



BHAILAL AMIN  
GENERAL HOSPITAL



### CONCLUSION OF HEALTH CHECKUP

ECU Number : 4337	MR Number : 23209624	Patient Name: KALPANA MAKWANA
Age : 44	Sex : Female	Height : 158
Weight : 62	Ideal Weight : 57	BMI : 24.84
Date : 15/07/2023		

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



ECU Number : 4337                      MR Number : 23209624                      Patient Name: KALPANA MAKWANA  
Age : 44                                      Sex : Female                                      Height : 158  
Weight : 62                                      Ideal Weight : 57                                      BMI : 24.84  
Date : 15/07/2023

Past H/O : P/H/O HYSTERECTOMY 5 YRS.

Present H/O : NO MEDICAL COMPLAINTS AT PRESENT.

Family H/O : FATHER : DIABETES.

Habits : NO HABITS.

Gen.Exam. : G.C. GOOD

B.P : 140/80 mm Hg

Pulse : 74/MIN REG.

Others : SPO2 : 98 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :



ECU Number : 4337

Age : 44

Weight : 62

Date : 15/07/2023

MR Number : 23209624

Sex : Female

Ideal Weight : 57

Patient Name: KALPANA MAKWANA

Height : 158

BMI : 24.84

**Ophthalmic Check Up :**

**Right**

**Left**

Ext Exam

NORMAL

Vision Without Glasses

6/6

6/6

Vision With Glasses

N.5

N.5

Final Correction

+ 1.50 D SPH

+ 1.50 D SPH

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

**Orthopaedic 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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MR Number : 23209624

Patient Name : KALPANA MAKWANA

Age : 44

Sex : Female

Height : 158

Weight : 62

Ideal Weight : 57

BMI : 24.84

Date : 15/07/2023

## Gynaec Check Up :

OBSTETRIC HISTORY	G2 P2 - FTND
MENSTRUAL HISTORY	HYSTERECTOMY 5 YRS BACK.
PRESENT MENSTRUAL CYCLE	-
PAST MENSTRUAL CYCLE	-
CHIEF COMPLAINTS	-
PA	SOFT
PS	VAULT - (N) Vg - (N)
PV	UT Fx CLEAR
BREAST EXAMINATION RIGHT	NORMAL
BREAST EXAMINATION LEFT	NORMAL
PAPSMEAR	
BMD	
MAMMOGRAPHY	
ADVICE	



Patient Name : Mrs. KALPANA MAKWANA  
 Gender / Age : Female / 44 Years 11 Months 15 Days  
 MR No / Bill No. : 23209624 / 241035151  
 Consultant : Dr. Manish Mittal  
 Location : OPD

Type : OPD  
 Request No. : 140917  
 Request Date : 15/07/2023 09:26 AM  
 Collection Date : 15/07/2023 10:29 AM  
 Approval Date : 15/07/2023 02:40 PM

**CBC + ESR**

Test	Result	Units	Biological Ref. Range
<b>Haemoglobin.</b>			
Haemoglobin	13.1	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.58	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	40.3	%	36 - 46
Mean Corpuscular Volume (MCV)	88.0	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	28.6	pg	27 - 32
MCH Concentration (MCHC)	32.5	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	13.1	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	43.0	fl	39 - 46
<b>Total Leucocyte Count (TLC)</b>			
Total Leucocyte Count (TLC)	5.32	thou/cmm	4 - 10
<b>Differential Leucocyte Count</b>			
Polymorphs	65	%	40 - 80
Lymphocytes	30	%	20 - 40
Eosinophils	1	%	1 - 6
Monocytes	4	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	3.45	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	1.59	thou/cmm	1 - 3
Eosinophils (Abs. Value)	<b>0.06</b>	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	<b>0.19</b>	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.03	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
<b>Platelet Count</b>			
Platelet Count	278	thou/cmm	150 - 410
Smear evaluation	Adequate		
ESR	3	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, retest may be required.

