



24/07/2023

SIB Dr. Vinay :-



SARDAR PATEL HOSPITAL & HEART INSTITUTE

Name: Arvind Parthasar

Date: 24/7/23

Age: 34 Sex: M

9.

adv:-

Diabetic diet

Gas. febrile

1001 — (30)

9. P- 77mm
BP- 110/80-
SpO₂ - 98%

Cus SIB

Q. Ris. 400SL
Celce

Vinay



Chikuwadi, Opp. Railway Yard, Ankleshwar - 393 001 ☎ : 247882 / 247883

OPD INITIAL ASSESSMENT FORM

(To be filled by Nursing Staff)

Patient Name: - Surabhi Purshur UHID Number: - 033-9240

Consultant Name: - Dr. Vikas Patel Date: - 24/7/23 Start Time: - 5:5 Age: - 34 (Years)

Sex: - M (M/F)

Height: - 173 cms, Weight: - 74.3 kgs. Temp. —, Pulse: - — (Per minute), SPO2 —

B.P.: - 130/80 (mm of Hg), RBS: - — First Visit / Follow Up
Visit: First visit

Nursing Staff Name & Signature: - Kejilokh Patel End Time: - 6:10

Past History: - (TICK MARK)

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other:-

Family History:-

Psychosocial Assessment:-

Nutritional Screening:-

Immunization Status:-

To be filled by Clinician) Start Time:- _____

Clinical Findings:-

Diagnosis:-

Investigations and Advice:-



LABORATORY REPORT



Name : Mr. NARENDRA PARIHAR Sex/Age : Male / 39 Years Case ID : 30708000749
 Ref. By : MEDIWEEL FULL BODY CHECKUP BELOW 40 Dis. At : Pt. ID :
 Bill. Loc. : SPH OPD Pt. Loc :
 Reg Date and Time : 22-Jul-2023 10:39 Sample Type : Whole Blood EDTA Mobile No. :
 Sample Date and Time : 22-Jul-2023 10:39 Sample Coll. By : non Ref Id1 :
 Report Date and Time : 22-Jul-2023 11:51 Acc. Remarks : Ref Id2 :

| TEST | RESULTS | UNIT | BIOLOGICAL REF. INTERVAL | REMARKS |
|------|---------|------|--------------------------|---------|
|------|---------|------|--------------------------|---------|

HAEMOGRAM REPORT

HB AND INDICES

| | | | |
|----------------------------|---------|---------------|----------------|
| Haemoglobin (Colorimetric) | 15.9 | G% | 13.00 - 17.00 |
| RBC (Electrical Impedance) | 5.49 | millions/cumm | 4.50 - 5.50 |
| PCV(Calc) | H 50.51 | % | 40.00 - 50.00 |
| MCV (RBC histogram) | 92.0 | fL | 83.00 - 101.00 |
| MCH (Calc) | 28.9 | pg | 27.00 - 32.00 |
| MCHC (Calc) | L 31.4 | gm/dL | 31.50 - 34.50 |
| RDW (RBC histogram) | 13.30 | % | 11.00 - 16.00 |

TOTAL AND DIFFERENTIAL WBC COUNT

| | | UNIT | EXPECTED VALUES | [Abs] | EXPECTED VALUES |
|-----------------|--------|------|--------------------|-------|-----------------------|
| Total WBC Count | 9640 | /μL | 4000.00 - 10000.00 | 6266 | /μL 2000.00 - 7000.00 |
| Neutrophil | [%] 65 | % | 40.00 - 70.00 | 2506 | /μL 1000.00 - 3000.00 |
| Lymphocyte | 26 | % | 20.00 - 40.00 | 482 | /μL 200.00 - 500.00 |
| Eosinophil | 05 | % | 1.00 - 6.00 | 386 | /μL 0.00 - 100.00 |
| Monocytes | 04 | % | 2.00 - 10.00 | 0 | |
| Basophil | 0.0 | % | 0.00 - 2.00 | | |

