

25mm/s 0.5-25Hz

10mm/mV

10mm/mV

10mm/mV

I

aVR

V1

II

aVL

V2

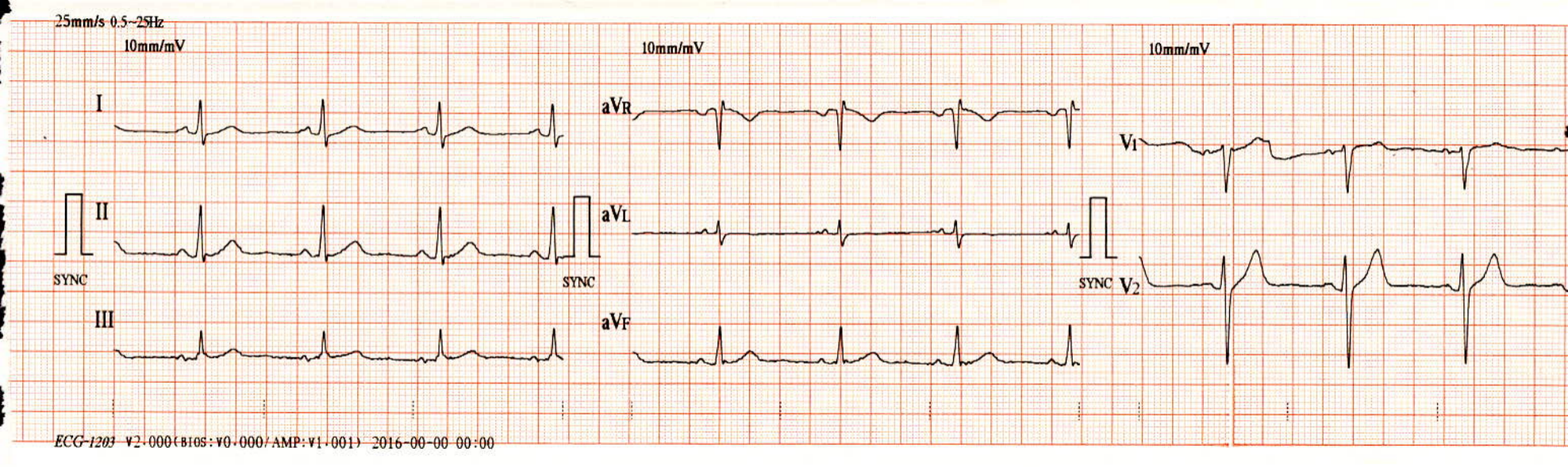
SYNC

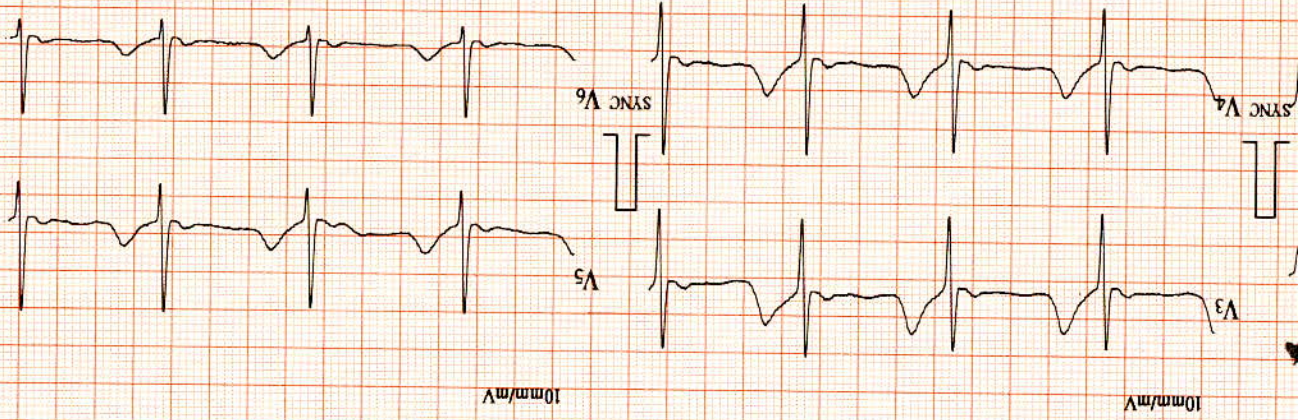
SYNC

SYNC

III

aVF





Unconfirmed report verified by:

