.0 3 rd trimester : 0.3-3.0

(Indian Thyroid Society Guidelines)

#### **Comment:**

- 1.TSH reference range during pregnancy depends on Iodine intake, TPO status, Serum HCG concentration, race, Ethnicity and BMI.
- 2.TSH Levels are subject to circadian variation, reaching peak levels between 2-4am and at a minimum between 6-10PM. The variation can be of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
- 3. Values&amplt 0.03 µIU/mL need to be clinically correlated due to presence of rare TSH variant in some individuals.



APPROVED BY

Page 5 of 9

PID No. : MED111268982

: 712226223 SID No.

Age / Sex : 23 Year(s) / Female

**Type** : OP

Ref. Dr : MediWheel Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

Report On : 27/08/2022 5:55 PM

**Printed On** : 28/08/2022 2:43 PM



<u>Investigation</u>	<u>Observed</u> <u>U</u>	<u>Biological</u>
-	Value	Reference Interval

# **CLINICAL PATHOLOGY**

### **PHYSICAL EXAMINATION**

Colour	D-111	Yellow to Amber
COMMIT	Pale vellow	reliow to Amber

(Urine/Physical examination)

25 ml Volume

(Urine/Physical examination)

Clear Appearance

(Urine)

#### **CHEMICAL EXAMINATION**

4.5 - 8.0 pН 6.0

(Urine)

1.010 1.002 - 1.035 Specific Gravity

(Urine/Dip Stick Reagent strip method)

Negative Negative Protein

(Urine/Dip Stick Reagent strip method)

Glucose Nil Nil

(Urine)

Nil Nil Ketone

(Urine/Dip Stick Reagent strip method)

Leukocytes Negative leuco/uL Negative

(Urine)

Nil Nil Nitrite

(Urine/Dip Stick Reagent strip method)

Negative Negative Bilirubin mg/dL (Urine)

> MBBS MD DNB Consultant Pathologist Reg No: KMC 103138

**APPROVED BY** 

PID No. : MED111268982

: 712226223 SID No.

Age / Sex : 23 Year(s) / Female

Type : OP

(Urine)

Ref. Dr : MediWheel Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

Report On : 27/08/2022 5:55 PM

: 28/08/2022 2:43 PM **Printed On** 



Investigation	Observed Value	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
Blood	Nil		Nil
(Urine)			
Urobilinogen	Normal		Within normal limits
(Urine/Dip Stick Reagent strip method)			
<u>Urine Microscopy Pictures</u>			
RBCs	Nil	/hpf	NIL
(Urine/Microscopy)			
Pus Cells	1-2	/hpf	< 5
(Urine/Microscopy)			
Epithelial Cells	3-4	/hpf	No ranges
(Urine/Microscopy)			
Others	Nil		Nil



**PID No.** : MED111268982

**SID No.** : 712226223

Age / Sex : 23 Year(s) / Female

Type : OP

Ref. Dr : MediWheel

Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

**Report On** : 27/08/2022 5:55 PM

Printed On : 28/08/2022 2:43 PM



InvestigationObservedUnitBiologicalValueReference Interval

# **IMMUNOHAEMATOLOGY**

BLOOD GROUPING AND Rh TYPING

(EDTA Blood/Agglutination)

Remark: Test to be confirmed by gel method

'B' 'Positive'

Dr Shouree K.R MBBS MD DNB Consultant Pathologist Reg No : KMC 103138

APPROVED BY

PID No. : MED111268982

: 712226223

Age / Sex : 23 Year(s) / Female

: OP

SID No.

**Type** 

Ref. Dr

: MediWheel

Register On : 27/08/2022 10:56 AM

Collection On : 27/08/2022 1:03 PM

Report On 27/08/2022 5:55 PM

: 28/08/2022 2:43 PM **Printed On** 



Investigation	<u>Observed</u> <u>Value</u>	<u>Unit</u>	<u>Biological</u> <u>Reference Interval</u>
<b>BIOCHEMISTRY</b>			
BUN / Creatinine Ratio	20.1		
Glucose Postprandial (PPBS)	103	mg/dL	70 - 140

### (Plasma - PP/GOD - POD) **INTERPRETATION:**

Factors such as type, quantity and time of food intake, Physical activity, Psychological stress, and drugs can influence blood glucose level. Fasting blood glucose level may be higher than Postprandial glucose, because of physiological surge in Postprandial Insulin secretion, Insulin resistance, Exercise or Stress, Dawn Phenomenon, Somogyi Phenomenon, Anti- diabetic medication during treatment for Diabetes.