PLATELET COUNT

| | | | |
|----------------|----------|-----|-----------------------|
| Platelet Count | H 459000 | /μL | 150000.00 - 410000.00 |
| MPV | 8.20 | fL | 6.5 - 12 |
| PDW | 15.7 | | 9 - 16 |

Method:
 TLC-SF cube technology(Flow Cytometry+ fluorescence).
 DC by microscopy.
 Platelet count by electrical impedance+/-SF cube technology

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Dr. Shweta Patel
 Consultant Pathologist

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LABORATORY REPORT



| | | |
|--|---------------------------------------|-----------------------|
| Name : Mr. NARENDRA PARIHAR | Sex/Age : Male / 39 Years | Case ID : 30708000749 |
| Ref. By : MEDIWHEEL FULL BODY CHECKUP BELOW 40 | Dis. At : | Pt. ID : |
| Bill. Loc. : SPH OPD | | Pt. Loc. : |
| Reg Date and Time : 22-Jul-2023 10:39 | Sample Type : Plasma Fluoride F,Serum | Mobile No. : |
| Sample Date and Time : 22-Jul-2023 10:39 | Sample Coll. By : non | Ref Id1 : |
| Report Date and Time : 22-Jul-2023 14:17 | Acc. Remarks : | Ref Id2 : |

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|---|----------|--------|----------------------|----------|
| Plasma Glucose - F <i>Photometric, Hexokinase</i> | H 125.85 | mg/dL | 70 - 100 | FUS: NIL |
| Calcium <i>Arsenazo III</i> | 10.2 | mg/dL | 8.4 - 10.2 | |
| Renal Function Test | | | | |
| Urea <i>Urease/GLDH</i> | 23.06 | mg/dL | 19.01 - 44.1 | |
| Creatinine <i>Jaffe compensated</i> | 1.03 | mg/dL | 0.70 - 1.30 | |
| Uric Acid <i>Uricase-Peroxidase method</i> | H 7.62 | mg/dL | 3.5 - 7.2 | |
| Sodium <i>ISE</i> | H 147.0 | mmol/L | 136 - 145 | |
| Potassium <i>ISE</i> | 4.55 | mmol/L | 3.5 - 5.1 | |
| Chloride <i>ISE</i> | 106.4 | mmol/L | 98 - 107 | |

Note: (LL-Very Low, L-Low, H-High, HH-Very High, A-Abnormal)

Shweta Patel
Dr. Shweta Patel
Consultant Pathologist

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LABORATORY REPORT



Name : Mr. NARENDRA PARIHAR Sex/Age : Male / 39 Years Case ID : 30708000749
 Ref. By : MEDIWEEL FULL BODY CHECKUP BELOW 40 Dis. At : Pt. ID :
 Bill. Loc. : SPH OPD Pt. Loc. :

Reg Date and Time : 22-Jul-2023 10:39 Sample Type : Serum Mobile No. :
 Sample Date and Time : 22-Jul-2023 10:39 Sample Coll. By : non Ref Id1 :
 Report Date and Time : 22-Jul-2023 14:18 Acc. Remarks : Ref Id2 :

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|------|---------|------|----------------------|---------|
|------|---------|------|----------------------|---------|

BIOCHEMICAL INVESTIGATIONS

Liver Function Test

| | | | | |
|---|--------|-------|-----------|--|
| S.G.P.T. <i>IFCC</i> | 61.49 | U/L | 0 - 63 | |
| S.G.O.T. <i>IFCC</i> | 22.31 | U/L | | |
| Alkaline Phosphatase <i>Modified IFCC method</i> | 96.85 | U/L | 40 - 150 | |
| Proteins (Total) <i>Biliver</i> | 7.41 | g/dL | 6.4 - 8.2 | |
| Albumin <i>Bromo Cresol Green</i> | H 5.25 | g/dL | 3.4 - 5.0 | |
| Globulin <i>Calculated</i> | 2.16 | gm/dL | 2 - 4.1 | |
| A/G Ratio <i>Calculated</i> | H 2.4 | | 1.0 - 2.1 | |
| Bilirubin Total <i>Diazotized Sulfanilic Acid Method</i> | 0.54 | mg/dL | 0.2 - 1.0 | |
| Bilirubin Conjugated <i>Diazotized Sulfanilic Acid Method</i> | 0.22 | mg/dL | | |
| Bilirubin Unconjugated <i>Calculated</i> | 0.32 | mg/dL | 0 - 0.8 | |