10/10/20

20/3/24

Sinus Rhythm
Borderline Normal ECG

Age : 31 years

Sex : male

Name: Deepanshu

ID : 0005
 HR : 74 bpm
 R-R : 806 ms
 P-R : 132 ms
 QRS : 89 ms
 QT/QTc : 327/364 ms
 P/QRS/T : 24/69/60 ms
 RV5/SVI : 1.210/0.720 mV
 RV5+SVI : 1.930 mV





Vitals :

Chief Complaints :

*BR 120/80mmHg
wt 81.4kg*

H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :

Gurgaon

Q Block South City 11, Sohna Road, Main Sector-47, Gurgaon, Haryana Ph.: 0124-4900000 Fax : 0124-2218733
E-mail : parkmedicenters@gmail.com

● West Delhi ● South Delhi ● Faridabad ● Panipat ● Karnal



Park Hospital

GROUP SUPER SPECIALITY HOSPITAL

Dr. DERMATOLOGIST



Mr. DEEPAK SHY

Age 31 y/m

Date - 23/3/2024

Vitals :

Chief Complaints :

gdx:-

- FUDIC Cream

H/O Present Illness :

(2/A) v ~~_____~~ & 2 weeks
m

Past History :

- ONABET Cream

Investigation :

Drug Allergies : (if any)

(2/A) _____ ✓
& 2 weeks

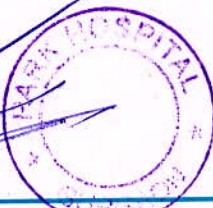
Treatment :

✓ - EXCELTA MAX LOTION

T. ZINCovit
Once daily
& 15 days

(2/A) v _____ ✓

- R/v S O S



Gurgaon

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ENT

Routine ENT check up.

Rx. Cap. Narvad plus x 5 days
2 times daily

Vitals :

Chief Complaints :

2. Cap. Sompra2-D x 15 days
1 (before breakfast)

H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :

23/03/24



Mr. Deepanku

Age - 31y/M

Dental - Dr. Kishu

Vitals :

Chief Complaints :

Routine health checkup.

H/O Present Illness :

O/E :- Carious wt 18, 28, 46

Past History :

Plaque ++

Investigation :

Drug Allergies : (if any)

Adv. Restoration wt 18, 28, 46
Scaling & Polishing

Treatment :

Dr. PANKAJ GOYAL
- Senior Consultant
Park Hospital, Gurgaon
Reg. No. A12674



MR. DEEPANSHU

31y/M

Routine eye checkup

Vitals :

Chief Complaints :

VA $\left\{ \begin{array}{l} - 6/6 \\ - 6/6 = \text{glasses} \end{array} \right.$

MEV $\left\{ \begin{array}{l} - 20.2 \\ - 19.6 \end{array} \right.$

H/O Present Illness :

R
POW $\left\{ \begin{array}{l} - 3.75 / 0.75 @ 169 \\ - 3.0 / 1.0 @ 3 \end{array} \right.$

Past History :

MM $\left\{ \begin{array}{l} - MB \\ - MB = gb \end{array} \right.$

Investigation :

Drug Allergies : (if any)

Colour vision - Normal BS

Treatment :

Findings - Normal

Adv \rightarrow

Ophthalmologist refd 0/0
x3mths.





Vitals :

Chief Complaints :

To be seen after
investigation .

