

**Health Check up Booking Confirmed Request(bobE19103),Package Code-
PKG10000250, Beneficiary Code-67758**

Mediwheel <customercare@policywheel.com>

Mon 11/07/2022 05:39 PM

To: VIJAY PAL <VIJAY.PAL4@bankofbaroda.com>

Cc: Mediwheel CC <customercare@mediwheel.in>;Mediwheel CC <mediwheelwellness@gmail.com>

****सावधान:** यह मेल बैंक डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें या अटैचमेंट ना खोलें.

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SENDER.

011-41195959

Email:wellness@mediwheel.in

Dear **MR. PAL VIJAY,**

Please find the confirmation for following request.

Booking Date : 01-11-2022

Package Name : Mediwheel Metro Full Body Health Checkup Male Above 40

**Name of
Diagnostic/Hospital** : Aakash Hospital

**Address of
Diagnostic/Hospital** : 90/43 Malviya Nagar New Delhi

Contact Details : 9717968885

City : Delhi

State : DELHI

Pincode : 110017

Appointment Date : 12-11-2022

**Confirmation
Status** : Confirmed

Preferred Time : 09:00:AM

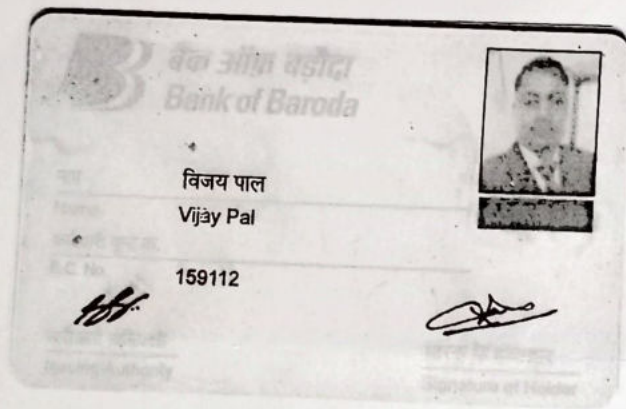
Comment : "Appointment Time 8:30 AM "

Instructions to undergo Health Check:

1. Please ensure you are on complete fasting for 10-To-12-Hours prior to check.
2. During fasting time do not take any kind of medication, alcohol, cigarettes, tobacco or any other liquids (except Water) in the morning.
3. Bring urine sample in a container if possible (containers are available at the Health Check centre).
4. Please bring all your medical prescriptions and previous health medical records with you.
5. Kindly inform the health check reception in case if you have a history of diabetes and cardiac problems.

For Women:

1. Pregnant Women or those suspecting are advised not to undergo any X-Ray test.
2. It is advisable not to undergo any Health Check during menstrual cycle.



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भारत सरकार
भारतीय जनसंघ



विजय पाल
Vijay Pal

पिता : भगवन दाम
Father : BHAGWAN DASS

जन्म वर्ष / Year of Birth : 1980

पुरुष / Male



7898 4770 8563




आधार – आम आदमी का अधिकार

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1847
help @ uidai.gov.in
www.uidai.gov.in
P.O. Box No 1847,
Bangalore-560 001

पता: श्री. १/१८, राजू पार्क, देली नगर,
देवाली रोड, खानपुर,
पुष्पा भवान S.O, South Delhi,
देली, 110062

पता: श्री. १/१८, राजू पार्क, देली नगर,
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पुष्पा भवान S.O, South Delhi,
देली, 110062

भारतीय जनसंघ
भारत सरकार



VIJAY PAL



at 10:00am

62



90/43, Malviya Nagar, New Delhi-110017
#+91-11-40501000 (100 Lines), 9871027922
info@aakashhospital.com, www.aakashhospital.com

NAME: MR VIJAY PAL

AGE: 42 YRS

SEX: MALE

REF.BY: MEDICAL

DATE: 12.11.2022

ULTRASOUND WHOLE ABDOMEN

LIVER: - Normal sized, with **homogeneously increased echotexture**. No focal lesion seen. Intra hepatic biliary system not dilated. Intra hepatic veins radicles are normal.

GALL BLADDER: - Normal distension. Walls are normal. No calculus or mass lesion seen. Extra hepatic biliary system is not dilated.

PANCREAS: - Normal size and echotexture. No focal lesion seen. Pancreatic duct not dilated.

SPLEEN: - Normal size and echotexture. No focal lesion seen. Spleno-portal axis is normal.

KIDNEYS: - Both kidneys normally identified in the respective renal fossae. They demonstrate normal size and cortical echotexture. Corticomedullary differentiation well made out with a normal renal parenchymal thickness. No evidence of calculus or hydronephrosis seen on both side.
Right kidney measures approx. 9.7 cm in the long axis.
Left kidney measures approx. 11.6 cm in the long axis.

URINARY BLADDER: - Moderately distended. No calculus or diverticulum is seen. Walls are normal. Both UV Junctions are normal.

SEMINAL VESICLES: - Shows normal sonographic appearances.

PROSTATE:- Is normal in size (Vol~14.6 cc). Echotexture is normal with no focal lesion. Outline is distinct with no contour bulge.