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Shweta Patel
 Consultant Pathologist
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LABORATORY REPORT



Name : Mr. NARENDRA PARIHAR Sex/Age : Male / 39 Years Case ID : 30708000749
 Ref. By : MEDIWEEL FULL BODY CHECKUP BELOW 40 Dis. At : Pt. ID :
 Bill. Loc. : SPH OPD Pt. Loc. :

Reg Date and Time : 22-Jul-2023 10:39 Sample Type : Serum Mobile No. :
 Sample Date and Time : 22-Jul-2023 10:39 Sample Coll. By : non Ref Id1 :
 Report Date and Time : 22-Jul-2023 14:17 Acc. Remarks : Ref Id2 :

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|------|---------|------|----------------------|---------|
|------|---------|------|----------------------|---------|

BIOCHEMICAL INVESTIGATIONS

Lipid Profile

| | | | | |
|---|--------|-------|-----------|--|
| Cholesterol <small>Colorimetric, CHOD-POD</small> | 155.73 | mg/dL | 110 - 200 | |
| HDL Cholesterol | L 38.8 | mg/dL | 40 - 60 | |
| Triglyceride <small>GPO-POD</small> | 114.16 | mg/dL | 40 - 200 | |
| VLDL <small>Calculated</small> | 22.83 | mg/dL | 10 - 40 | |
| Chol/HDL <small>Calculated</small> | 4.01 | | 0 - 4.1 | |
| LDL Cholesterol <small>Calculated</small> | 94.10 | mg/dL | 65 - 100 | |

NEW ATP III GUIDELINES (MAY 2001), MODIFICATION OF NCEP

| LDL CHOLESTEROL | CHOLESTEROL | HDL CHOLESTEROL | TRIGLYCERIDES |
|-----------------------|---------------------|-----------------|---------------------|
| Optimal <100 | Desirable <200 | Low <40 | Normal <150 |
| Near Optimal 100-129 | Border Line 200-239 | High >60 | Border High 150-199 |
| Somewhat High 130-159 | High >240 | | High 200-499 |
| High 160-199 | | | |

- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment
- For LDL Cholesterol level Please consider direct LDL value
- Risk assesment from HDL and Tnglycende has been revised. Also LDL goals have changed.
- Detail test interpreation available from the lab
- All tests are done according to NCEP guidelines and with FDA approved kits
- LDL Cholesterol level is primary goal for treatment and varies with risk category and assesment

Note: (L-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Shweta Patel
Dr. Shweta Patel
 Consultant Pathologist
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LABORATORY REPORT



Name : Mr. NARENDRA PARIHAR Sex/Age : Male , 39 Years Case ID : 30708000749
 Ref By : MEDIWEEL FULL BODY CHECKUP BELOW 40 Dis. At : Pt. ID :
 Bill. Loc. : SPH OPD Pt. Loc. :
 Reg Date and Time : 22-Jul-2023 10:39 Sample Type : Whole Blood EDTA Mobile No. :
 Sample Date and Time : 22-Jul-2023 10:39 Sample Coll. By : non Ref Id1 :
 Report Date and Time : 22-Jul-2023 14:18 Acc. Remarks : Ref Id2 :

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|------|---------|------|----------------------|---------|
|------|---------|------|----------------------|---------|

Glycated Haemoglobin Estimation

HbA1C
Immunoturbidimetric

H 6.4

% of total Hb <5.7: Normal
5.7-6.4: Prediabetes
>=6.5: Diabetes

Estimated Avg Glucose (3 Mths) **136.98** mg/dL
Calculated

Please Note change in reference range as per ADA 2021 guidelines.