H/O Present Illness :

Past History :

Investigation :

Drug Allergies : (if any)

Treatment :

Gurgaon

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DEPARTMENT OF IMMUNOLOGY

Patient Name : Mr. DEEPANSHU
MR No : 670719
Age/Sex : 32 Years 7 Months 24 Days / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024
Reporting Date : 24/03/2024
Sample ID : 263771
Bill/Req. No. : 25269851
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
PSA TOTAL				
PROSTATE SPECIFIC ANTIGEN(PSA)	2.05	0.57 - 4.0	ng/ml	Chemiluminescence
Method : chemiluminescent immunoassay				

Note : Clinical Use: -

An aid in the early detection of Prostate cancer in Male. Follow up and assessment of Prostate cancer patients. Detect metastatic or persistent disease in patients following surgical or medical treatment of Prostate cancer

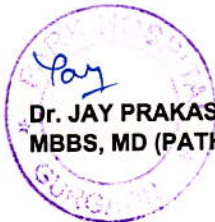
Note : -

False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy. PSA levels may appear consistently elevated / depressed due to the interference by heterophilic antibodies & nonspecific protein binding. PSA values regardless of levels should not be interpreted as absolute evidence of the presence or absence of disease. All values should be correlated with clinical findings and results of other investigations.

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)

Dr. ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM **NIKHIL**



(This is only professional opinion and not the diagnosis, please correlate clinically) Page 1 of 1
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Ph.: 0124-4900000 (100 Lines), Toll Free No. : 1800-102-6767, Mob.: 62 62 82 82 35, Email: customercare@parkhospital.in

PARK GROUP OF HOSPITALS : West Delhi - Gurugram - Faridabad - Sonapat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur



DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DEEPANSHU
MR No : 670719
Age/Sex : 32 Years 7 Months 24 Days / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024
Reporting Date : 23/03/2024
Sample ID : 263771
Bill/Req. No. : 25269851
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
LIPID PROFILE				
LIPID PROFILE				
TOTAL CHOLESTEROL	140.0	0 - 250	mg/dL	CHOD -Trinder
SERUM TRIGLYCERIDES	113.3	60 - 165	mg/dl	GPO-TRINDER
HDL-CHOLESTEROL	31.6	30 - 70	mg/dl	DIRECT
VLDL CHOLESTEROL	22.66	6 - 32	mg/dL	calculated
LDL	85.74	50 - 135	mg/dl	calculated
LDL CHOLESTEROL/HDL RATIO	2.71	1.0 - 3.0	mg/dL	calculated
TOTAL CHOLESTEROL/HDL RATIO	4.43	2.0 - 5.0	mg/dl	calculated

SAMPLE TYPE: SERUM

Note : ATP III Guidelines At-A-Glance Quick Desk Reference

Step 1 - Determine lipoprotein levels obtain complete lipoprotein profile after 9- to 12-hour fast.

ATP III Classification of LDL, Total, and HDL Cholesterol (mg/dL):-

LDL Cholesterol Primary Target of Therapy
 <100 Optimal
 130-159 Borderline high
 >190 Very high.

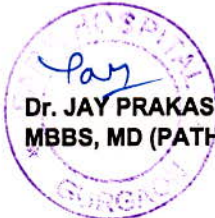
Total Cholesterol
 <200 Desirable
 200-239 Borderline high
 >240 High

HDL Cholesterol
 <40 Low
 >60 High

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
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Dr.ISHA RASTOGI
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CONSULTANT CLINICAL MICROBIOLOGIST

USER NM AMIT1



MC - 4830

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DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DEEPANSHU

MR No : 670719

Age/Sex : 32 Years 7 Months 24 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024

Reporting Date : 23/03/2024

Sample ID : 263771

Bill/Req. No. : 25269851

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
KFT (RENAL PROFILE)				
KFT				
SERUM UREA	20.4	10 - 45	mg/dL	
SERUM CREATININE	0.7	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	6.7	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	135	135 - 150	mmol/L	ISE
SERUM POTASSIUM	4.1	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	9.2	8.5 - 10.5	mg/dL	ARSENazo III
SERUM PHOSPHORUS	2.6	2.5 - 4.5	mg/dL	AMMONIUM

SAMPLE TYPE: SERUM

***** END OF THE REPORT *****



Sample no.



