





Patient Name: Pulul Basjore UHID No: \_\_\_\_\_  
Age: 41y Date: 16-03-23 Gender: Female

pt has com for ENT Exam

Ex: (R) / (L)

Ins: (R)

ORAL: (R)

pt's ENT Exam is normal. at  
time of Exam

Next Appointment



Patient Name: Pritul Barfore UHID No:                       
Age: 4y Date: 16-03-23 Gender: Female

Avoid fatty foods and milk and milk products  
for few days.

Regular exercise atleast walking atleast for  
half an hour everyday.

Appointment

*Priya Saikia*

Clinic, Zoo Road

Enclave, Opp Nexa. RG Baruah Road  
Tiniali, Guwahati, Assam - 781003

For doctor's appointment

 **757 794 4444**

For home blood collection

 **757 884 4444**



Name: MRS. PUTUL BASFOR

Age: 41Y Sex: FEMALE

MR No: FGUZ0000006781

Date: 16 /03/2023


ECG

**RESULTS**

1. The rhythm is sinus
2. Heart rate is 71P beats per minute.
3. Normal P, QRS, T wave axis.
4. Normal PR, QRS, QT duration.
5. No pathological Q wave or ST - T changes seen.

**IMPRESSION**

Normal sinus rhythm.

  
DR. *ABIN NESSA.*  
MBBS, PGDCC



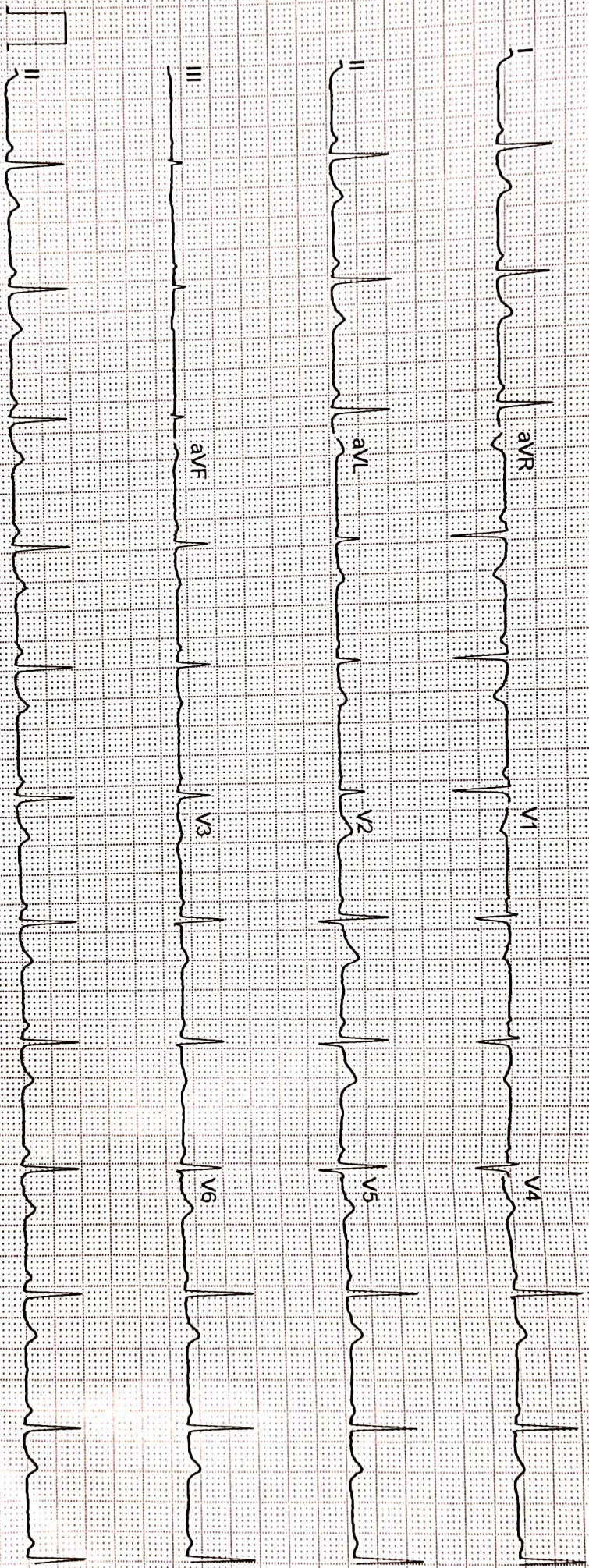
Female

16.03.2023 10:27:14  
APOLLO CLINIC  
200 ROAD  
GUWAHATI

71 bpm  
--/-- mmHg

QRS 70 ms  
QT / QTcBaz 382 / 415 ms  
PR 132 ms  
P 100 ms  
RR/PP 848 / 845 ms  
P / QRS / T 42 / 38 / 26 degrees

Normal sinus rhythm  
Normal ECG





Patient Name: MRS. PUTUL BASFOR

MR No.: FGUZ0000006781

Age/Gender: 41 Y/FEMALE

Referred By: SELF

Date: 16/03/2023

**ECHOCARDIOGRAPHY 2D**

**TRANSTHORACIC ECHOCARDIOGRAPHY REPORT:**

ECHO WINDOW:GOOD

**MEASUREMENT (by M-Model)**

Aorta : 21 mm  
 LAes : 26 mm  
 IVS (ed) : 10 mm  
 IVS (es) : 11 mm  
 LVID (ed) : 34 mm  
 LVID (es) : 22 mm  
 LVPW (ed) : 10 mm  
 LVPW (es) : 13 mm  
 LVEF : 66 %  
 FS : 33 %

**: REFERENCE LIMITS**

(12 - 22 mm/m<sup>2</sup>)  
 (12 - 23 mm/m<sup>2</sup>)  
 (6 - 10 mm)  
 (07 - 12 mm)  
 (19 - 32 mm/m<sup>2</sup>)  
 (16 - 19 mm/m<sup>2</sup>)  
