



RAJESH KUMAR/40/N

DERMATO LOGY # Ryv On:
17/4/24.

for. Bropsy ar.
9:45am Vitals: Cheif Complaints: H/O Present Illness: Investigation: Drug Allergies: (if any) NICA Treatment: vivori malicere

Gurgaon

Q Block South City 11, Sohna Road, Main Sector-47, Gurgaon, Haryana Ph.: 0124-49000000 Fax: 0124-2218733 E-mail: parkmedicenters@gmail.com



Name. RAJESH. KUMAR

ay E. 404 M.



Health Cheekup.

Vitals:

Cheif Complaints:

Vision 616 unadded

H/O Present Illness:

Past History:

Colour vision - Normal.

Investigation:

Drug Allergies: (if any)

Near Vision N6 unadded.

Treatment:

fundas - norment DE

Gurgaon

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E-mail: parkmedicenters@gmail.com

• West Delhi • South Delhi • Faridabad • Panipat • Karnal





Routine ENT check up.

RI. cap. Sompra2-D X(

DI)

Ear (

Mosp MAD.

Vitals:

Cheif Complaints:

H/O Present Illness:

Past History:

Investigation: Drug Allergies: (if any)

Treatment:

Gurgaon

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• West Delhi • South Delhi • Faridabad • Panipat • Karnal



# DEPARTMENT OF RADIOLOGY

**Patient Name** 

Mr RAJESH KUMAR

698635 Reg No

Age/Sex

40 Years / Male

Type OPD **Billed Date** 

: 15/04/2024

Reported Date

: 15/04/2024

Req. No.

: 25282375

**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

MBBS,MD CONSULTANT RADIOLOGIST

Dr, MANJEET SEHRAWAT MBBS,MD,PDCC

**ALISHA KHAN** MEDICAL TRANSCRIPTIONIST MBBS, DNB

Dr. NEENA SIKKA

**RAJNISH SHARMA** MEDICAL

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

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# DEPARTMENT OF RADIOLOGY

Patient Name

Mr RAJESH KUMAR

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: 15/04/2024

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Age/Sex

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: 25282375

Type

OPD

Consultant Doctor

: Dr. RMO

# **USG WHOLE ABDOMEN**

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

<u>LIVER</u>: The liver is normal in size (14.7cm) 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 (9.3cm) and shape. Its echotexture is homogeneous. No evidence of focal lesion is noted.

PANCREAS: The pancreas is normal in size, shape, contours and echotexture. No evidence of solid or cystic mass lesion is noted.MPD is not dilated. No evidence of peripancreatic collection.

**KIDNEYS**: Right kidney measures 9.6 x 4.9 cm. Left kidney measures 9.2 x 5.1 cm.

The bilateral kidneys are normal in size and echotexture. Cortico-medullary differentation 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 enlarged in size (volume 31 cc).

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.
- -Prostatomegaly.

To be correlated clinically

Dr.ANSHU K.SHAR MBBS,MD MBBS,MD,PDCC MEDICAL TRANSCRIPTIONIST MBBS,DNB MEDICAL CONSULTANT RADIOTOGIST CONSULTANISRADIO LOCAL OPINION AND NOT THE CONSULTANISM RADIOEOGIST CONSULTANISM SERIE PROVIDENCE CONSULTANISM SERIES SER

Dr, MANJEET SEHRAWAT

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Dr. NEENA SIKKA

RAJNISH SHARMA

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## DEPARTMENT OF IMMUNOLOGY

**Patient Name** 

Mr. RAJESH KUMAR

MR No Age/Sex

Type

698635

40 Years / Male

**TPA/Corporate** 

OPD

MEDIWHEEL PVT LTD

**Bill Date** 

15/04/2024

Reporting Date:

15/04/2024

Sample ID

272380

Bill/Req. No. **Ref Doctor** 

25282375 Dr.RMO

Test	Result	Bio. Ref. Interval	Units	Method
	TH	IYROID PROFILE		

TRI-IODOTHYRONINE (T3) THYROXINE (T4)

0.91 9.8

0.60 - 1.81 5.01 - 12.45 ng/ml µg/dL Chemiluminescence

THYROID STIMULATING HORMONE

3.01

0.5-5.50 .

µIU/ml

Chemiluminescence

SPECIMEN TYPE

**SERUM** 

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 atient is thought to suffer from hyperthyroidism (overactive thyroid) or hypothyroidism (underactive thyroid), or to monitor the effective

suppression or hormone replacement therapy. It is also requested routinely in conditions linked to thyroid disease, such as atrial fibril ation 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 \*\*\*\*\*



Dr. JAY PRAKASH SINGH MBBS, MD (PATHOLOGY)

**Dr.ISHA RASTOGI** MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST

**USER NM** 

DINESH



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care providers



Patient Name : Mr. RAJESH KUMAR

MR No : 698635

Age/Sex : 40 Years / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date

15/04/2024

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Sample ID

272380

Bill/Req. No.

25282375

**Ref Doctor** 

Dr.RMO

Test Result

**BLOOD SUGAR FASTING** 

PLASMA GLUCOSE FASTING

97

60 - 110

mg/dl

Units

**GOD TRINDERS** 

Method

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

Blo. Ref. Interval





Dr.ISHA RASTOGI MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST



USER NM AJAY039

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Patient Name : Mr. RAJESH KUMAR

MR No : 698635

: 40 Years / Male

Type : Of

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TPA/Corporate : MEDIWHEEL PVT LTD

**Bill Date** 

15/04/2024

Reporting Date:

15/04/2024

Sample ID

272380

Bill/Req. No. Ref Doctor 25282375 Dr.RMO

Result

Blo. Ref. Interval

Units

Method

**BLOOD SUGAR 2 HR. PP** 

BLOOD SUGAR P.P.