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CONSULTANT CLINICAL MICROBIOLOGIST

USER NM AMIT1



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DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DEEPANSHU

MR No : 670719

Age/Sex : 32 Years 7 Months 24 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024

Reporting Date : 23/03/2024

Sample ID : 263771

Bill/Req. No. : 25269851

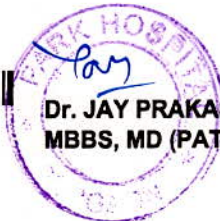
Ref Doctor : Dr.RMO

Test	Result	Blo. Ref. Interval	Units	Method
BLOOD SUGAR FASTING				
PLASMA GLUCOSE FASTING	92.9	60 - 110	mg/dl	GOD TRINDERS

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)

Dr. ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM AMIT1



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DEPARTMENT OF PATHOLOGY

Patient Name : Mr. DEEPANSHU
MR No : 670719
Age/Sex : 32 Years 7 Months 24 Days / Male
Type : OPD
TPA/Corporate : MEDIWHEEL PVT LTD
Bill Date : 23/03/2024
Reporting Date : 23/03/2024
Sample ID : 263771
Bill/Req. No. : 25269851
Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
URINE ROUTINE AND MICROSCOPY				
PHYSICAL CHARACTERSTICS				
QUANTITY	40ml	5 - 100	ml	
COLOUR	Pale Yellow	Pale Yellow		Manual Method
TURBIDITY	Clear	clear		
SPECIFIC GRAVITY	1.010	1.000-1.030		urinometer
PH - URINE	6.5	5.0 - 9.0		PH PAPER
CHEMICAL EXAMINATION-1				
UROBILINOGEN	Negative	NIL		Ehrlich
URINE PROTEIN	Absent	NIL	mg/dl	Protein error indicator
BLOOD	NIL	NIL		
URINE BILIRUBIN	NIL	NIL		
GLUCOSE	NIL	NIL	mg/dL	GOD-POD/Benedicts
URINE KETONE	NIL	NIL		SOD.
MICRO.EXAMINATION				
PUS CELL	2-4	0-5	cells/hpf	Microscopic
RED BLOOD CELLS	Nil	0-2	cells/hpf	
EPITHELIAL CELLS	1-3	0-5	cells/hpf	
CASTS	NIL	NIL	/lpf	
CRYSTALS	NIL	NIL	/Lpf	
OTHER	NIL			
AMORPHOUS URINE	Absent			MicroScopy

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)

Dr.ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM RAVINDRA



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DEPARTMENT OF HAEMATOLOGY

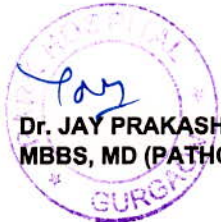
Patient Name :	Mr. DEEPANSHU	Bill Date :	23/03/2024
MR No :	670719	Reporting Date :	23/03/2024
Age/Sex :	32 Years 7 Months 24 Days / Male	Sample ID :	263771
Type :	OPD	Bill/Req. No. :	25269851
TPA/Corporate :	MEDIWHEEL PVT LTD	Ref Doctor :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
BLOOD GROUPING AND RH FACTOR				
BLOOD GROUP	" O " RH POSITIVE			ABO/Rh (D) SLIDE

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)

Dr. ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM RAVINDRA



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DEPARTMENT OF HAEMATOLOGY

Patient Name : Mr. DEEPANSHU

MR No : 670719

Age/Sex : 32 Years 7 Months 24 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024