Retroperitoneum does not show any abnormally enlarged lymph nodes. No free peritoneal fluid or pleural effusion seen. Bowel loops are unremarkable. Both iliac fossae are normal.

IMPRESSION: Grade I fatty changes in liver.

Kindly correlate clinically.


DR.SALSABEEL.S
DMRD.DNB(RADIOLOGY)
DMC-35954

AREA OF EXPERTISE

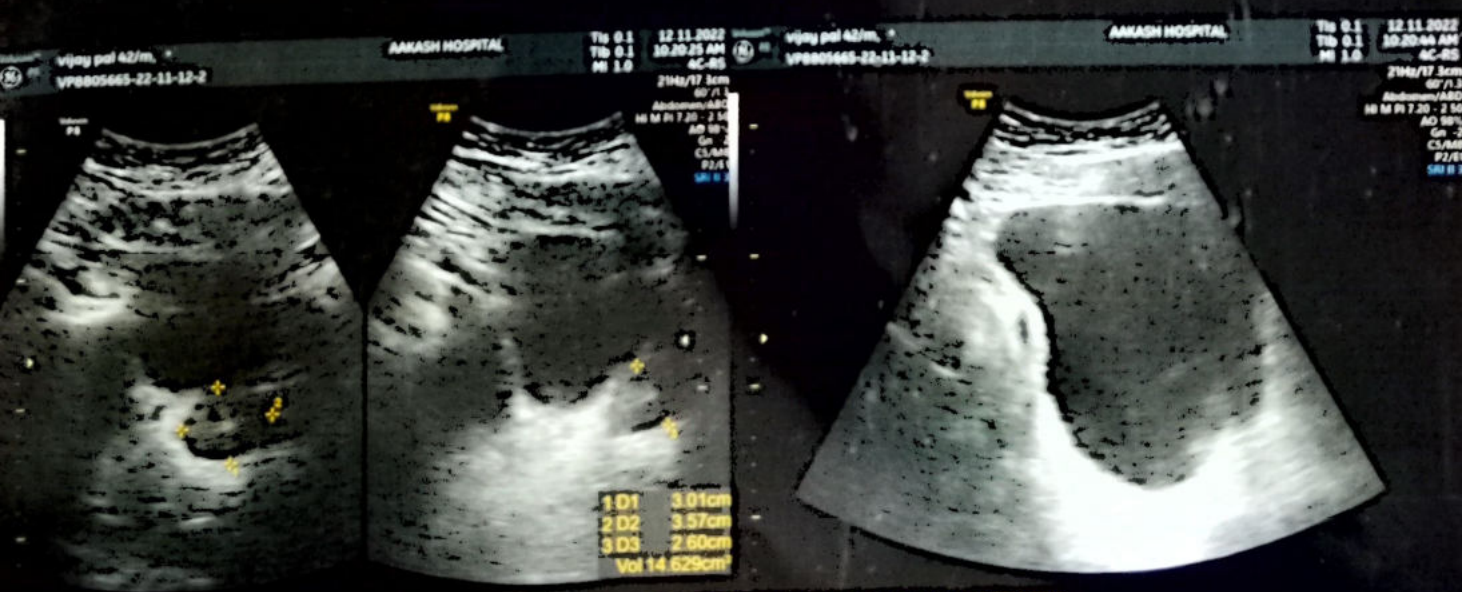
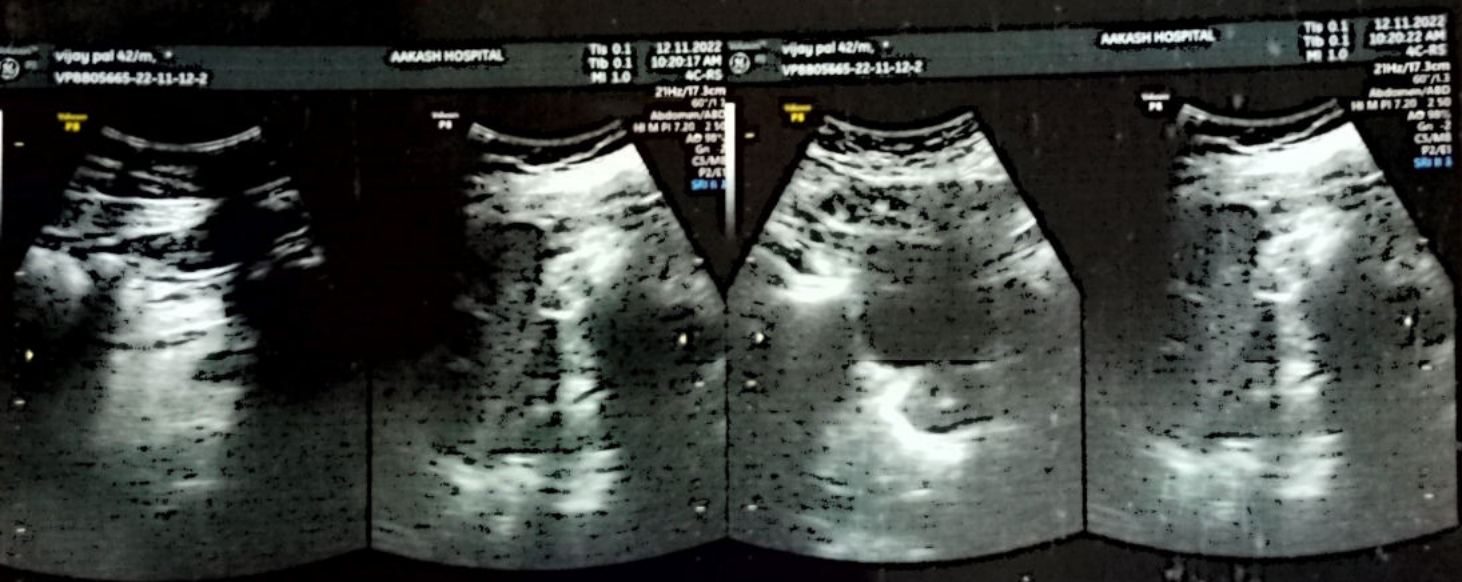
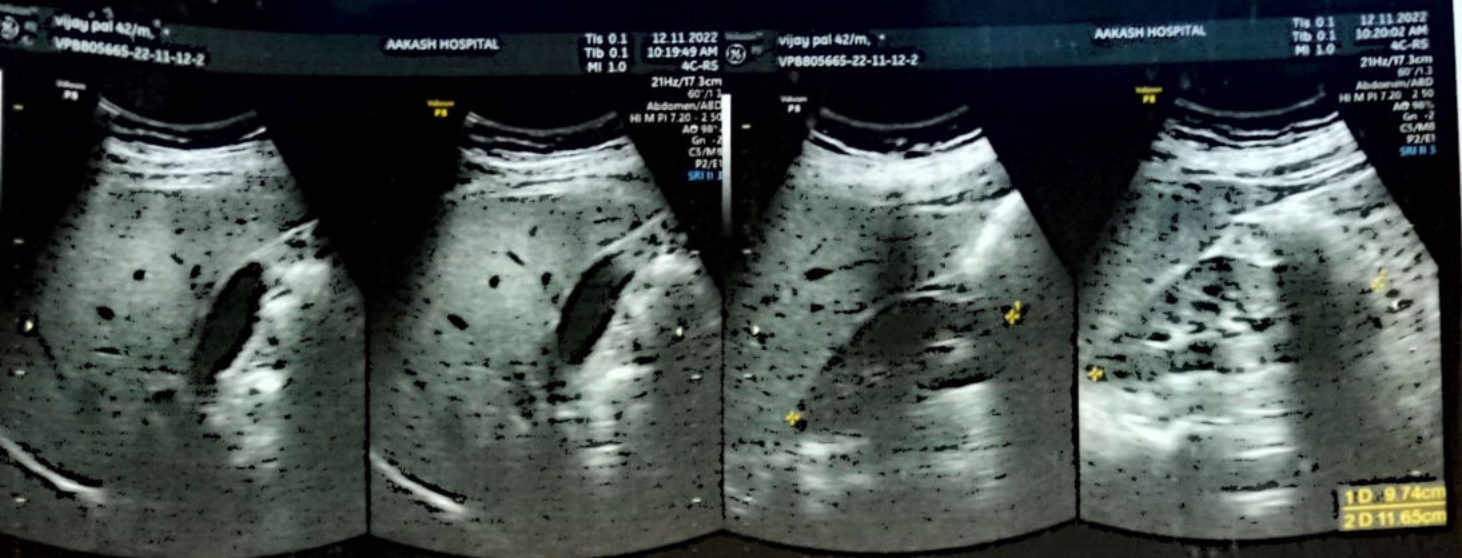
- Interventions (Vascular & Nonvascular)
- FNAC