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
 Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
 Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
 Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA.
 In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine.
 The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note (LL-Very Low, L-Low, H-High, HH-Very High ,A-Abnormal)

Dr. Shweta Patel
 Consultant Pathologist
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LABORATORY REPORT



| | | |
|---|---------------------------|-----------------------|
| Name : Mr. NARENDRA PARIHAR | Sex/Age : Male / 39 Years | Case ID : 30708000749 |
| Ref. By : MEDIWEEL FULL BODY CHECKUP BELOW 40 | Dis. At : | Pt. ID : |
| Bill. Loc. : SPH OPD | | Pt. Loc. : |
| Reg Date and Time : 22-Jul-2023 10:39 | Sample Type : Serum | Mobile No. : |
| Sample Date and Time : 22-Jul-2023 10:39 | Sample Coll. By : non | Ref Id1 : |
| Report Date and Time : 22-Jul-2023 17:44 | Acc. Remarks : | Ref Id2 : |

| TEST | RESULTS | UNIT | BIOLOGICAL REF RANGE | REMARKS |
|--|---------|--------|----------------------|---------|
| BIOCHEMICAL INVESTIGATIONS | | | | |
| Thyroid Function Test | | | | |
| Triiodothyronine (T3) <small>CLIA</small> | 1.52 | ng/mL | 0.69 - 2.15 | |
| Thyroxine (T4) <small>CLIA</small> | 75.6 | ng/mL | 52 - 127 | |
| TSH <small>CLIA</small> | 2.16 | µIU/mL | 0.3 - 4.5 | k |

INTERPRETATIONS

Useful for Monitoring patients on thyroid replacement therapy. Confirmation of thyroid-stimulating hormone (TSH) suppression in thyroid cancer patients on thyroxine therapy, for Prediction of thyrotropin-releasing hormone-stimulated TSH response, as An aid in the diagnosis of primary hyperthyroidism, for Differential diagnosis of hypothyroidism. The ability to quantitate circulating levels of thyroid-stimulating hormone (TSH) is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low or normal. Concentrations of 5.1 mIU/ml to 7.0 mIU/ml are considered borderline hypothyroid

CAUTIONS

Sick, hospitalized patients may have falsely low or transiently elevated thyroid stimulating hormone. Some patients who have been exposed to animal antigens, either in the environment or as part of treatment or imaging procedure, may have circulating antianimal antibodies present. These antibodies may interfere with the assay reagents to produce unreliable results.

| TSH ref range in Pregnancy | Reference range (microIU/ml) |
|----------------------------|------------------------------|
| First trimester | 0.24 - 2.00 |
| Second trimester | 0.43-2.2 |
| Third trimester | 0.6-2.5 |

----- End Of Report -----

For test performed on specimens received or collected from non-NSRL locations, it is presumed that the specimen belongs to the patient named or identified as labeled on the container/test request and such verification has been carried out at the point generation of the said specimen by the sender. NSRL will be responsible Only for the analytical part of test carried out. All other responsibility will be of referring Laboratory.

Note: (LL-VeryLow, L-Low, H-High, HH-VeryHigh, A-Abnormal)

Dr. Mohini Vadodariya

MBS DCP G-23091

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LABORATORY REPORT



Name : Mr. NARENDRA PARIHAR Sex/Age : Male / 39 Years Case ID : 30708000749
 Ref. By : MEDIWHEEL FULL BODY CHECKUP BELOW 40 Dis. At : Pt. ID :
 Bill. Loc. : SPH OPD Pt. Loc. :