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. KALPANA MAKWANA	Type	: OPD
Gender / Age	: Female / 44 Years 11 Months 15 Days	Request No.	: 140917
MR No / Bill No.	: 23209624 / 241035151	Request Date	: 15/07/2023 09:26 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 metric 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Ameet Soni  
MD (Path)

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mrs. KALPANA MAKWANA  
Gender / Age : Female / 44 Years 11 Months 15 Days  
MR No / Bill No. : 23209624 / 241035151  
Consultant : Dr. Manish Mittal  
Location : OPD  
Type : OPD  
Request No. : 140917  
Request Date : 15/07/2023 09:26 AM  
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**Haematology**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<b>Blood Group</b>			
ABO system	O		
Rh system.	Positive		

By Gel Technology / Tube Agglutination Method

Note :

- This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol
- This method check's group both on Red blood cells and in Serum for "ABO" group.

---- End of Report ----

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**Fasting Plasma Glucose**

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
<b>Fasting Plasma Glucose</b>			
Fasting Plasma Glucose	95	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	101	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimension

---- End of Report ----

Dr. Rakesh Vaidya  
MD (Path). DCP.

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**HbA1c (Glycosylated Hb)**

Test	Result	Units	Biological Ref. Range
<b>HbA1c (Glycosylated Hb)</b>			
Glycosylated Hemoglobin (HbA1c)	5.4	%	
estimated Average Glucose (e AG) *	108.28	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)

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**Complete Lipid Profile**

Test	Result	Units	Biological Ref. Range
<b>Complete Lipid Profile</b>			
Appearance	Clear		
Triglycerides	92	mg/dL	1 - 150
<i>(By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)</i>			
<i>&lt; 150 Normal</i>			
<i>150-199 Borderline High</i>			
<i>200-499 High</i>			
<i>&gt; 499 Very High</i>			
Total Cholesterol	<b>236</b>	mg/dL	1 - 200
<i>(By enzymatic colorimetric method on RXL Dade Dimension)</i>			
<i>&lt;200 mg/dL - Desirable</i>			
<i>200-239 mg/dL - Borderline High</i>			
<i>&gt; 239 mg/dL - High</i>			
HDL Cholesterol	55	mg/dL	40 - 60
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
<i>&lt; 40 Low</i>			
<i>&gt; 60 High</i>			
Non HDL Cholesterol (calculated)	181	mg/dL	1 - 130
<i>(Non- HDL Cholesterol)</i>			
<i>&lt; 130 Desirable</i>			
<i>139-159 Borderline High</i>			
<i>160-189 High</i>			
<i>&gt; 191 Very High</i>			
LDL Cholesterol	<b>153</b>	mg/dL	1 - 100
<i>(By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)</i>			
<i>&lt; 100 Optimal</i>			
<i>100-129 Near / above optimal</i>			
<i>130-159 Borderline High</i>			
<i>160-189 High</i>			
<i>&gt; 189 Very High</i>			
VLDL Cholesterol (calculated)	18.4	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.78		2.1 - 3.5
T. Ch./HDL Ch. Ratio	4.29		3.5 - 5
<i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i>			

---- End of Report ----

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**Liver Function Test (LFT)**

Test	Result	Units	Biological Ref. Range
<b>Bilirubin</b>			
Bilirubin - Total	0.41	mg/dL	0 - 1
Bilirubin - Direct	0.11	mg/dL	0 - 0.3
Bilirubin - Indirect	0.3	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	13	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	21	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	71	U/L	42 - 98
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	22	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
<b>Total Protein</b>			
Total Proteins	7.42	gm/dL	6.4 - 8.2
Albumin	3.99	gm/dL	3.4 - 5
Globulin	3.43	gm/dL	3 - 3.2
A : G Ratio	1.16		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimension.)</i>			

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DEPARTMENT OF LABORATORY MEDICINE

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Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	13	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.56	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (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)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	4.6	mg/dL	2.2 - 5.8

--- End of Report ---

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## Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
------	--------	-------	-----------------------

Triiodothyronine (T3)	1.49	ng/ml	
-----------------------	------	-------	--

(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 ))

Thyroxine (T4)	9.74	mcg/dL	
----------------	------	--------	--

(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 ))

Thyroid Stimulating Hormone (US-TSH)	3.89	microIU/ml	
--------------------------------------	------	------------	--

(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 ))

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**Urine routine analysis (Auto)**

Test	Result	Units	Biological Ref. Range
<b>Physical Examination</b>			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
<b>Chemical Examination (By Reagent strip method)</b>			
pH	6.0		
Specific Gravity	1.025		
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
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
<b>Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)</b>			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	0 - 1	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23209624      Report Date : 15/07/2023  
Request No. : 190071863      15/07/2023 9.26 AM  
Patient Name : **Mrs. KALPANA MAKWANA**  
Gender / Age : Female / 44 Years 11 Months 15 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