- Biopsy
- Drainages
- Doppler Scans

- 3D & 4D Scans
- Varicose Vein Laser Treatment



AAKASH HOSPITAL, MALVIYA NAGAR



90/43, MALVIYA NAGAR, NEW DELHI-110017 #011-40501000



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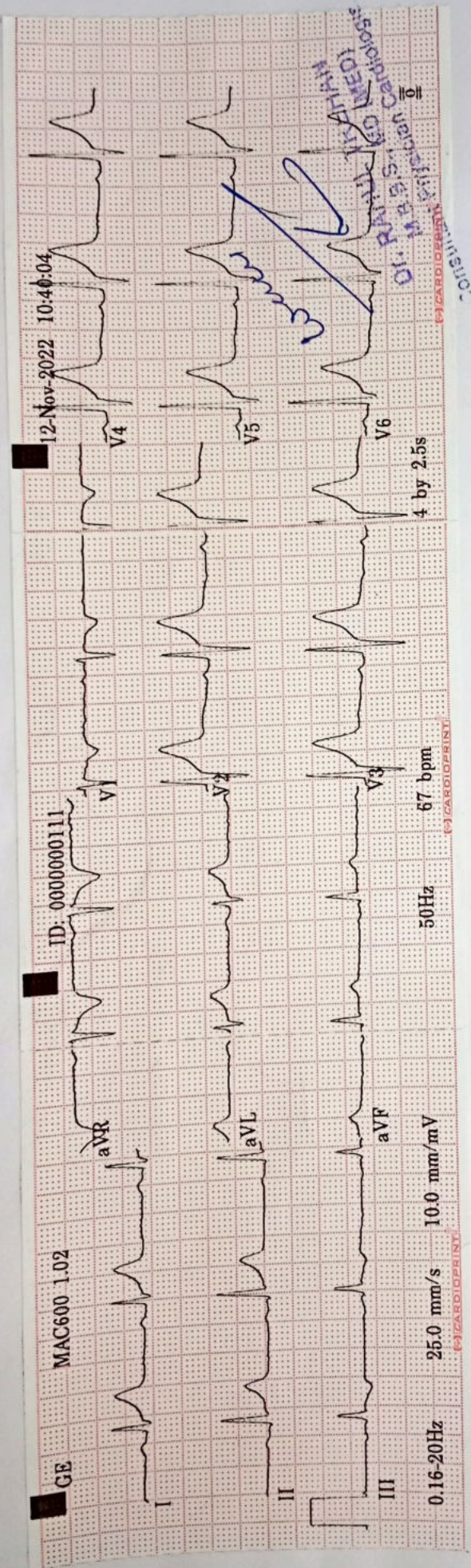
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90/43, Malviya Nagar, New Delhi-110017 #011 40501000 (100 Lines), 9871027922
info@aakashhospital.com, www.aakashhospital.com

Name of patient : <u>Vijay Pal</u>	Age : <u>42yrs</u>	M/F : <u>Male</u>
Address : <u>B-66A, Shiv Park, Khanpur</u>		
Consultant : <u>Dr. Sunita Singh</u>	Speciality : <u>Dermatology</u>	Date : <u>12/11/2022</u>

Investigations :	Presenting Complaints:	Provisional Diagnosis <u>Tinea Cruris with Melasma</u>
	Present History :	Rx ① Abzorb powder LABD 1-0-1 ② Tab. Loratidine 10mg BD (itching) 1-0-1 ③ Luliconazole cream LABD 1-0-1  RIA 2 weeks.. ④ UVAVO pro 30+ Sunscreen gel LABD 1-1-0 (9am - 3pm) ⑤ Triluma cream LAHS (N) (Aft. Nights) RIA 2 weeks.
Systemic Examination :	Past History :	
	Family History :	
	H/o any Allergy :	
	Vitals :	
	BP :	
	Pulse :	
	Temp :	
	Pain Scale (0-10)	
	Wt/Ht (if required)	
	Immunization	
• Followup/Next visit		
• Diet / Nutrition Explained		
• Preventive Steps Explained		
• Prognosis Explained		
	Signature : <u>Sunita</u>	Date/Time :



ID: 0000000111	42years	Male	Vent. rate	67 bpm
			QRS duration	86 ms
			QT/QTc	370/390 ms
			PR interval	162 ms
			P duration	92 ms
			RR interval	895 ms
			P-R-T axes	4 56 20
MAC600 1.02				12SL™ v239

Dr. Rahul Trehan
M.B.B.S., MD (MED)
Consultant Physician Cardiologist



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Lab Reg. No. : 2211120047	Date / Time : 12/11/2022
Patient Name : Mr. Vijay Pal	UHID No. : Akhu38555
Age / Sex : 42 Yrs. / Male	IPD No. :
Consultant : Self.	Collection Time : 12/11/2022 6:30:50 pm
Phone No. : 9818058554	Reporting Date & Time : 12/11/2022 7:04:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
Lab			
COMPLETE HAEMOGRAM			
HAEMOGLOBIN (HB)	12.7 L	gm/dl	13.0 - 17.0
Photometric Light Absorbance			
TOTAL LEUCOCYTE COUNT (TLC)	5300	/cumm	4000 - 11000
Volumetric Impedence			
DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHILS	65	%	40 - 80
Flowcytometry/ Microscopy			
LYMPHOCYTES	32	%	20 - 40
Flowcytometry / Microscopy			
EOSNOPHILS	1	%	01 - 06
Flowcytometry / Microscopy			
MONOCYTES	2	%	2 - 10
Flowcytometry / Microscopy			
BASOPHILS	0	%	0 - 1
Flowcytometry/ Microscopy			
RBC COUNT	4.9	Millions/cmm	4.5 - 5.5
Volumetric/ Impedence			
P.C.V / HAEMATOCRIT	38.9 L	%	40 - 50
Histogram Calculated			
MCV	78.2 L	cubic micron	83 - 101
Electric Impedence			
MCH	25.6 L	Pg	27.0 - 32.0
Calculated			
MCHC	32.7	g/dl	31.5 - 34.3
Calculated			
PLATELET COUNT	1.00 L	Lakh/cumm	1.50 - 4.10
Volumetric Impedence			
RDW CV	13.6	%	
Histogram			
ERYTHROCYTE SEDIMENTATION RATE (Westregen Method)	10	mm/hr	0-15