Reporting Date : 23/03/2024

Sample ID : 263771

Bill/Req. No. : 25269851

Ref Doctor : Dr.RMO

Test	Result	Blo. Ref. Interval	Units	Method
CBC				
HAEMOGLOBIN	14.6	12 - 16	gm/dL	COLORIMETRY
TOTAL LEUCOCYTE COUNT	7300	4000-11000	/µL	LASER FLOW
DIFFERENTIAL COUNT				
NEUTROPHILS	60	40.0 - 70.0	%	FLOW CYTOMETRY
LYMPHOCYTES	30	20.0 - 40.0	%	FLOW CYTOMETRY
MONOCYTES	07	3.0 - 8.0	%	FLOW CYTOMETRY
EOSINOPHILS	03	0.5 - 5.0	%	FLOW CYTOMETRY
BASOPHILS	00	0.0 - 2.0	%	FLOW CYTOMETRY
RED BLOOD CELL COUNT	4.73	3.5 - 5.5	millions/µL	ELECTRICAL
PACKED CELL VOLUME	43.9	35.0 - 50.0	%	ELECTRICAL
MEAN CORPUSCULAR VOLUME	92.8	83 - 101	fL	ELECTRICAL
MEAN CORPUSCULAR HAEMOGLOBIN	30.9	27 - 31	Picogrammes	CALCULATED
MEAN CORPUSCULAR HB CONC	33.3	33 - 37	g/dl	CALCULATED
PLATELET COUNT	194	150 - 450	thou/µL	ELECTRICAL
RDW	13.3	11.6 - 14.5	%	CALCULATED
SAMPLE TYPE FOR C.B.C	Whole Blood EDTA			

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
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Dr. ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM RAMKISHAN



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DEPARTMENT OF HAEMATOLOGY

Patient Name : Mr. DEEPANSHU

MR No : 670719

Age/Sex : 32 Years 7 Months 24 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024

Reporting Date : 27/03/2024

Sample ID : 263771

Bill/Req. No. : 25269851

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
------	--------	--------------------	-------	--------

ESR (WESTERGREN)

E.S.R .1ST HRS.	15	0 - 20	mm/Hr.	Westergren
SPECIMEN TYPE	WHOLE BLOOD-EDTA			

Method : (Capillary photometry)

- Note** :
1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.
 2. Test conducted on EDTA whole blood at 37C.
 3. ESR readings are auto- corrected with respect to Hematocrit (PCV) values.

***** END OF THE REPORT *****



Sample no.

Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)



Dr.ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM AMIT1



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PARK GROUP OF HOSPITALS : West Delhi - Gurugram - Faridabad - Sonapat - Panipat - Karnal - Ambala - Patiala - Behror - Jaipur



DEPARTMENT OF IMMUNOLOGY

Patient Name : Mr. DEEPANSHU

MR No : 670719

Age/Sex : 32 Years 7 Months 24 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024

Reporting Date : 24/03/2024

Sample ID : 263771

Bill/Req. No. : 25269851

Ref Doctor : Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
THYROID PROFILE				
TRI-IODOTHYRONINE (T3)	1.41	0.60 - 1.81	ng/ml	Chemiluminescence
THYROXINE (T4)	8.8	5.01 - 12.45	µg/dL	Chemiluminescence
THYROID STIMULATING HORMONE	2.23	0.5-5.50 ,	µIU/ml	

Method : chemiluminescent immunoassay

Note : Clinical Significance:

Thyroid function tests (TFTs) is a collective term for blood tests used to check the function of the thyroid. TFTs may be requested if a patient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effectiveness of either thyroid-suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibrillation and anxiety disorder. A TFT panel typically includes thyroid hormones such as thyroid-stimulating hormone (TSH, thyrotropin) and thyroxine (T4), and triiodothyronine (T3) depending on local laboratory policy.

Note: Please correlate with clinical condition

***** END OF THE REPORT *****



Sample no.

Dr. JAY PRAKASH SINGH
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MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM NIKHIL



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DEPARTMENT OF BIOCHEMISTRY

Patient Name : Mr. DEEPANSHU

MR No : 670719

Age/Sex : 32 Years 7 Months 24 Days / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date : 23/03/2024

