



Reg. ID : 257043
Name of Patient : MR. YOGINDER DESWAL
Age/Gender : 40 years / Male
Refd by Dr. : MEDIWHEEL
Sample Type : EDTA

Panel Company : MEDIWHEEL
Lab Request ID : 230840065
Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Test Reported On : Mar 25, 2023, 03:05 p.m.

Test Description Value Unit Biological Ref Interval

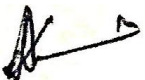
Complete Blood Count (CBC)

Mediwheel metro full body health check up below 40 Male

HAEMOGLOBIN (Hb)	15.4	gm/dl	13.00 - 17.00
Method : SLS			
TLC (Total Leucocyte Count)	5600	/cumm	4000.00 - 10000.00
Method : ELECTRIC IMPEDENCE			
DIFFERENTIAL COUNT			
NEUTROPHIL	50	%	40.00 - 70.00
LYMPHOCYTE	45 ▲	%	20.00 - 40.00
EOSINOPHIL	03	%	1.00 - 6.00
MONOCYTE	02	%	2.00 - 10.00
BASOPHIL	0	%	0.00 - 2.00
E.S.R.	15	mm/Ist hr.	0.00 - 15.00
Method : Westergen			
R B C (Red Blood Cell Count)	5.2	Millions/cmm	4.50 - 5.50
Method : Impedence			
PCV (Hematocrit)	46.8	%	40.00 - 50.00
M C V (Mean Corp Volume)	90	fL	83.00 - 101.00
Method : CALCULATED			
M C H (Mean Corp Hb)	29.62	pg	27.00 - 32.00
Method : CALCULATED			
M C H C (Mean Corp Hb Conc)	32.91	%	31.50 - 34.50
Method : CALCULATED			
MPV	9.9	fL	6.5-12
Method : Calculated			
PLATELET COUNT	246000	/cumm	150000.00 - 410000.00
Method : Impedence			
ABSOLUTE EOSINOPHIL COUNT	168	/cumm	40.00 - 440.00
ABSOLUTE LYMPHOCYTES COUNT	2520	/cumm	1000.00 - 3000.00
ABSOLUTE NEUTROPHIL COUNT	2800	/cumm	2000.00 - 7000.00
Method : MICROSCOPY			
RDW -CV	13.4	%	11.60 - 14.00
RDW -SD	44.1	fL	39.00 - 46.00
PDW	13.3		8.3 - 25

END OF REPORT

If tests results are alarming/unexpected,client is advised to contact the Lab immediately for possible remedial actions.


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 257043
Name of Patient : MR. YOGINDER DESWAL
Age/Gender : 40 years / Male
Refd by Dr. : MEDIWHEEL
Sample Type : URINE

Panel Company : MEDIWHEEL
Lab Request ID : 230840065
Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Test Reported On : Mar 25, 2023, 05:57 p.m.

Test Description	Value	Unit	Biological Ref Interval
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URINE Examination R/M*

Mediwheel metro full body health check up below 40 Male

Physical Examination

Quantity	30ml		
Colour	Pale Yellow	.	Pale yellow
Appearance	Clear		

Chemical Examination

Ph	6.5		5.0-8.0
Method : Method : Dipstick Manual			
Specific Gravity	1.015		1.005 - 1.030
Method : Method : Dipstick Manual			
Protein	Negative		Negative
Method : Method : Dipstick Manual			
Glucose	Negative		Negative
Method : Dipstick/Manual			
Bilirubin	Negative		Negative
Method : Dipstick/Manual			
Ketones	Negative		Negative
Method : Dipstick/Manual			
Nitrite	Negative		Negative
Method : Dipstick/Manual			
Urobilinogen	Normal		Normal
Method : Dipstick/Manual			


Microscopic Examination - Method "Microscopy"

Pus cells	1 - 2	/hpf	0 - 4/hpf
Red Blood Cells	Absent	/hpf	Nil
Epithelial Cells	1 - 2	/hpf	1 - 2/hpf
Crystals	Absent	.	Absent
Casts	Absent	.	Absent
Yeast	Absent	.	Absent
Bacteria	Absent	.	Absent

Note

Pus Cells are significant only in midstream sample. Important for interpretation in female patient as local contamination may occur.