{{End of Report}}

Suresh

PREPARED BY

Suresh

VERIFIED BY

Dr. MEENA METRE
MBBS, MD
CONSULTANT PATHOLOGIST



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Age / Sex : 42 Yrs. / Male	IPD No. :
Consultant : Self.	Collection Time : 12/11/2022 6:30:50 pm
Phone No. : 9818058554	Reporting Date & Time : 12/11/2022 7:03:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
Lab			
LFT (LIVER FUNCTION TEST)			
BILIRUBIN-TOTAL	0.5	mg /dl	0-2.0
Diazo			
BILIRUBIN-DIRECT	0.1	mg /dl	0.0 - 0.4
Diazo			
BILIRUBIN INDIRECT	0.4	mg/dL	0.2 - 1.2
Calculated			
TOTAL PROTEIN	6.9	g/dL	6.4 - 8.3
Biuret			
ALBUMIN	4.4	g/dL	3.5 - 5.2
BCG			
GLOBULIN	2.5	g/dL	1.8 - 3.6
Calculated			
A/G Ratio	1.8	%	1.1 - 2.2
Calculated			
SGOT	60 H	U/L	0 - 35
IFCC			
SGPT	42	U/L	0 - 45
IFCC			
ALKALINE PHOSPHATE	62	U/L	53 - 128
AMP			
GGTP	96 H	U/L	0 - 55
Glupa-C			

INTERPRETATION :

In an asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT levels. NAFLD is considered as hepatic manifestation of metabolic syndrome. In most type of liver disease, ALT activity is higher than that of AST; exception may be seen in Alcoholic Hepatitis, Hepatic Cirrhosis, and Liver neoplasia. In known cases of Chronic Liver disease due to Viral Hepatitis B & C, Alcoholic liver disease or NAFLD, Enhanced liver fibrosis (ELF) test may be used to evaluate liver fibrosis. In a patient with Chronic Liver disease, AFP and Des-gamma carboxyprothrombin (DCP)/PIVKA II can be used to assess risk for development of Hepatocellular Carcinoma.

{{End of Report}}

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Consultant : Self.	Collection Time : 12/11/2022 6:30:50 pm
Phone No. : 9818058554	Reporting Date & Time : 12/11/2022 7:02:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
Lab			
LIPID PROFILE			
TOTAL CHOLESTEROL	207.0 H	mg/dL	0 - 200
CHOD-PAP			
TRIGLYCERIDES	84.1	mg/dL	0 - 161
GPO			
HDL CHOLESTEROL	60.8	mg/dl	35 - 79
DIRECT			
VLDL CHOLESTROL	16.8	mg /dl	0-40
Calculated			
LDL CHOLESTEROL	129.4 H	mg/dl	0 - 100
Calculated			
CHOL/HDL RATIO	3.4	Ratio	0.0 - 3.5
Calculated			
LDL/HDL Ratio	2.1	Ratio	0 - 3
Calculated			

INTERPRETATION :

NATIONAL LIPID ASSOCIATION RECOMMENDATION in mg/dl	TOTAL CHOLESTROL in mg/dl	TRIGLYCERIDE in mg/dl	LDL CHOLESTROL in mg/dl	NON HDL CHOLESTROL(NLA-2014)
OPTIMAL	<200	<150	<100	<130
ABOVE OPTIMAL	---	---	100-129	130-159
BORDERLINE HIGH	200--239	150-199	130--159	160--189
HIGH	>=240	200--499	160--189	190--219
VERY HIGH	---	>=500	> =190	>=220

A lipid panel is a common blood test that healthcare providers use to monitor and screen for your risk of cardiovascular disease. The panel includes three measurements of your cholesterol levels and a measurement of your triglycerides.

SPECIAL NOTE : 12 HRS FASTING REQUIRED

{{End of Report}}

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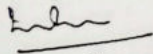
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Age / Sex : 42 Yrs. / Male	IPD No. :
Consultant : Self.	Collection Time : 12/11/2022 6:30:50 pm
Phone No. : 9818058554	Reporting Date & Time : 12/11/2022 6:59:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
Biochemistry			
URIC ACID (SERUM)			
URIC ACID	8.9 H	mg/dl	3.5 - 7.2
Uricase			
Lab			
BLOOD UREA NITROGEN (BUN)			
BLOOD UREA NITROGEN	14.3	mg/dl	6.0 - 20
Calculated			
CREATININE			
CREATININE	0.8	mg/dl	0.7 - 1.3
Enzymatic			

{{End of Report}}

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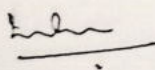
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Test Name	Observed Values	Unit	Biological Reference Range
Biochemistry			
URIC ACID (SERUM) URIC ACID Uricase	8.9 H	mg/dl	3.5 - 7.2
Lab			
BLOOD UREA NITROGEN (BUN) BLOOD UREA NITROGEN Calculated	14.3	mg/dl	6.0 - 20
CREATININE CREATININE Enzymatic	0.8	mg/dl	0.7 - 1.3

{(End of Report)}

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Biochemistry			
URIC ACID (SERUM) URIC ACID Uricase	8.9 H	mg/dl	3.5 - 7.2
Lab			
BLOOD UREA NITROGEN (BUN) BLOOD UREA NITROGEN Calculated	14.3	mg/dl	6.0 - 20
CREATININE CREATININE Enzymatic	0.8	mg/dl	0.7 - 1.3