**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

*Hasani*

**Dr.Perna C Hasani, MD**  
Consultant Radiologist





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**DEPARTMENT OF DIAGNOSTIC RADIOLOGY**

Patient No. : 23209624 Report Date : 15/07/2023

Request No. : 190071776 15/07/2023 9.26 AM

Patient Name : Mrs. KALPANA MAKWANA

Gender / Age : Female / 44 Years 11 Months 15 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 : Screening for Abdomen (excluding Pelvis) Or Upper Abdomen**

**Liver is normal in size and shows increased echopattern. 14x16mm cyst is seen in right lobe of liver. 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 not seen h/o hystrectomy

No adnexal mass seen.

Urinary bladder is well distended and appears normal.

No ascites.

**COMMENT:**

**Fatty liver with right lobe simple cyst.**

*Kindly correlate clinically*

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

*Prerna C Hasani*

**Dr.Prerna C Hasani, MD**

Consultant Radiologist







**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. : 23209624      Report Date : 15/07/2023  
 Request No. : 190071889      15/07/2023 9.26 AM  
 Patient Name : **Mrs. KALPANA MAKWANA**  
 Gender / Age : Female / 44 Years 11 Months 15 Days

**Mammography (Both Breast)**

Both side mammogram has been obtained in mediolateral oblique (MLO) as well as craniocaudal (CC) projections.

Both breasts show dense glandular parenchyma (Type d), which can obscure mass.  
 No obvious focal mass seen on either side.  
 No obvious micro/cluster calcification seen. Bilateral benign specks of calcifications are seen.  
 No obvious skin thickening or nipple retraction seen.  
 Bilateral benign axillary lymph nodes seen.

**IMPRESSION:**

Dense breasts--needs USG both breast.

Kindly correlate clinically / Follow up

**BIRADS: 0-** needs additional imaging, **1-** negative, **2-** benign, **3-** probably benign (require short term follow up), **4-** suspicious (require further evaluation with biopsy), **5-** highly suspicious for malignancy, **6-** biopsy proven malignancy.

**INFORMATION REGARDING MAMMOGRAMS:**

- A REPORT THAT IS NEGATIVE FOR MALIGNANCY SHOULD NOT DELAY BIOPSY IF THERE IS A DOMINANT OR CLINICALLY SUSPICIOUS MASS.
- IN DENSE BREASTS, AN UNDERLYING MASS LESION MAY BE OBSCURED.
- FALSE POSITIVE DIAGNOSIS OF CANCER MAY OCCURE IN SMALL PERCENTAGE OF CASES.

*Prerna C Hasani*

**Dr. Prerna C Hasani, MD**  
Consultant Radiologist



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

Patient No. : 23209624      Report Date : 15/07/2023  
Request No. : 190071869      15/07/2023 9.26 AM  
Patient Name : Mrs. KALPANA MAKWANA  
Gender / Age : Female / 44 Years 11 Months 15 Days

### Echo Color Doppler

MITRAL VALVE : NORMAL  
AORTIC VALVE : TRILEAFLET, NORMAL  
TRICUSPID VALVE : NORMAL, NO TR, NO PAH  
PULMONARY VALVE : NORMAL  
LEFT ATRIUM : NORMAL  
AORTA : NORMAL  
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,  
LVEF=60%  
RIGHT ATRIUM : NORMAL  
RIGHT VENTRICLE : NORMAL  
I.V.S. : INTACT  
I.A.S. : INTACT  
PULMONARY ARTERY : NORMAL  
PERICARDIUM : NORMAL  
COLOUR/DOPPLER FLOW MAPPING : NO LV diastolic dysfunction  
NO AR, MR, TR, NO PAH

### FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION , ( IVC COLLAPSING )
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr. KILLOL KANERIA MD, DM  
Consultant Cardiologist