Urine Sugar (PP-2 hours) (Urine - PP)	Negative		Negative
Blood Urea Nitrogen (BUN) (Serum/Urease UV / derived)	12.1	mg/dL	7.0 - 21
Creatinine (Serum/Laffa Kinatic)	0.6	mg/dL	0.6 - 1.1

(Serum/Jaffe Kinetic)

INTERPRETATION: Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin ,cefazolin, ACE inhibitors ,angiotensin II receptor antagonists, N-acetylcyteine , chemotherapeutic agent such as flucytosine etc

Uric Acid 4.2 mg/dL 2.6 - 6.0

(Serum/Uricase/Peroxidase)



-- End of Report --



Name	UMA M	ID	MED111268982
Age & Gender	23Y/F	Visit Date	Aug 27 2022 10:55AM
Ref Doctor	MediWheel		

# X – RAY CHEST PA VIEW

### **LUNGS:**

Both lung fields are clear.

Vascular markings are normal.

Tracheal air lucency is normal.

No evidence of abnormal hilar opacities.

Costophrenic angle recesses are normal.

### **CARDIA:**

Cardia is normal shape and configuration.

Diaphragm, Thoracic cage, soft tissues are normal.

# **IMPRESSION:**

• NO SIGNIFICANT DIAGNOSTIC ABNORMALITY.

AA/SV

Dr. Anitha Adarsh Consultant Radiologist

Name	MRS.UMA M	ID	MED111268982
Age & Gender	23Y/FEMALE	Visit Date	27/08/2022
Ref Doctor Name	MediWheel		



# 2 D ECHOCARDIOGRAPHIC STUDY

# M mode measurement:

AORTA : 2.4cms

LEFT ATRIUM : 2.4cms

LEFT VENTRICLE (DIASTOLE) : 4.1cms

(SYSTOLE) : 2.2cms

VENTRICULAR SEPTUM (DIASTOLE) : 0.8cms

(SYSTOLE) : 1.0cms

POSTERIOR WALL (DIASTOLE) : 0.8cms

(SYSTOLE) : 1.1cms

EDV: 71ml

ESV : 28ml

FRACTIONAL SHORTENING : 37%

EJECTION FRACTION : 61%

RVID : 1.3cms

### **DOPPLER MEASUREMENTS:**

MITRAL VALVE : E' - 0.81m/s A' - 0.27m/s NO MR

AORTIC VALVE : 0.99m/s NO AR

TRICUSPID VALVE : E' - 0.75m/s A' - 0.40m/s NO TR

PULMONARY VALVE : 0.78m/s NO PR

### **2D ECHOCARDIOGRAPHY FINDINGS:**

Name	MRS.UMA M	ID	MED111268982
Age & Gender	23Y/FEMALE	Visit Date	27/08/2022
Ref Doctor Name	MediWheel		



Left ventricle : Normal size, Normal systolic function.

No regional wall motion abnormalities.

Left Atrium : Normal.

Right Ventricle : Normal.

Right Atrium : Normal.

Mitral valve : Normal, No mitral valve prolapsed.

Aortic valve : Normal, Trileaflet.

Tricuspid valve : Normal.

Pulmonary valve : Normal.

IAS : Intact.

IVS : Intact.

Pericardium : No pericardial effusion.

# **IMPRESSION**:

- > NORMAL SIZED CARDIAC CHAMBERS.
- > NORMAL LV SYSTOLIC FUNCTION. EF: 61%.
- > NO REGIONAL WALL MOTION ABNORMALITIES.
- > NORMAL VALVES.
- > NO CLOTS/ PERICARDIAL EFFUSION VEGETATION.



DR. NIKHIL B
INTERVENTIONAL CARDIOLOGIST
NB/TG