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Phone No.	: 9818058554	Reporting Date & Time	: 12/11/2022 7:02:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
Lab			
BLOOD GLUCOSE (PP) BLOOD GLUCOSE (PP) GOD-POD	123	mg /dl	70-140
BLOOD GLUCOSE FASTING (FBS) BLOOD GLUCOSE (FASTING) GOD-POD	105	mg /dl	70-110

{{End of Report}}

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Consultant : Self.	Collection Time : 12/11/2022 6:30:50 pm
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Test Name	Observed Values	Unit	Biological Reference Range
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Biochemistry

Hba1c (Glycosylated Hemoglobin)

HBA1C

6.2 H

%

4.0 -6.0

Immunoturbidimetric

RECOMMENDED NGSP GUIDELINES FOR HbA1C LEVELS :

Non - Diabetic 4.0 % - 6.0%

Target for diabetics : < 7 %

Therapeutic action required > 8 %

COMMENT

The A1C test is a common blood test used to diagnose type 1 and type 2 diabetes. If you're living with diabetes, the test is also used to monitor how well you're managing blood sugar levels.

The A1C test is also called the glyated hemoglobin, glycosylated hemoglobin, hemoglobin A1C or HbA1c test. An A1C test result reflects your average blood sugar level for the past two to three months.

{{End of Report}}

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#011 40501000 (100 Lines), 9871027922
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Patient Name : MR PAL VIJAY
Ref By : DR. SELF
Reg No : PBK420000640 / HOSPITAL
Barcode : 81196186
INV : THYROID PROFILE -3 (T3 T4 TSH)

Age : 43 Year | Sex : Male
Registered on : 12-11-2022 11:46 AM
Received on : 12-11-2022 11:52 AM
Reported on : 12-11-2022 01:10 PM

SAMPLE COLLECTED AT :



SAMPLE : Serum

THYROID PROFILE -3 (T3 T4 TSH)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
TOTAL TRIIODOTHYRONINE (T3) Method: CLIA	1.01	ng/mL	0.80 - 2.00
TOTAL THYROXINE (T4) Method: CLIA	6.98	ug/dl	5.10 - 14.10
THYROID STIMULATING HORMONE (TSH) Method: CLIA	6.48	uIU/ml	0.35 - 5.50

Reference Range

Thyroid hormone status during pregnancy:

Pregnancy	T3	T4	TSH
1st Trimester	0.70-1.80	6-16.5	0.37 - 3.6
2nd & 3rd Trimester	0.80-2.00	6-18.5	0.38 - 4.04

Interpretation


1. Patients having low T3 and T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile myxedema or autoimmune disorders.
2. Patients having high T3 and T4 levels but low TSH levels suffer from Grave's disease, toxic adenoma or sub-acute thyroiditis.
3. Patients having either low or normal T3 and T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
4. Patients having high T3 and T4 levels but normal TSH levels may suffer from toxic multinodular goiter. This condition is mostly a symptomatic and may cause transient hyperthyroidism but no persistent symptoms.
5. Patients with high or normal T3 and T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 toxicosis respectively.
6. In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the catabolic state and may revert to normal when the patient recovers.
7. There are many drugs for eg. Glucocorticoids, Dopamine, Lithium, Iodides, Oral radiographic dyes, etc. which may affect the thyroid function tests.
8. Generally when total T3 and total T4 results are indecisive then Free T3 and Free T4 tests are recommended for further confirmation along with TSH levels.

Please correlate with clinical conditions

~~End of report~~



Dr Amit Aggarwal
M.D. (Microbiologist)
Microbiologist


Dr. Om Prakash Midha
M.D. (PATHOLOGY)
Consultant Pathologist



Aakash Hospital™

Care with concern

(A unit of Dr. Gaba & Associates Medicare Pvt. Ltd.)



90/43, Malviya Nagar, New Delhi-110017
#011 40501000 (100 Lines), 9871027922
info@aakashhospital.com, www.aakashhospital.com

Patient Name : MR PAL VIJAY
Ref By : DR. SELF
Reg No : PBK420000640 / HOSPITAL
Barcode : 81196186
INV : PSA- Total (Prostrate Specific Antigen Total)

Age : 43 Year | Sex : Male
Registered on : 12-11-2022 11:46 AM
Received on : 12-11-2022 11:52 AM
Reported on : 12-11-2022 01:30 PM

SAMPLE COLLECTED AT :



SAMPLE : Serum

PSA- TOTAL (PROSTRATE SPECIFIC ANTIGEN TOTAL)

TEST DESCRIPTION	RESULT	UNITS	BIOLOGICAL REFERENCE RANGE
PROSTATE SPECIFIC ANTIGEN (PSA) <small>Method: CLIA</small>	1.04	ng/ml	0 - 4.0

Interpretation

Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti-chymotrypsin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

Note:


Patients on Biotin supplement may have interference in some immunoassays. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

Please correlate with clinical conditions.