Reg Date and Time : 22-Jul-2023 10:39 Sample Type : Spot Urine Mobile No. :
 Sample Date and Time : 22-Jul-2023 10:39 Sample Coll. By : non Ref Id1 :
 Report Date and Time : 22-Jul-2023 11:50 Acc. Remarks : Ref Id2 :

| Parameter | Unit | Expected value | Result/Notations | | | | |
|--------------|-------|----------------|------------------|----|-----|-----|------|
| | | | Trace | + | ++ | +++ | ++++ |
| pH | - | 4.6-8.0 | | | | | |
| SG | - | 1.003-1.035 | | | | | |
| Protein | mg/dL | Negative (<10) | 10 | 25 | 75 | 150 | 500 |
| Glucose | mg/dL | Negative (<30) | 30 | 50 | 100 | 300 | 1000 |
| Bilirubin | mg/dL | Negative (0.2) | 0.2 | 1 | 3 | 6 | - |
| Ketone | mg/dL | Negative (<5) | 5 | 15 | 50 | 150 | - |
| Urobilinogen | mg/dL | Negative (<1) | 1 | 4 | 8 | 12 | - |

| Parameter | Unit | Expected value | Result/Notifications | | | | |
|------------------------------|----------|----------------|----------------------|----|-----|-----|------|
| | | | Trace | + | ++ | +++ | ++++ |
| Leukocytes (Strip) | /micro L | Negative (<10) | 10 | 25 | 100 | 500 | - |
| Nitrite(Strip) | - | Negative | - | - | - | - | - |
| Erythrocytes(Strip) | /micro L | Negative (<5) | 10 | 25 | 50 | 150 | 250 |
| Pus cells (Microscopic) | /hpf | <5 | - | - | - | - | - |
| Red blood cells(Microscopic) | /hpf | <2 | - | - | - | - | - |
| Cast (Microscopic) | /lpf | <2 | - | - | - | - | - |

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh ,A-Abnormal)

Shweta Patel
 Dr. Shweta Patel
 Consultant Pathologist

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OPD INITIAL ASSESSMENT FORM

(To be filled by Nursing Staff)

Patient Name: - Nitendra Parmar UHID Number: - 9240

Consultant Name: - DR. Karpesh Date: 22/7/23 Start Time: - 12:20 Age: - 89 (Years)

Sex: - M (M/F) valvularly

Height: - 173 cms, Weight: 79.3 kgs. Temp. (N), Pulse: - 77 (Per minute), SPO2 98%

B.P.: - 120/80 (mm of Hg), RBS: - - First Visit / Follow Up

Visit: first visit (Perk)

Nursing Staff Name & Signature: - Sudhar. S. Joshi End Time: -

Past History: - (TICK MARK)

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism

Other: - - .NO

Family History: - -

Nutritional Screening: - -

Psychosocial Assessment: - -

Immunization Status: - -

(To be filled by Clinician) Start Time: -

Clinical Findings: -

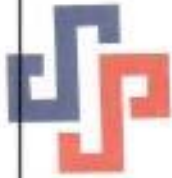
. complete history check up

(S8) PA - soft
normal
RFT

Diagnosis: -

Investigations and Advice: -

USG about heart



| | | | |
|------------------|------------------|---------|------------|
| Patient's Name:- | NARENDRA PARIHAR | Date :- | 22/07/2023 |
| Age & Sex :- | 39Y M | | |
| Referred By :- | HEALTH CHEAK-UP | | |

USG ABDOMEN & PELVIS

Liver is normal in size and shows increased echotexture. No focal solid/ cystic mass lesion detected in the liver. CBD and intrahepatic biliary radicles show no dilatation.

PV & CBD normal.

G.B. : well distended & normal. No stone or inflammation seen.

PANCREAS : reveals normal echotexture. No mass, calcification or pancreatitis.

SPLEEN : Normal size, 81 mm & reveals normal echotexture. No other focal mass seen.

BOTH KIDNEY : RK:114X46 mm. , LK :104X51 mm.

Both kidneys are normal size with normal cortical thickness.

No focal solid or cystic mass seen. No calculus. No hydronephrosis seen.