A urine analysis alone usually doesn't provide a definite diagnosis. Depending on the reason your doctor recommended this test, you might need follow-up for unusual results. Evaluation of the urine analysis results with other tests can help your provider determine next steps. Getting standard test results from a urine analysis doesn't guarantee that you're not ill. It might be too early to detect disease or your urine could be too diluted. Tell your doctor if you still have signs and symptoms.


Dr. A. LALCHANDANI
M.D. (Pathology)

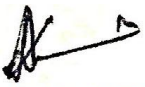


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Sample Type : URINE	Test Reported On : Mar 25, 2023, 05:57 p.m.

Test Description	Value	Unit	Biological Ref Interval
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END OF REPORT

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Dr. A. LALCHANDANI
M.D. (Pathology)



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Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : EDTA	Test Reported On : Mar 25, 2023, 05:11 p.m.

Test Description	Value	Unit	Biological Ref Interval
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Blood Group ABO & RH TYPING*

Mediwheel metro full body health check up below 40 Male

BLOOD GROUP ABO	B
RH Typing	Positive

END OF REPORT

Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 257043	Panel Company : MEDIWHEEL
Name of Patient : MR. YOGINDER DESWAL	Lab Request ID : 01230840065
Age/Gender : 40 years / Male	Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : FLUORIDE-F	Test Reported On : Mar 25, 2023, 03:45 p.m.

Test Description	Value	Unit	Biological Ref Interval
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BLOOD GLUCOSE FASTING

Mediwheel metro full body health check up below 40 Male

BLOOD GLUCOSE FASTING	111 ▲	mg/dl	70 - 99
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Method : Hexokinase

Comments

Fasting Blood Sugar: 70-99 mg/dl : Non Diabetic
100-125 mg/dl : Impaired Fasting Glucose
>125 mg/dl : Diabetic

END OF REPORT

Dr. A. LALCHANDANI
M.D. (Pathology)





MC-2471



Reg. ID : 257043	Panel Company : MEDIWHEEL
Name of Patient : MR. YOGINDER DESWAL	Lab Request ID : 230840065
Age/Gender : 40 years / Male	Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : URINE	Test Reported On : Mar 25, 2023, 05:11 p.m.

Test Description	Value	Unit	Biological Ref Interval
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URINE SUGAR (FASTING)*

Mediwheel metro full body health check up below 40 Male

Urine Sugar (Fasting)	Absent
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END OF REPORT

Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 257043	Panel Company : MEDIWHEEL
Name of Patient : MR. YOGINDER DESWAL	Lab Request ID : 00230840065
Age/Gender : 40 years / Male	Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : SERUM	Test Reported On : Mar 25, 2023, 04:32 p.m.

Test Description	Value	Unit	Biological Ref Interval
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Thyroid Function Test (T3,T4,TSH)

Mediwheel metro full body health check up below 40 Male

TOTAL T3	1.17	ng/mL	0.60 - 1.83
Method : CLIA			
TOTAL T4	9.15	ug/dl	5.48 - 14.28
Method : CLIA			
Thyroid Stimulating Hormone - TSH	2.19	uU/ml	0.35 - 5.50
Method : CLIA			

COMMENTS:-

A high TSH result often means an underactive thyroid gland caused by failure of the gland (Hypothrodism). Very rarely,a high TSH result can indicate a problem with the pituitary gland , such as a tumour , in what is known as secondary hyperthrodism . A high TSH value can also occur in people with underactive thyroid gland who have been receiving too little thyroid hormone medication.

A low TSH result can indicate an overactive thyroid gland (hyperthyroidism) or damage to the pituitary gland that prevents it from producing TSH . A low TSH result can also occur in people with an underactive thyroid gland who are receiving too much thyroid hormone medication .