~~End of report~~



Dr Amit Aggarwal
M.D. (Microbiologist)
Microbiologist


Dr. Om Prakash Midha
M.D. (PATHOLOGY)
Consultant Pathologist



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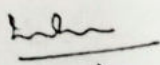
Lab Reg. No. : 2211120047	Date / Time : 12/11/2022
Patient Name : Mr. Vijay Pal	UHID No. : Akhu38555
Age / Sex : 42 Yrs. / Male	IPD No. :
Consultant : Self.	Collection Time : 12/11/2022 6:30:50 pm
Phone No. : 9818058554	Reporting Date & Time : 12/11/2022 7:00:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
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Test Name	Observed Values	Unit	Biological Reference Range
BLOOD GROUP	Pathology		
BLOOD GROUP	"O"		
RH TYPING	POSITIVE		
	{{End of Report}}		

Suresh
PREPARED BY

Suresh
VERIFIED BY


Dr. MEENA METRE
MBBS, MD
CONSULTANT PATHOLOGIST



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Phone No. : 9818058554	Reporting Date & Time : 12/11/2022 7:09:00 pm

Test Name	Observed Values	Unit	Biological Reference Range
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Lab

STOOL R/M

PHYSICAL CHARACTERISTICS

COLOUR/ APPEARANCE

Brownish

CONSISTENCY

S.Solid

PUS

Absent

MUCUS

Absent

BLOOD.

Absent

CHEMICAL ANALYSIS

REACTION

7.0

MICROSCOPIC EXAMINATION

PUS CELLS

0-1

HPF

RBC s

NIL

HPF

OVA

NOT SEEN

HPF

NOT SEEN

CYSTS

NOT SEEN

HPF

NOT SEEN

OTHERS

NIL

NIL

{{End of Report}}

Suresh

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Test Name	Observed Values	Unit	Biological Reference Range
Pathology			
URINE ROUTEIN AND MICROSCOPY			
PHYSICAL EXAMINATION			
VOLUME	30	ml	
COLOUR/APPEARANCE	Pale Yellow		Pale Yellow
TRANSPARENCY	Clear		Clear
PH	6.0		6.0 - 7.5
SPECIFIC GRAVITY	1.010		1.005-1.030
Bromothymol blue indicator			
CHEMICAL EXAMINATION			
URINE GLUCOSE	Negative		Negative
GOD - POD			
URINE PROTEIN	Negative		Negative
Tetrabromophenol blue			
URINE KETONE BODIES/ACETONE	Negative		Negative
Sodium nitroprusside			
BLOOD	Negative		Negative
Peroxidase			
LEUKOCYTES	Negative		Negative
Esterase			
NITRITE	Negative		Negative
Tetrahydrbenzo(h) quinolin			
BILIRUBIN	Negative		Negative
Diazotized dichloraniline			
UROBILINOGEN	0.5		0.2 - 1.0
Ehrlich reaction			
MICROSCOPIC EXAMINATION			
PUS CELLS	1-2	/HPF	0 - 9
RBC'S	NIL	/HPF	0 - 4
EPITHELIAL CELLS	2-4	/HPF	0 - 4
BACTERIA	Absent	/HPF	Absent
CRYSTALS	Absent		Absent
CASTS	Absent	/LPF	Absent
YEAST CELL	Absent		Absent
OTHERS	NIL		NIL

{{End of Report}}

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CIN No. U85110DL2004PTC125538

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NAME: MR VIJAY PAL

AGE: 42 Y

SEX: MALE

REF. BY: MEDICAL

DATE: 12.11.22

X RAY NO: 29938

CHEST (PA VIEW)

The diaphragmatic domes have smooth contours, a normal arched shape and occupy a normal position.

The costophrenic angles are clear.

Both lungs are normally aerated and are applied to the chest wall on all sides.

The mediastinum is centered and of normal width.

The cardiac and vascular shadows show a normal configuration.

The thoracic skeleton is symmetrically shaped and the spine is unremarkable.

The soft tissue envelope of chest shows no abnormalities.