 (07 - 10 mm)  
 (07 - 12 mm)  
 (≥ 55 %)  
 (28 - 44 %)

**MITRAL VALVE**

Anterior Mitral Leaflet : NORMAL  
 Posterior Mitral Leaflet : NORMAL  
 Subvalvular Apparatus : Normal  
 E>A ; E = 0.6m/ Sec ; A = 0.5m/ sec  
 E/E' = 8.40  
 Mitral Regurgitation : ABSENT  
 Mitral Aortic continuity : Present

**AORTIC VALVE**

No of Cusp : Three  
 Morphology : NORMAL  
 Aortic Regurgitation : ABSENT  
 Peak Velocity : 0.7m/ Sec

**TRICUSPID VALVE**

Morphology of Leaflets : Normal  
 Tricuspid Regurgitation : Absent (no PAH)

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(CIN: U85100AS2015PTC01206)  
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 For Doctor's Appointment: +91 75779 44444

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 Chitran Enclave, Opp Nexa. RG Baruah Road  
 Zoo Road Tiniali, Guwahati, Assam - 781003



PULMONARY VALVE

Morphology : Normal  
Peak Velocity : 0.9m/ Sec  
Pulmonary Regurgitation : Absent


IAS : Intact  
PATENT FORAMEN OVALE : Absent  
IVS : Intact  
PERICARDIUM : Normal; No effusion/ thickening/ Calcification seen

COMMENTS:

Situs solitus, Levocardia  
Structurally normal valves  
Normal chamber dimension  
No Resting regional wall motion abnormality  
Normal LV systolic function  
No clot or vegetation

IMPRESSION:

GOOD LV SYSTOLIC FUNCTION  
GRADE II DIASTOLIC DYSFUNCTION

  
DR. J. NESSA, MBBS, PGDCC  
Consultant Clinical Cardiologist

Patient Name : Mrs. Putul Basfore  
Age/Sex : 41 Y/F  
Pres Doctor :  
Ref.by : SELF

MR No : FGUZ.0000006781  
Visit No : FGUZOPV9404  
Bill Date : 16-03-2023 11:31  
Report Date : 16-03-2023 12:49

**ULTRASOUND WHOLE ABDOMEN (FEMALE)**

**Liver:** Right and left lobe of the liver are well seen and show homogenous **increase** in echotexture. Intrahepatic portal and hepatic venous systems are normal. No intrahepatic mass lesion is seen. Biliary radicles are not dilated.