END OF REPORT

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M.D. (Pathology)





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Age/Gender : 40 years / Male	Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : EDTA	Test Reported On : Mar 25, 2023, 04:08 p.m.

Test Description	Value	Unit	Biological Ref Interval
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GLYCOSYLATED HAEMOGLOBIN HbA1c*

Mediwheel metro full body health check up below 40 Male			
HBA1C*	5.4	%	4.00 - 5.70
Method : HPLC - Ion Exchange			
MEAN BLOOD GLUCOSE LEVEL Mean Blood	108	mg/dL	68 - 117
Glucose Level over past 60 days period			

INTERPRETATION

According to recommendations of the American Diabetes Association (ADA)

Group	HbA1c in %
Non-Diabetic adults 18 year	4.5 - 5.6
At risk of developing diabetes	> 5.7 to < 6.4
Diagnosing of Diabetes mellitus	>= 6.5

Comments

- Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have q high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.
- Diabetes patients with HbA1c levels below 7%(DCCT/NGSP) meet the goal of the ADA.
- HbA1c levels below the established reference interval may indicate recent episodes of hypoglycemia, the presence of Hb variants or shortened lifetime of erythrocytes.
- 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.

FACTORS THAT INTERFERE WITH HbA1C Measurement- Hemoglobin variants,elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the with renal failure) can affect the accuracy of HbA1c measurements.

FACTORS THAT AFFECT INTERPRETATION OF HBA1C RESULTS - Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g.,recovery from acute blood loss, hemolytic anemia, HbSS, HbCC, and HbSC) will falsely lower HbA1c test results regardless of the assay method used. Iron deficiency anemia is associated with higher HbA1c

END OF REPORT



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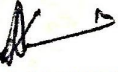
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Sample Type	: EDTA	Test Reported On	: Mar 25, 2023, 04:08 p.m.

Test Description	Value	Unit	Biological Ref Interval
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Dr. A. LALCHANDANI
M.D. (Pathology)





MC-2471

Reg. ID : 257043	Panel Company : MEDIWHEEL
Name of Patient : MR. YOGINDER DESWAL	Lab Request ID : 00230840065
Age/Gender : 40 years / Male	Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : SERUM	Test Reported On : Mar 25, 2023, 03:19 p.m.

Test Description	Value	Unit	Biological Ref Interval
<u>Lipid-Profile*</u>			
Mediwheel metro full body health check up below 40 Male			
CHOLESTROL TOTAL	258 ▲	mg/dL	Desirable : < 200 Borderline: 200 - 239 High : > 240
Method : CHOD-POD			
T.G	89	mg/dL	Desirable < 150 Borderline High 150 - 199 High 200 - 499 Very High > 500
Method : ENZYMATYIC (E.P)			
HDL	58	mg/dL	Male : 30 - 70 Female : 30 - 85
Method : DCM			
V L D L	17.8	mg/dl	07 - 35
Method : Calculated			
LDL CHOLESTEROL	182.2 ▲	mg/dl	Desirable :- < 100 Border line: 130 - 159 High Risk : 160 - 189 Very High : > 190
Method : Calculated			
LDL / HDL CHOLESTEROL Ratio	3.14		2.5 - 3.5 High : > 3.5
Method : Calculated			
TOTAL / HDL CHOLESTEROL Ratio	4.45 ▲		Moderate Risk : 3.5 - 5.0 High Risk : > 5.0
Method : Calculated			

Note

A Lipid Profile test panel measures the level of lipids, or fats, in your blood which essentially measures the following

- High-density lipoprotein (HDL) cholesterol** - referred to as “good” cholesterol because it helps remove LDL "bad" cholesterol from your blood.
- Low-density lipoprotein (LDL) cholesterol** - referred to as “bad” cholesterol. Too much of it can cause cholesterol to build up on the walls of your arteries. This raises your risk of [heart attack](#), [stroke](#), and [atherosclerosis](#).
- Triglycerides** - When you eat, your body breaks down fats in your food into smaller molecules called [triglycerides](#). High levels of triglycerides in your blood increase your risk of developing cardiovascular disease. Having obesity or unmanaged diabetes, drinking too much alcohol, and eating a high calorie diet can all contribute to high triglyceride levels.