IMP: NORMAL STUDY

**DR. R. DUGGAL
MD (RADIOLOGY)
DMC-2595**

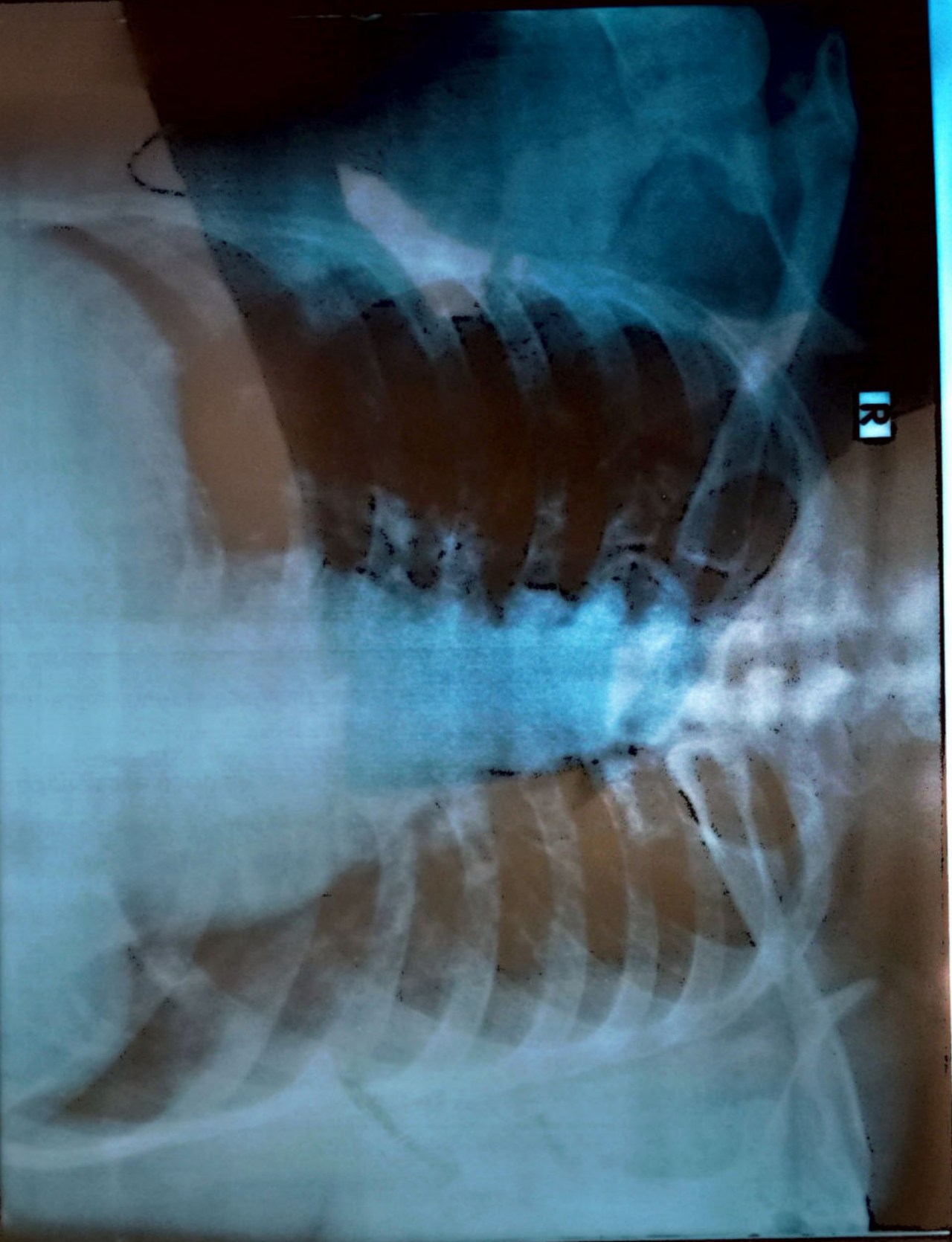
AREA OF EXPERTISE

- Interventions (Vascular & Nonvascular)
- FNAC

- Biopsy
- Drainages
- Doppler Scans

- 3D & 4D Scans
- Varicose Vein
- Laser Treatment





MR VIJAY PAL 42YRS AKH 29938 M CHEST PA 2022-11-12 10:26 AM
AAKASH HOSPITAL 90/43, MALVIYA NAGAR, PH-40501000



ECHOCARDIOGRAM REPORT

NAME : MR VIJAY PAL
 AGE/SEX : 42/M
 DATE : 12.11.2022

ECHOCARDIOGRAPHY & COLOR DOPPLER REPORT

MEASUREMENT	VALUE	NORMAL RANGE
-------------	-------	--------------

AORTIC ROOT DIAMETER 31 20 - 37 mm

AORTIC VALVE OPENING - 15 - 26 mm

LEFT ATRIAL DIMENSION 33 19 - 40 mm

RV DIMENSION N 07 - 26 mm

RV THICKNESS N 03 - 09 mm

LV ED DIMENSION 49 37 - 56 mm

LV ES DIMENSION 30 22 - 40 mm

IVS THICKNESS ED - 07 ES - 11 06 - 12 mm

LVPW THICKNESS ED - 06 ES - 10 05 - 11 mm

IVS/LVPW RATION N

MITRAL VALVE DE-N EF - N

INDICES OF LV FUNCTION

LVEF 60% 60 +/- 5 %

FS 31% 24 - 42 %



DR. Rahul Trehan
MB, Medicine
Consultant Physician & Cardiologist

- ❖ Normal LV wall motion and systolic function.
- ❖ Normal flow across valves
- ❖ No LV clot, Vegetation, pericardial effusion.

FINAL IMPRESSION:-

COLOUR FLOW MAPPING: NORMAL

MR	0/4	TV	0.26 m/sec	E 0.88 m/sec	A 0.74 m/sec
TR	0/4	AV	0.92 m/sec		
AR	0/4	PV	0.55 m/sec		
PR	0/4				

DOPPLER:-

RWMA: ABSENT

- ❖ LV normal size. Good contractility. RWMA absent. No thrombus.
- ❖ LA normal in size. No clot.
- ❖ RV & RA normal size. RV contractility.
- ❖ Mitral valve leaflets normal. PML motion normal. No annular calcification present.
- ❖ Normal tricuspid & pulmonary valves.
- ❖ Aortic valve- tricuspid.
- ❖ Pericardium normal.

IMAGING

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