Reporting Date : 23/03/2024

Sample ID : 263771

Bill/Req. No. : 25269851

Ref Doctor : Dr.RMO

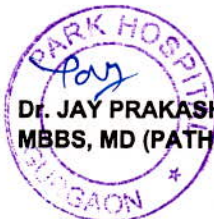
Test	Result	Bio. Ref. Interval	Units	Method
LFT (LIVER FUNCTION TEST)				
LFT				
TOTAL BILIRUBIN	0.82	0 - 1.2	mg/dL	DIAZO
DIRECT BILIRUBIN	0.39	0 - 0.4	mg/dL	DIAZO
INDIRECT BILIRUBIN	0.43	0.10 - 0.6	mg/dL	CALCULATED
SGOT (AST)	64.9	H 0 - 45	U/L	IFCC WITHOUT
SGPT (ALT)	186.3	H 0 - 45	U/L	IFCC WITHOUT
ALKALINE PHOSPHATASE	94.1	30 - 170	IU/L	MODIFIED IFCC
TOTAL PROTEINS	7.7	6.4 - 8.0	g/dL	BIURET
ALBUMIN	4.3	3.3 - 5.5	g/dL	BCG DYE
GLOBULIN	3.4	2.3 - 4.5	g/dL	CALCULATED
A/G RATIO	1.26	1.1 - 2.2		CALCULATED

SAMPLE TYPE: SERUM

***** END OF THE REPORT *****



Sample no.



Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)

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CONSULTANT CLINICAL MICROBIOLOGIST

USER NM AMIT1



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DEPARTMENT OF MICROBIOLOGY

Patient Name :	Mr. DEEPANSHU	Bill Date :	23/03/2024
MR No :	670719	Reporting Date :	26/03/2024
Age/Sex :	32 Years 7 Months 24 Days / Male	Sample ID :	263771
Type :	OPD	Bill/Req. No. :	25269851
TPA/Corporate :	MEDIWHEEL PVT LTD	Ref Doctor :	Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
-------------	---------------	---------------------------	--------------	---------------

URINE C/S

NAME OF SPECIMEN	Urine (Uncentrifuged)	
ORGANISM IDENTIFIED	NO ORGANISM GROWN IN CULTURE AFTER 48HRS OF INCUBATION AT 37 C DEGREE.	Aerobic culture

Method : .

Note : URINE CULTURE :

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in symptomatic, immune-compromised or diabetic patients & patients with indwelling catheters, even a smaller count of bacteria may signify infection (100-10000cfu/ml). Kindly correlate clinically.

***** END OF THE REPORT *****



Sample no.

Dr. JAY PRAKASH SINGH
MBBS, MD (PATHOLOGY)



Dr. ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

USER NM ADITYA



MC - 4830

(This is only professional opinion and not the diagnosis, please correlate clinically)

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DEPARTMENT OF RADIOLOGY

Patient Name	Mr DEEPANSHU	Billed Date	: 23/03/2024
Reg No	670719	Reported Date	: 23/03/2024
Age/Sex	32 Years 7 Months 24Days / Male	Req. No.	: 25269851
Type	OPD	Consultant Doctor	: Dr. RMO

X-RAY CHEST AP/PA

Bilateral lungs appears normal.

No focal lung lesion seen.

No evidence of free fluid is seen.

Both hila are normal in size, have equal density and bear normal relationship.

The heart and trachea are central in position and no mediastinal abnormality is visible.

The cardiac size is normal for patient age and view.

The domes of the diaphragms are normal in position, and show smooth outline.

To be correlated clinically



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MBBS, MD
CONSULTANT RADIOLOGIST

Dr. MANJEET SEHRAWAT
MBBS, MD, PDCC
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ALISHA KHAN
MEDICAL TRANSCRIPTIONIST

Dr. NEENA SIKKA
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RAJNISH SHARMA
MEDICAL
TRANSCRIPTIONIST

(Please take a professional opinion and not the diagnosis, please correlate clinically)

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USG WHOLE ABDOMEN

The Real time, B mode, gray scale sonography of the abdominal organs was performed.

LIVER : The liver is normal in size (15.0cm) and **shows raised echotexture**. No evidence of any focal lesion. IHBR is not dilated.

GALL BLADDER :The gall bladder is well distended. No evidence any calculus or mass seen.No evidence of pericholecystic fluid is seen.

BILE DUCT :The common bile duct is normal in caliber. No evidence of calculus is noted in common bile duct.

SPLEEN :The spleen is normal in size (10.4cm) and shape.Its echotexture is homogeneous.No evidence of focal lesion is noted.

PANCREAS :The pancreas is obscured.

KIDNEYS : Right kidney measures 9.5 x 4.1 cm. Left kidney measures 10.6 x 5.8 cm. The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentiation is maintained.There is no evidence of obvious calculus or hydronephrosis.