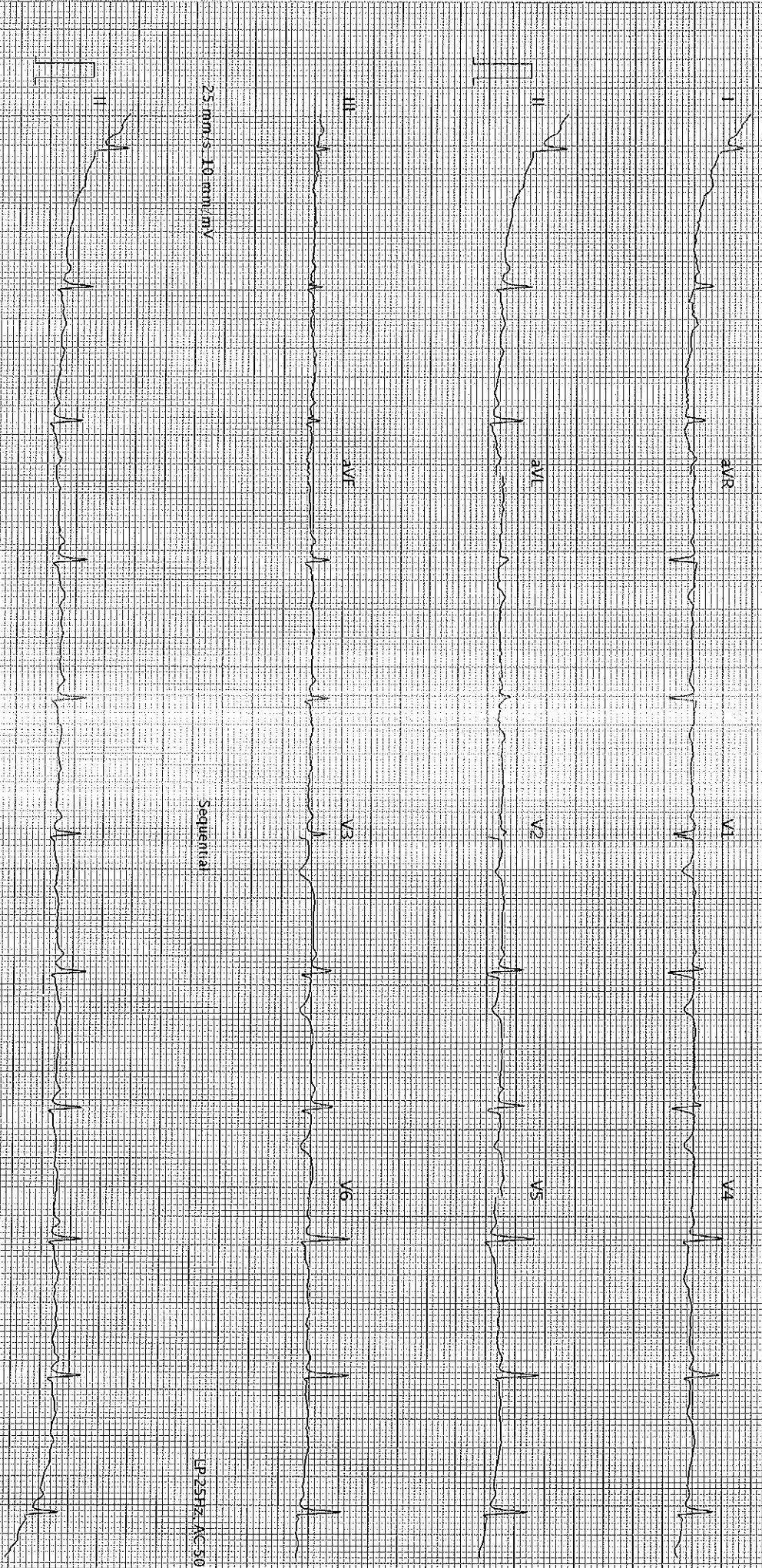
Name Mrs. Kalpana Makwana -  
Patient ID ECU/23209624

15.07.2023 12:48:33  
Standard 12-Lead

Age Female  
Gender Female  
Height  
Weight  
Ethnicity Undefined  
Pacemaker Unknown  
Indication  
Remark

HR 64 bpm  
RR 94/min  
P 104 ms  
PR 137 ms  
QR5 81 ms  
QT 374 ms  
QTc 385 ms  
P axis 79°  
QR5 axis 40°  
T axis 180°

Unconfirmed report



25 mm/s, 10 mm/mV

Sequential

LP 25Hz, AC 50Hz

25 mm/s, 10 mm/mV

LP 25Hz, AC 50Hz

AT 102 G2 1.2.0 (080.011030)

Printed on 15.07.2023 12:48:48

SCHILLER

Part No. 2.157048M

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