**Gall Bladder:** Gall bladder is moderately distended with normal wall thickening. No intraluminal echoreflexive calculus is seen. No pericholecystic fluid is seen. GB / Liver demarcation is intact.

**Common Bile Duct:** Common Bile Duct measures 4 mm in diameter and appears normal. No intraluminal calculus or mass lesion is seen.

**Pancreas:** Pancreas is seen in its entirety and shows normal echotexture. MPD is not dilated. No calcification or mass lesion is seen. No peripancreatic collection seen.

**Spleen:** Spleen is normal in size and echotexture. No focal lesion or calcification is seen.

**Kidneys:** Both the kidneys are normal in size, shape, contour, position and echotexture.

Cortico-medullary differentiation is intact. No focal lesion or hydronephrosis is seen. No echoreflexive calculus is noted

Right and left kidneys measure 105 mm and 102 mm in length. Ureters are not dilated.

**Urinary Bladder:** Urinary bladder optimally distended. No significant wall thickening is noted. No calculus or demonstrable intrinsic pathology is noted.

**Uterus:** Anteverted uterus is normal in size & myometrial echotexture. No focal mass lesion is seen in myometrium. Endometrial thickness is within normal (6 mm) limit. No endometrial pathology is seen. Cervix is normal.

Uterus measures 63 x 34 x 42 mm.

**Adnexa:** Both the ovaries show normal in size & echo-morphology. No abnormal solid or cystic lesion seen. No adnexal mass is seen. Right ovary measures 28 x 17 mm. Left ovary measures 23 x 15 mm. No ascites or adenopathy is seen. No POD fluid is seen.

**IMPRESSION: GRADE I FATTY INFILTRATION OF LIVER**

Technician



**Dr. S. Sharma**  
MBBS(AMCH), Diploma in Radiology (FAAMCH)  
RADIOLOGIST

Page 1 of 1

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Zoo Road Tiniali, Guwahati, Assam - 781003





# Department of Dietetics DIABETIC DIET CHART

Name: Putul Basfor Sex: F  
 Age: \_\_\_\_\_ Height: \_\_\_\_\_ cms. / Weight: \_\_\_\_\_ kg.  
 Referred by Dr. \_\_\_\_\_  
 Diet Advised: \_\_\_\_\_

TIME	QUANTITY
------	----------

### EARLY MORNING

- Fenugreek Seeds/Chia Seeds + Water 1 Glass
- OR
- Lemon + Lukewarm water 1 Glass
- OR
- Lukewarm Water 1 Glass
- After ½ Hour
- Red Tea (No Sugar/ jaggery) + 1 Cup
- Roasted Chana/Soaked Almond/ Muri (Handful)/  
Sugar free Biscuits (Digestive Biscuits) (2 Nos)

1  
er  
sic  
nr  
ar  
M  
DG  
Pag



Patient Name : Mrs. Putul Basfore  
UHID/MR No. : FGUZ.0000006781  
Visit Date : 16-03-2023 11:30  
Sample Collected on : 16-03-2023 11:33  
Ref Doctor : SELF  
Emp/Auth/TPA ID : 405882639032  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 41Y/Female  
OP Visit No : FGUZOPV9404  
Reported on : 16-03-2023 12:58  
Specimen : Blood  
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

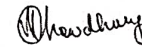
PERIPHERAL SMEAR

Smear reveals anisocytosis of the red cells.  
No other remarkable morphological abnormalities seen in the red cell series.  
No haematoparasites detected.  
Cells of the WBC series are within normal limits.  
No immature cells seen.  
Platelets are adequate and normal in morphology.