C.M differentiation is preserved. No parenchymal abnormality seen.

U. BLADDER : Well distended & normal.No mass or filling defect seen.

PROSTATE: Normal in size & echotexture.No mass or calcification seen.

BOWEL LOOPS : peristaltic bowel loops seen in lower abdomen. Bowel loops are normal calibre (Visualized).

No free fluid seen. No enlarged lymphnodes seen.

IMPRESSION:

fatty changes in liver (Grade I)

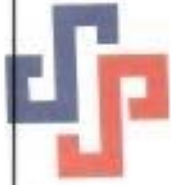
Suggest clinical correlation.

DR HANSA RATHWA

MD(Radio Diagnosis)

Thanks for reference. Please co-relate clinically.

Note: This report is not valid for medico-legal purpose. There can be typing error, which can be correctable.



| | | | |
|------------------|------------------|---------|------------|
| Patient's Name:- | NARENDRA PARIHAR | Date :- | 22/07/2023 |
| Age & Sex :- | 39Y M | | |
| Referred By :- | HEALTH CHEAK-UP | | |

X-RAY CHEST PA.

- Both Lung fields appear normal.
No evidence of any collapse / consolidation.
- Both Hila appear normal.
No evidence of any enlarged Hilar lymphnodes.
- Both CP angle clear.
- Cardiac size appear normal.
- Both hemi diaphragm appears normal
- Bony cage appear normal

COMMENTS :

- No Significant abnormality detected.

Dr. HANSA RATHWA
MD (Radio Diagnosis)

Thanks for reference. Please co-relate clinically.

Note: This report is not valid for medico-legal purpose. There can be typing error, which can be correctable.



Chikuwadi, Opp. Railway Yard, Ankleshwar - 393 001 ☎ : 247882 / 247883

OPD INITIAL ASSESSMENT FORM

(To be filled by Nursing Staff)

Patient Name: - Narendra Purohit UHID Number: - 9240

Consultant Name: - Dr. Shafer Shah Date: - 22/7/23 Start Time: - 10:26 Age: 39 (Years)

Sex: - M (M/F) Shah

Height: - 173 cms, Weight: - 79.8 kgs. Temp. 100, Pulse: - 76 (Per minute), SPO2 96%

B.P. :- 120/80 (mm of Hg), RBS:- 100 First Visit / Follow Up

Visit: First Visit

Nursing Staff Name & Signature:- Vasava Pinal End Time:- 12:15 PM

Past History: - (TICK MARK)

Diabetes, Hypertension, IHD, COPD, Asthma, TB, Smoker, Alcoholic, Hypothyroidism AR 0.25 / 0.75 X 60

Other:- ST 0.25 / 0.75 X 60 0.50 / 0.75 X 55

Family History:- 0.50 / 0.75 X 55 Nutritional Screening: UVA 6/12

Psychosocial Assessment:- Immunization Status:- 6/12

To be filled by Clinician) Start Time:- _____

Clinical Findings:-

BE ANONC
R WNU

Diagnosis:-

Investigations and Advice:-



Patient Name : Mr. Narendra Parihar
Registration No : 101-023-9240-000
Sex : Male
Patient Arrived At : 22-Jul-2023 09:00:00 AM
Test Name : ECHO STUDY
DOB : 22-Jul-1984
Age : 39 Yrs/
Result Verified At : 22-Jul-2023 11:22

2D ECHO CARDIOGRAPHY REPORT

- All cardiac chambers are normal in dimension
- Normal LV Systolic function at Rest, LVEF =60 %
- No RWMA at Rest.
- No diastolic dysfunction (E>A, MV E=0.10 m/s)
- MV – Normal, No MS/MR AV –Normal, No AS/ AR
- TV – Normal , No TS/ Trivial TR PV – No PS / PR
- No Pulmonary Hypertension, RVSP = 25 mmHg
- IAS / IVS appear Intact
- No e/o obvious Clot / Vegetation / effusion
- IVC not dilated collapsing > 50% on inspiration