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Sample Type : SERUM	Test Reported On : Mar 25, 2023, 03:19 p.m.

Test Description	Value	Unit	Biological Ref Interval
4. Very low-density lipoprotein (VLDL). Your blood also contains another type of cholesterol linked to an increased risk of cardiovascular disease called VLDL . Your VLDL levels are not used to determine treatment for elevated cholesterol.			
5. Total cholesterol. This is the total amount of cholesterol in your blood. It's the sum of your LDL, HDL, and VLDL cholesterol. If your cholesterol numbers are outside of the normal range, you may be at a higher risk of heart disease, stroke, and atherosclerosis. Your doctor will consider other factors, such as your family history, weight, and exercise levels, to determine your risk.			

If your test results are abnormal, your doctor may order a [blood glucose test](#) to check for diabetes. They might also order a [thyroid function test](#) to determine if your thyroid is underactive.

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)






Reg. ID : 257043
Name of Patient : MR. YOGINDER DESWAL
Age/Gender : 40 years / Male
Refd by Dr. : MEDIWHEEL
Sample Type : SERUM
Panel Company : MEDIWHEEL
Lab Request ID : 00230840065
Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Test Reported On : Mar 25, 2023, 03:26 p.m.

Test Description	Value	Unit	Biological Ref Interval
Liver Function Test (LFT)*			
Mediwheel metro full body health check up below 40 Male			
BILIRUBIN TOTAL	0.7	mg/dL	0.3 - 1.2
Method : DIAZO			
BIL DIRECT	0.1	mg/dL	< 0.2
Method : DIAZO			
BIL INDIRECT	0.6		0.4-1.1
Method : CALCULATED			
AST/SGOT	31	μ/L	< 50
Method : UV WITHOUT P5P			
ALT/SGPT	22	μ/L	< 50
Method : UV WITHOUT P5P			
ALKALINE PHOSPHATE	67	IU/L	30-120
Method : PNPP, AMP BUFFER			
TOTAL PROTEIN	8.1	g/dL	6.6 - 8.3
Method : BIURET			
ALBUMIN	4.8	g/DL	3.5 - 5.2
Method : BCG			
GLOBULIN	3.3	g/dl	2.0-3.5
Method : Calculated			
A/G RATIO	1.45		0.9-2.5
Method : Calculated			
GGT	10	μ/L	< 55
Method : Glutamyl carboxy nitroanilide Glycylglycine			

END OF REPORT

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Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID : 257043	Panel Company : MEDIWHEEL
Name of Patient : MR. YOGINDER DESWAL	Lab Request ID : 00230840065
Age/Gender : 40 years / Male	Sample Collection Date : Mar 25, 2023, 11:59 a.m.
Refd by Dr. : MEDIWHEEL	Sample Acknowledgment Date : Mar 25, 2023, 11:59 a.m.
Sample Type : SERUM	Test Reported On : Mar 25, 2023, 03:19 p.m.


Test Description	Value	Unit	Biological Ref Interval
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Kidney Function Test (KFT)*

Mediwheel metro full body health check up below 40 Male

Urea	19	mg/DL	17 - 43
Method : UREASE-UV			
Creatinine	0.81	mg/DL	0.67 - 1.17
Method : ALKALINE PICRATE KINETIC			
URIC ACID	4.9	mg/DL	3.5 - 7.2
Method : URICASE CALORIMETRIC			
Blood Urea Nitrogen (Bun)	8.88	mg/dl	6-20
Method : Calculated			
SODIUM	139	mEq/l	136 - 146
Method : ISE INDIRECT			
POTASIUM	5.2 ▲	mEq/l	3.5 - 5.1
Method : ISE INDIRECT			
CHLORIDE	102	mEq/l	101 - 109
Method : ISE INDIRECT			
CALCIUM	10.5	mg/dL	8.82-10.6
Method : Aresnazo III			
INORGANIC PHOSPHORUS	3.3	mg/dL	2.5-4.5
Method : Phosphomolybdate reduction			
Comments	-		