End of the report

*Results are to be correlated clinically*

Lab Technician / Technologist  
Salehah\_Hussain



Dr. Madhurima Chowdhury Talukdar  
MD  
Pathologist

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<b>Patient Name</b> : Mrs. Putul Basfore	<b>Age / Gender</b> : 41Y/Female
<b>UHID/MR No.</b> : FGUZ.000006781	<b>OP Visit No</b> : FGUZOPV9404
<b>Visit Date</b> : 16-03-2023 11:30	<b>Reported on</b> : 16-03-2023 12:52
<b>Sample Collected on</b> : 16-03-2023 11:33	<b>Specimen</b> : Serum(Spl)
<b>Ref Doctor</b> : SELF	<b>Pres Doctor:</b> :
<b>Emp/Auth/TPA ID</b> : 405882639032	
<b>Sponsor Name</b> : ARCOFEMI HEALTHCARE LIMITED	

**DEPARTMENT OF LABORATORY MEDICINE**

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
<b>THYROID PROFILE - I(T3,T4 AND TSH)</b>			
TOTAL T3: TRI IODOTHYRONINE - SERUM, Method: CLIA	0.89	0.61 - 1.81	ng/mL
TOTAL T4: THYROXINE - SERUM, Method: CLIA	11.4	3.2 - 12.6	µg/dl
TSH: THYROID STIMULATING HORMONE - SERUM, Method: CLIA	4.43	0.35 - 5.50	µIU/mL
<b>GLUCOSE - ( FASTING )</b>			
GLUCOSE - ( FASTING ). Method: Hexokinase	106	70 - 110	mg/dl

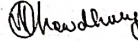
**INTERPRETATION:**

1. Triiodothyronine (T3) is a hormone produced by thyroidal secretion (20%) and from the peripheral deiodination mechanism which converts T4 to T3 (80%). As T3 is physiologically much more active than T4, it plays an important part in maintaining euthyroidism (1,2)
2. T3 determination much be associated with other tests such as TSH and T4 assay.
3. T4 (Thyroxine) is a hormone secreted by the thyroid gland. It is predominantly bound to carrier proteins (99.9%). The fraction that remains free is considered as the active part of the hormone. (1)
4. T4 titre must also be associated with the other titers of the thyroid assessment, such as TSH and T3, as well as with the clinical examination of the patient.
5. Thyrotropin or thyroid-stimulating hormone (TSH) is a glycoprotein with a molecular weight of 28,000 to 30,000 daltons.
6. In cases of hyperthyroidism, TSH level is severely inhibited and may even be undetectable.
7. In cases of primary hypothyroidism, TSH levels are always much higher than normal and thyroid hormone levels are low.
8. It is recommended that above test results should be correlated with clinical findings to arrive at the final diagnosis.