IMPRESSION: NORMAL LV SYSTOLIC FUNCTION, NO RWMA, NO PAH


Dr. Milan Mehta
D.Card (Mumbai)
Non-Invasive cardiology

22-07-2023 11:08:20
SARDAR TEL HOSPITAL
CHIKLAW
ANKLISHWAR

Location:
Order #
Unit:
/set:
Indication:
Medication 1:
Medication 2:
Medication 3:

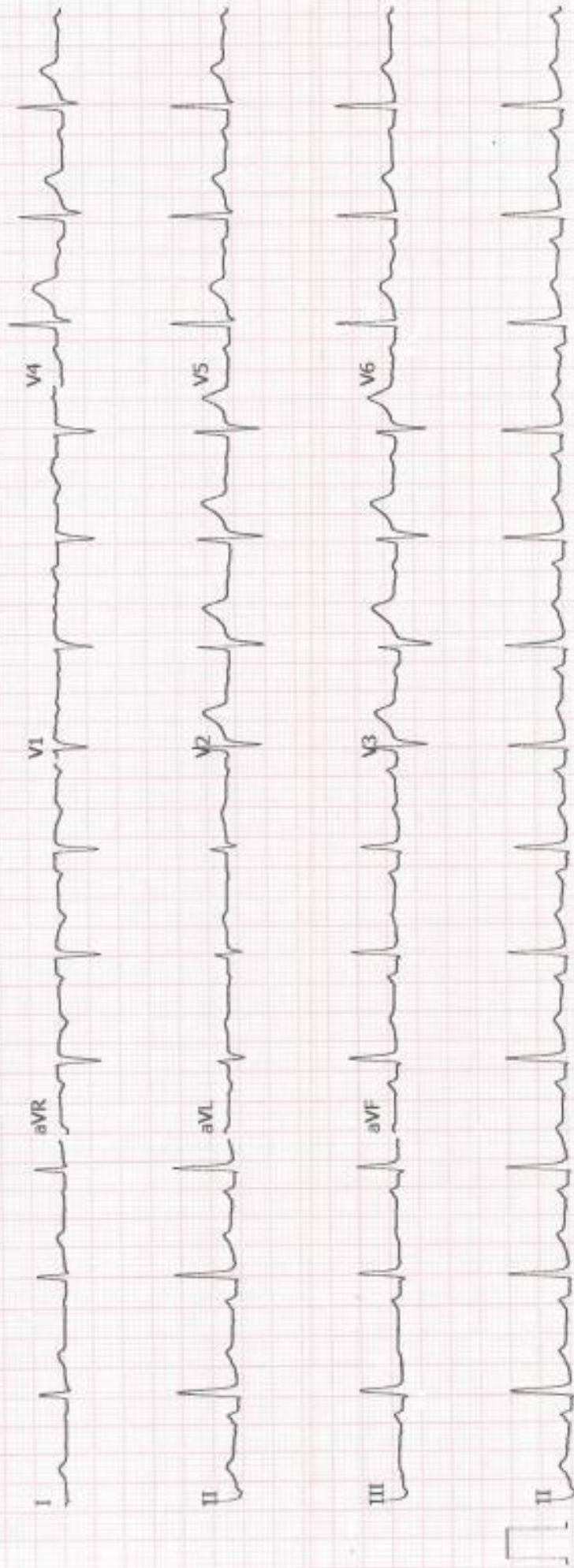
Room:

84 bpm
-- / -- mmHg

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:

QT / QTcBaz : 366 / 432 ms
PR : 184 ms
P : 92 ms
RR / PP : 714 / 714 ms
P / QRS / T : 80 / 64 / 40 degrees

Normal sinus rhythm
Normal ECG



Unconfirmed
4x2.5x3_25_R1

ADS 0.56-20 Hz 50 Hz

25 mm/s 10 mm/mV

125L™ v241

GE MAC2000 1.1

1/1