END OF REPORT


Dr. A. LALCHANDANI
M.D. (Pathology)





Reg. ID	: 257043	Panel Company	: MEDIWHEEL
Name of Patient	: MR. YOGINDER DESWAL	Lab Request ID	: R230840065
Age/Gender	: 40 years / Male	Sample Collection Date	: Mar 25, 2023, 11:59 a.m.
Refd by Dr.	: MEDIWHEEL	Sample Acknowledgment Date	: Mar 25, 2023, 11:59 a.m.
Sample Type	: RADIO	Test Reported On	: Mar 27, 2023, 11:54 a.m.

X-ray Chest P.A*

Mediwheel metro full body health check up below 40 Male

OBSERVATIONS:

- Trachea is central.
- Both hila are normal.
- Both the lung fields are clear. No focal lesion seen.
- Both domes of diaphragm and CP angles are normal.
- Heart and mediastinal silhouette is normal.

IMPRESSION: Normal Study.

Please correlate clinically.

END OF REPORT

Dr. Rounak Rajendra Bagga
MD Radiologist





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Sample Type	: RADIO	Test Reported On	: Mar 27, 2023, 03:41 p.m.

Male Ultrasound Whole Abdomen*

Mediwheel metro full body health check up below 40 Male

Liver measures 14.3 cm in the craniocaudal axis , outline smooth with homogenous **echotexture but reflective suggestive of fatty change grade I**. No obvious focal parenchymal lesion seen no extra or intra hepatic biliary dilatation is noted . Hepatic veins drain normally in to IVC . Portal vein is normal and in course and caliber.

Gall bladder is distended. No intra luminal calculus is seen. Gall bladder wall is normal in thickness Common bile duct is normal in caliber and lumen is clear.

Pancreas is normal in size & outline Echotexture is homogenous. No evidence of any focal lesion or calcification is seen. Pancreatic duct is not dilated.

Spleen measures 10.1 cm normal in outline and echotexture. No focal lesion calcification is seen.

Right **kidney** measures 104 X 39 mm , corticomedullary differentiation is maintained. cortical echotexture is homogenous No mass lesion, calculus or hydronephrosis is seen .

Left **kidney** measures 117 X 46 mm , corticomedullary differentiation is maintained. cortical echotexture is homogenous No mass lesion, or hydronephrosis is seen .A concretion measuring 2.3 mm is seen at the mid pole.

Urinary bladder is distended. wall thickness is normal ,no calculus or mass seen. pre void volume is 98 cc and pos void residue is 6 cc.

Prostate is normal in size,shape and echotexture. No focal lesion is seen.

No significant gastric or small bowel lesion is seen.

No significant retroperitoneal lymph adenopathy . No peritoneal fluid seen.

Impression: Grade I fatty Liver





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Sample Type	: RADIO	Test Reported On	: Mar 27, 2023, 03:41 p.m.

Please correlate clinically & with other investigations. This report is for diagnostic use only and is not valid for medicolegal purposes. We are open for reconsideration of the report if required/suggested by treating doctor.

END OF REPORT

Dr. Rounak Rajendra Bagga
MD Radiologist





MC-2471

Reg. ID : 257043	Panel Company : MEDIWHEEL
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Sample Type : SERUM	Test Reported On : Mar 25, 2023, 04:35 p.m.

Test Description	Value	Unit	Biological Ref Interval
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TOTAL PSA*

Mediwheel metro full body health check up below 40 Male

TOTAL PSA	0.79	ng/ml	< 4
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Method : ENHANCED CHEMILUMINESCENCE

SUMMARY

PSA is localized in the cytoplasm of prostatic ductal epithelium and in secretions of the ductal lumina. Because PSA is a secretory protein of the prostate,it can be recovered and purified both from prostatic tissue and from seminal plasma. PSA has been found to be primarily associated with prostate tissue, and elevated serum PSA has been found in patients with prostate cancer,benign prostatic hypertrophy, and inflammatory conditions.