**End of the report**

*Results are to be correlated clinically*

Lab Technician / Technologist  
Salehah\_Hussain



Dr. Madhurima Chowdhury Talukdar  
MD  
Pathologist

**Licensee: Bimal Health Services Pvt. Ltd.**

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Patient Name : Mrs. Putul Basfore  
UHID/MR No. : FGUZ.000006781  
Visit Date : 16-03-2023 11:30  
Sample Collected on : 16-03-2023 11:33  
Ref Doctor : SELF  
Emp/Auth/TPA ID : 405882639032  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 41Y/Female  
OP Visit No : FGUZOPV9404  
Reported on : 16-03-2023 12:54  
Specimen : Serum  
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS	REMARKS
<b>KFT - RENAL PROFILE-SERUM</b>				
<b>RENAL PROFILE</b>				
S.Urea Method: urease-GLDH	27	10 - 50	mg/dl	
S. Creatinine Method: Jaffe	0.6	0.55 - 1.05	mg/dl	
S.Uric Acid Method: URICASE -PAP	4.1	2.6 - 6.0	mg/dl	
<b>BUN</b> Method: Calculated	12.62	4.67 - 23	mg/dl	
S.Sodium(Na) Method: ISE	138	135 - 145	mEq/l	
S.Potassium(K) Method: ISE	4.3	3.5 - 5.0	mEq/l	
S.Chloride(Cl) Method: ISE	105	98 - 106	mEq/l	
S.Calcium Method: OCPC	8.6*	8.8 - 10.6	mg/dl	
S.Phosphorus Method: PHOSPHOMOLYBDATE UV	3.5	2.5 - 5.0	mg/dl	
S.Total Protein Method: Biuret	7.8	6.6 - 8.3	g/dl	
S.Albumin Method: BCP	3.9	3.5 - 5	g/dl	
S.Globulin Method: Calculated	3.9	2.7 - 4.5	g/dl	
<b>COMPLETE BLOOD COUNT</b>				
Hb (Haemoglobin) Method: Non Cyanide,SIs Based	10.8*	11 - 15	gm/dl	
Total WBC Count Method: Electrical Impedence	10400	4000 - 11000	/Cumm	
RBC Count Method: Electrical Impedence	4.4	3.8 - 4.8	Million/Cumm	
ESR Method: Westergren	40*	0 - 20	mm/1st hr	
PCV/Haematocrit Method: Electrical Impedence	34.2*	36 - 46	%	
Platelet Count Method: Electrical Impedence	3.0	1.5 - 4.5	Lakhs/Cumm	
MCV Method: Electrical Impedence	77*	80 - 100	fl	
MCH	24*	26 - 34	pg	

MCH : 24\*  
Method: Electrical Impedence  
Liconene Bimal Health Services Pvt. Ltd.  
(CIN: U85100AS2015PTC01206)  
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Patient Name : Mrs. Putul Basfore  
UHID/MR No. : FGUZ.0000006781  
Visit Date : 16-03-2023 11:30  
Sample Collected on : 16-03-2023 11:33  
Ref Doctor : SELF  
Emp/Auth/TPA ID : 405882639032  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

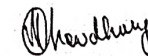
Age / Gender : 41Y/Female  
OP Visit No : FGUZOPV9404  
Reported on : 16-03-2023 12:54  
Specimen : Serum  
Pres Doctor: :

MCHC	31*	31.5 - 35	gm/dl
Method: Electrical Impedence			
Neutrophil	73	40 - 80	%
Lymphocyte	21	20 - 40	%
Monocyte	05	2 - 10	%
Eosinophil	01	1 - 6	%
<b>URINE ROUTINE &amp; MICROSCOPY</b>			
Volume	40		ml
Colour	Pale Yellow		
Specific Gravity	1.005		
Appearance	Clear		
pH Reaction	6.0		
<b>CHEMICAL EXAMINATION</b>			
Protein	Nil		
Sugar	Nil		Urine Fasting Sample
<b>MICROSCOPIC EXAMINATION</b>			
Pus Cells	1-2 / hpf		
Red Blood Cells	Not seen		
Epithelial Cells	3-4 / hpf		
Cast	Not seen		
Crystals	Not seen		

End of the report

Results are to be correlated clinically

Lab Technician / Technologist  
Salehah\_Hussain



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MD  
Pathologist

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UHID/MR No. : FGUZ.0000006781  
Visit Date : 16-03-2023 11:30  
Sample Collected on : 16-03-2023 11:33  
Ref Doctor : SELF  
Emp/Auth/TPA ID : 405882639032  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 41Y/Female  
OP Visit No : FGUZOPV8404  
Reported on : 16-03-2023 12:52  
Specimen : Serum  
Pres Doctor :