URINARY BLADDER :The urinary bladder is well distended.Wall thickness within normal limits.No evidence of calculus is seen.No evidence of mass or diverticulum is noted.

PROSTATE: Prostate appears normal in size (volume 22 cc), shape and echotexture. No evidence of ascites or interbowel free fluid is seen.

No evidence of obvious retroperitoneal or mesentric lymphadenopathy is seen.

Bowel loop distended with gas.

IMPRESSION- Grade I fatty liver.

To be correlated clinically



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NAME	: MR. DEEPANSHU	DATE	: 23 / 3 / 2024
Age Sex	: 31 Years / Male	Inpatient No	: 670719
PERFORMED BY	: Dr. SWATI SINGH	BILL NO.	: 25269851

TRANS THORACIC ECHO CARDIOGRAPHY REPORT

MITRAL VALVE

Morphology AML: Normal / Thickening / Calcification / Flutter / Vegetation / Non significant Prolapse / SAM
PML: Normal / Thickening / Calcification / Prolapse / Paradoxical Motion / Fixed.
Subvalvular deformity: Present / Absent

Doppler Normal / Abnormal
Mitral Stenosis Present / Absent
Mitral Regurgitation; Absent / Normal / Mild / Trace / Moderate / Severe

TRICUSPID VALVE

Morphology Normal / Atresia / Thickening / Calcification / Prolapse / Vegetation / Doming.
Doppler Normal / Abnormal
Tricuspid Stenosis: Present / Absent.
Tricuspid Regurgitation: Absent / Mild / Trace / Moderate

PULMONARY VALVE

Morphology Normal / Atresia / Thickening / Calcified / Doming / Vegetation.
Doppler Normal / Abnormal.
Pulmonary Stenosis: Present / Absent
Pulmonary regurgitation: Present / Absent

AORTIC VALVE

Morphology Normal / Thickened / Mildly / Calcified / Flutter / Vegetation / Restricted / Opening
No. of Cusps 1 / 2 / 3 / 4
Doppler Normal / Abnormal
Aortic Stenosis : Present / Absent
Aortic regurgitation : Present / Absent / Mild / Trace / Moderate / Severe



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<u>Measurements</u>	<u>Normal Values</u>	<u>Measurements</u>	<u>Normal Value</u>
IVSD : 0.6cm	(0.6-1.1cm)	LA : 2.8cm	(1.9-4.0cm)
LVIDd : 4.6cm	(3.7-5.6cm)	AORTA : 2.4cm	(2.0-3.7cm)
LVIDs : 2.5cm	(0.6-1.1cm)	IVSmotion :	Normal / Flat / Paradoxical
EF : 55-60%	(55% - 80%)		
Any Other			

CHAMBERS:-

LV **Normal** / Enlarged / **Clear** / Thrombus / Contraction Normal LV shows concentric LVH, no gradient across LVOT / Inetic / Intra capillary Regional wall motion abnormality: **Absent**/ Present

LA **Normal** / Enlarged / Clear / Thrombus / Myxoma; **LAA: Clear** / Thrombus

RA **Normal** / **Clear** / Thrombus, Dilated.

RV **Normal** / Mildly Dilated / Enlarged / **Clear** / Thrombus / Hypertrophied

PERICARDIUM **Normal** / Thickening / Calcification / Effusion.

SUMMARY:-

- All Cardiac Chambers dimensions are within normal limits.
- NO RWMA
- LVEF -55-60%
- NORMAL LV FUNCTION
- TRACE MR
- NO AR / NO TR
- GOOD RV FUNCTION
- IAS/IVS. No Flow seen across IAS/IVS.
- No Thrombus/Mass in any chamber.
- No Pericardial Effusion.

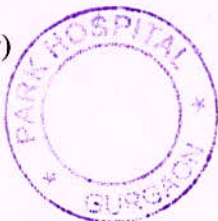
COMMENTS:- Normal LV Function, Trace MR

Please correlate clinically

Dr. SWATI SINGH

M.D. (Medicine)

D.M. (Cardiology)



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