Serum PSA alone is not suitable as a screen for prostate cancer because elevated PSA concentrations are also observed in patients with benign prostatic hypertrophy (BPH), nor is it recommended as a guide in disease staging. The combination of PSA measurement and rectal examination with ultrasonography in the event of abnormal findings may provide a better method of detecting prostate cancer than rectal examination alone.PSA determinations can be useful in detecting metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.

END OF REPORT

Dr. A. LALCHANDANI
M.D. (Pathology)



Name: Mr . YOGINDER DESWAL

Reff:

Age/Sex : 40Y/M

Date: 25/03/2023

Transthoracic Echo-Doppler Report**M-Mode/2-D Description:**

Left Ventricle: It Boderline LVH. There is no regional wall motion abnormality.
Global LVEF is 60%.

Left Atrium: It is normal size.

Right Atrium: It is normal size.

Right Ventricle: It is normal size. RV systolic function is normal.

Aortic Valve: Aortic cusps are normal.

Mitral Valve: It opens normally. Subvalvular apparatus appears normal.

Tricuspid valve: It appears normal.

Pulmonary Valve: It appears normal.

Main Pulmonary artery & its branches: Appear normal.

No intracardiac clot/mass/veg.

Pericardium: There is no pericardial effusion.

IAS & IVS: Intact.

2-D/ M-Mode Measurements (mm):

	Observed Values	Normal Values
Aortic root diameter	26.4	20-36 (mm/M ²)
Aortic Valve Opening		15-26
Left Atrium size	34.4	19-40

	End Diastole	End Systole	Normal Values
Left Ventricle Size	40	24	(ED= 37-56; ES=22-40)
Interventricular Septum	10.5	12	(ED= 6-12)
Posterior Wall Thickness	10	11	(ED= 5-10)

LV Ejection Fraction (%)	60%	55%-80%
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Pulmonary Valve (Cm / Sec.)		Aortic Valve (Cm / Sec.)	
Max Velocity	101	Max Velocity	112
Max PG	4.1	Mean Velocity	
Mean PG		Max PG	5.1
		Mean PG	
Mitral Valve (Cm / Sec.)	Mitral Valve (Cm / Sec.)	Tricuspid Valve (Cm / Sec.)	
E -53	Max Velocity	Max Velocity	
A -87	Mean Velocity	Mean Velocity	
DT -	Max PG	Max PG	20
PHT -	Mean PG	Mean PG	

**Doppler Velocities:
 Regurgitation**

Mr. YOGINDER DESWAL

	MR		TR
Severity	Nil	Severity	Trace
Max Velocity		Max Velocity	
Mean Velocity		Max Gradient	
	AR		PR
Severity	Nil	Severity	Nil
ED Velocity		PADP	
PHT		Mean PAP	