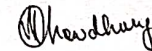
DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
<b>LIPID PROFILE TEST (PACKAGE)</b>			
S.Cholesterol	202*	< 200 Desirable 200-239 Borderline High ≥240 High	mg/dl
S.Triglyceride	169*	<150 Desirable 150-199 Borderline High 200-499 High >500 Very High	mg/dl
S.VLDL-Cholesterol	33.8	10 - 40	mg/dl
S.HDL-Cholesterol	40	<40 (Man) - Poor <50 (Women) - Poor 40-49 (Man) - Good 50-59 (Women) - Good ≥60 - Best	mg/dl
S.LDL-Cholesterol	124	<100 Ideal for people at risk of heart disease 100 - 129 Near Ideal 130 - 159 Borderline High 160 - 189 high ≥190 Very High	mg/dl
Ratio of Cholesterol/HDL Method: Calculated.	5.05*	0 - 4.5	

End of the report

Results are to be correlated clinically

Lab Technician / Technologist  
Salehah\_Hussain



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 Sample Collected on : 16-03-2023 11:33  
 Ref Doctor : SELF  
 Emp/Auth/TPA ID : 405882639032  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 41Y/Female  
 OP Visit No : FGUZOPV9404  
 Reported on : 16-03-2023 12:56  
 Specimen : EDTA Blood  
 Pres Doctor:

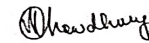
DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
BLOOD GROUP AND RH TYPE			
BLOOD GROUP AND RH TYPE Method: Slide Test	"O"		
RH TYPE	POSITIVE		

End of the report

Results are to be correlated clinically

Lab Technician / Technologist  
 Salehah\_Hussain



Dr. Madhurima Chowdhury Talukdar  
 MD  
 Pathologist





Patient Name : Mrs. Putul Basfore  
RID/MR No. : FGUZ.0000006781  
Visit Date : 16-03-2023 11:30  
Sample Collected on : 16-03-2023 11:33  
Ref Doctor : SELF  
Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS  
CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA -  
FY2324  
Emp/Auth/TPA ID : 405882639032  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 41 Yr Female  
OP Visit No : Z (FGUZOPV3404)  
Reported on : 16-03-2023 12:58  
Specimen : Urine  
Pres Doctor: :

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
URINE GLUCOSE(POST PRANDIAL)			
URINE GLUCOSE(POST PRANDIAL).	Absent		

End of the report

Results are to be correlated clinically

Lab Technician / Technologist  
Salehah\_Hussain

Dr. Madhurima Chowdhury Talukdar  
MD  
Pathologist

Patient Name : Mrs. Putul Basfore  
 UHID/MR No. : FGUZ.0000006781  
 Visit Date : 16-03-2023 11:30  
 Sample Collected on : 16-03-2023 12:05  
 Ref Doctor : SELF  
 Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS  
 CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA -  
 FY2324  
 Emp/Auth/TPA ID : 405882639032  
 Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender : 41 / Female  
 OP Visit No : Z FGUZOPV8404  
 Reported on : 16-03-2023 13:36  
 Specimen : Plasma(PP)  
 Pres Doctor: :

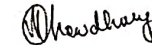
DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
GLUCOSE - ( POST PRANDIAL)			
GLUCOSE - ( POST PRANDIAL) Method: Hexokinase	169*	90 - 140	mg/dl

End of the report

Results are to be correlated clinically

Lab Technician / Technologist  
 Salehah\_Hussain



Dr. Madhurima Chowdhury Talukdar  
 MD  
 Pathologist



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UHID/MR No. : FGUZ.000006781  
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Package Name : ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS  
CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA -  
FY2324  
Emp/Auth/TPA ID : 405882639032  
Sponsor Name : ARCOFEMI HEALTHCARE LIMITED

Age / Gender :  
OP Visit No :  
Reported on : 16-03-2023 14:50  
Specimen : Whole Blood (Edta)  
Pres Doctor :  
ZFGUZOPV3404

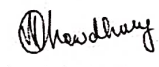
DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
GLYCOSYLATED HEMOGLOBIN (HBA1C)			
GLYCOSYLATED HEMOGLOBIN (HBA1C) - (WHOLE BLOOD)	6.4	Normal - <5.7% Prediabetes 5.7% - 6.4% Diabetes >=6.5% American Diabetes Association	%
Method: HPLC			

End of the report

Results are to be correlated clinically

Lab Technician / Technologist  
Naresh-Sarkar

  
Dr. Madhurima Chowdhury Talukdar  
MD  
Pathologist

Name : Mrs. Putul Basfore

Age: 41 Y

UHID:FGUZ.0000006781

Sex: F

\*FGUZ.0000006781\*

Address : Ulubari

OP Number:FGUZOPV9404

Plan : ARCOFEMI MEDIWHEEL FEMALE AHC  
CREDIT PAN INDIA OP AGREEMENT

Bill No :FGUZ-OCR-9248

Date :

Sno	SAC Code	Service Type/ServiceName	Department
1		ARCOFEMI - MEDIWHEEL - FULL BODY ANNUAL PLUS CHECK ADVANCED - FEMALE - 2D ECHO - PAN INDIA - FY2324	
✓1		GLUCOSE - ( FASTING )	
✓2		BLOOD GROUP AND RH TYPE	
✓3		GYNAEC CONSULTATION	
✓4		X-RAY CHEST PA	
✓5		URINE GLUCOSE(FASTING)	
✓6		GLYCOSYLATED HEMOGLOBIN (HBA1C)	
✓7		2D ECHO 5.20 Pm	
✓8		Height Weight BP BMI	
✓9		GLUCOSE - ( POST PRANDIAL)	
✓10		URINE GLUCOSE(POST PRANDIAL)	
✓11		ULTRASOUND WHOLE ABDOMEN	
✓12		LIVER FUNCTION TEST (PACKAGE)	
✓13		URINE ROUTINE EXAMINATION	
✓14		Diet Consultation	
15		Ophthal Consultation	
✓16		DENTAL Consultation	
✓17		FITNESS BY GENERAL PHYSICIAN	
✓18		PERIPHERAL SMEAR	
✓19		ECG	
X20		PAP SMEAR FOR LBC	
✓21		SONO MAMOGRAPHY	
✓22		THYROID PROFILE - I(T3,T4 AND TSH)	
✓23		ENT Consultation	
✓24		GGTP: GAMMA GLUTAMYL TRANSPEPTIDASE	
✓25		LIPID PROFILE TEST (PACKAGE)	
✓26		COMPLETE HAEMOGRAM	
✓27		KFT - RENAL PROFILE-SERUM	



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Patient Name : Mrs. Putul Basfore  
Age/Sex : 41 Y/F  
Pres Doctor :  
Ref.by : SELF

MR No : FGUZ.0000006781  
Visit No : FGUZOPV9404  
Bill Date : 16-03-2023 11:31  
Report Date : 16-03-2023 11:36

**CHEST (PA VIEW)**

Lung fields do not reveal any active parenchymal lesion.

Pleural angles are clear and domes of the diaphragm are of normal contour.


Cardio-thoracic ratio is within normal limits.

Hilar shadows are normal.

Bony thorax is intact.

Soft tissue shadows are normal.

Technician

  
Dr. RAHUL SINGHAL  
MD (KMC Manipal), FAGE  
Consultant Radiologist

PULMONARY VALVE

Morphology : Normal  
Peak Velocity : 0.9m/ Sec  
Pulmonary Regurgitation : Absent


IAS : Intact  
PATENT FORAMEN OVALE : Absent  
IVS : Intact  
PERICARDIUM : Normal; No effusion/ thickening/ Calcification seen

COMMENTS:

Situs solitus, Levocardia  
Structurally normal valves  
Normal chamber dimension  
No Resting regional wall motion abnormality  
Normal LV systolic function  
No clot or vegetation

IMPRESSION:

**GOOD LV SYSTOLIC FUNCTION  
GRADE II DIASTOLIC DYSFUNCTION**

  
**DR. J. NESSA, MBBS, PGDCC**  
Consultant Clinical Cardiologist