Final Interpretation

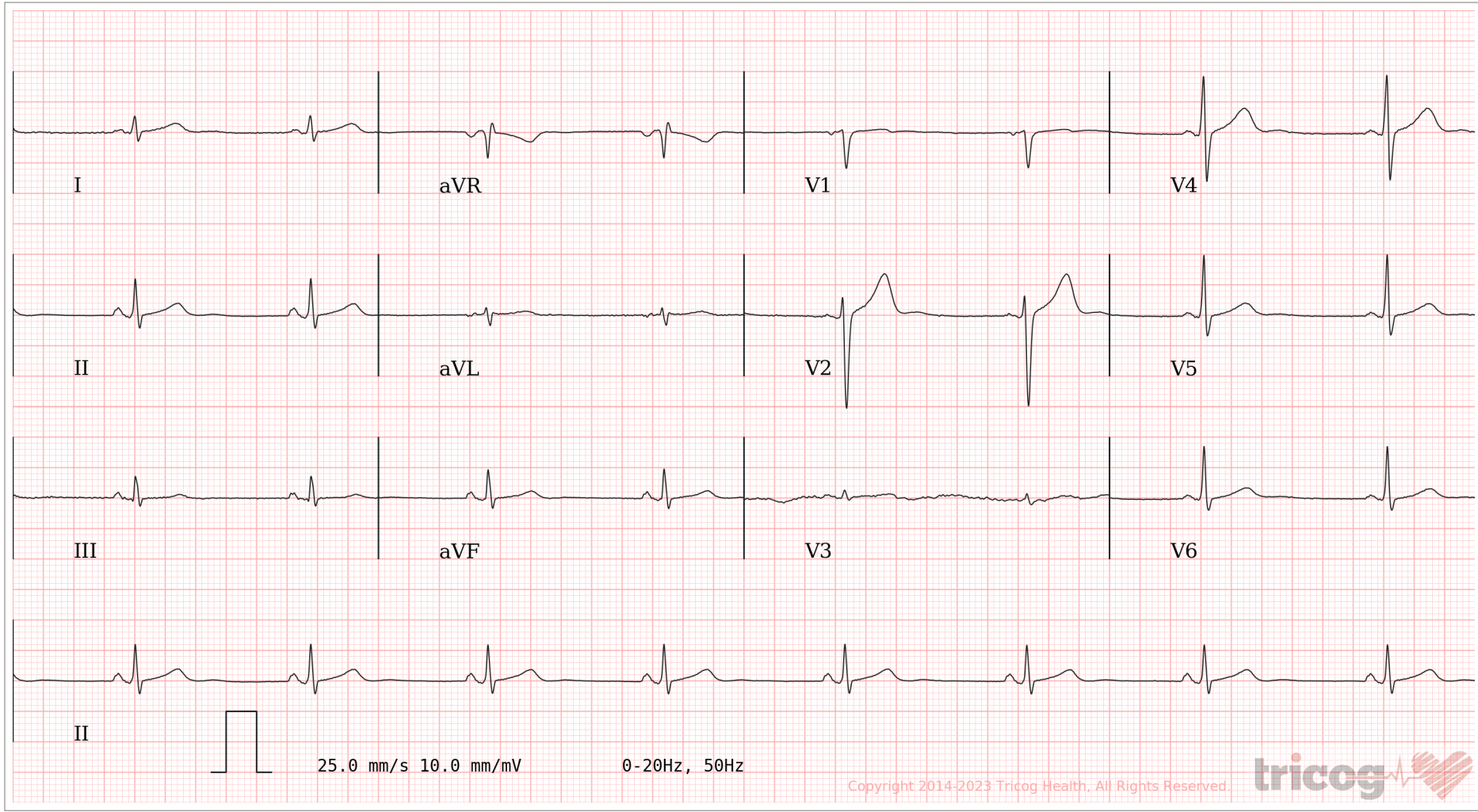
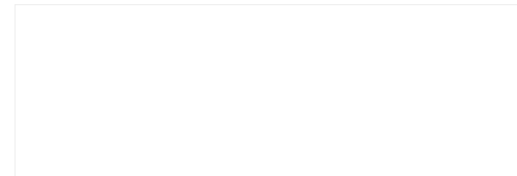
Study done at heart rate 78 BPM
 No regional wall motion abnormality. Global LVEF= 60%.
 Normal cardiac chambers dimensions
 Grade 1 diastolic dysfunction.
 Boderline LVH
 No MR.
 Trace TR (RVSP=20+ RAP).
 RV systolic function is normal.
 No intra cardiac clot/mass/veg./pericardial effusion.
 IVC normal with >50% respiratory variation

Dr. Saurabh Bagga



Age / Gender: 40/Male
Patient ID: 4567
Patient Name: Yoginder

Date and Time: 25th Mar 23 9:58 AM



AR: 51.0bpm VR: 51.0bpm QRSD: 86.0ms QT: 402.0ms QTc: 371.0ms PRI: 122.0ms P-R-T: 61.0° 70.0° 44.0°

Sinus Bradycardia. Please correlate clinically.

AUTHORIZED BY

Dr. Charit
MD, DM: Cardiology

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REPORTED BY

Dr. Rashmi N K

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