Age/Sex

Test

120

80 - 150

mg/dl

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





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**DEPARTMENT OF PATHOLOGY** 

Patient Name : Mr. RAJESH KUMAR

MR No : 698635

Age/Sex : 40 Years / Male

Type - : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date

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Sample ID

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Bill/Req. No.

25282375

Ref Doctor

Dr.RMO

Test	Result	Blo. Ref. Interval	Units	Method
	URINE ROU	TINE AND MICROSCOP	PY	
PHYSICAL CHARACTERST	ics			
QUANTITY	30ml	5 - 100	ml	
COLOUR	Pale Yellow	Pale Yellow		Manual Method
TURBIDITY	Clear	clear		
SPECIFIC GRAVITY	1.015	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	Trace	NIL		
URINE BILIRUBIN	NIL	NIL		
GLUCOSE	NIL	NIL	mg/dL	GOD-POD/Benedicts
URINE KETONE -	NIL	NIL		SOD.
MICRO.EXAMINATION				
PUS CELL	4-5	0-5	cells/hpf	Microscopic
RED BLOOD CELLS	1-2	0-2	cells/hpf	
EPITHELIAL CELLS	1-3 ·	0-5	cells/hpf	
CASTS	NIL	NIL	/lpf	
CRYSTALS	NIL	NIL	/Lpf	
OTHER	NIL			
	414			LII - O
AMORPHOUS URINE	Absent			MicroScopy

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



Dr. JAY PRAKASH SINGH MBBS, MD (PATHOLOGY)

Dr.ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST



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DEPARTMENT OF HAEMOTOLOGY

**Patient Name** 

: Mr. RAJESH KUMAR

MR No

698635

Age/Sex

40 Years / Male

Туре

OPD

**TPA/Corporate** 

OPD

: MEDIWHEEL PVT LTD

**Bill Date** 

15/04/2024

Reporting Date:

15/04/2024

Sample ID

272380

Bill/Req. No.

25282375

**Ref Doctor** 

Dr.RMO

Test

Result

Bio. Ref. Interval

Units

Method

**BLOOD GROUPING AND RH FACTOR** 

**BLOOD GROUP** 

"A"RH POSITIVE

ABO/Rh (D) SLIDE

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





Dr.ISHA RASTOGI MD, MBBS MICROBIOLOGY CONSULTANT CLINICAL MICROBIOLOGIST



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the health care providers the health



#### **DEPARTMENT OF HAEMOTOLOGY**

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: Mr. RAJESH KUMAR

MR No

: 698635

Age/Sex

: 40 Years / Male

Type

OPD

**TPA/Corporate** 

OPD

: MEDIWHEEL PVT LTD

**Bill Date** 

15/04/2024

Reporting Date:

15/04/2024

Sample ID

272380

Bill/Req. No. :

25282375 Dr. BMO

_				Ref Doctor : Dr.RM	0
	Test ·	Result	Bio. Ref. Interval	Units	Method
			СВС		
	HAEMOGLOBIN	15.0	12 - 16	gm/dL	COLORIMETRY
	TOTAL LEUCOCYTE COUNT	5700 -	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	5.02	3.5 - 5.5	millions/µL	ELECTRICAL
	PACKED CELL VOLUME	43.3	35.0 - 50.0	%	ELECTRICAL
	MEAN CORPUSCULAR VOLUME	86.2	83 - 101	fL	ELECTRICAL
	MEAN CORPUSCULAR HAEMOGLOBIN	29.9	27 - 31	Picogrames	CALCULATED
	MEAN CORPUSCULAR HB CONC	34.6	33 - 37	g/dl	CALCULATED
	PLATELET COUNT	228	150 - 450	thou/µL	ELECTRICAL
	RDW	13.8	11.6 - 14.5	%	CALCULATED
	SAMPLE TYPE FOR C.B.C	Whole Blood EDTA			
_					

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





Dr. JAY PRAKASH SINGH MBBS, MD (PATHOLOGY) Dr.ISHA RASTOGI
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CONSULTANT CLINICAL MICROBIOLOGIST



USER NM

**GAURAV** 

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DEPARTMENT OF HAEMOTOLOGY

Patient Name : Mr. RAJESH KUMAR

MR No : 698635

Age/Sex : 40 Years / Male

Type : OPD

TPA/Corporate : MEDIWHEEL PVT LTD

Bill Date

15/04/2024

Reporting Date:

15/04/2024

Sample ID

272380 25282375

Bill/Req. No. Ref Doctor

Dr.RMO

Test . Result Bio. Ref. Interval Units

**ESR (WESTERGREN)** 

E.S.R .1ST HRS.

06

0 - 20

mm/Hr.

Westergren

Method

Method: (Capillary photometry)

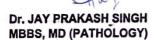
Note: 1. C-Reactive Protein (CRP) is the recommended test in acute inflammatory conditions.

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 \*\*\*\*\*





Dr.ISHA RASTOGI
MD, MBBS MICROBIOLOGY
CONSULTANT CLINICAL MICROBIOLOGIST

THE STATE OF STATE OF

USER NM

**GAURAV** 

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DEPARTMENT OF MICROBIOLOGY

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MR No

698635

Age/Sex

40 Years / Male

Type

OPD

**TPA/Corporate** 

MEDIWHEEL PVT LTD

**Bill Date** 

15/04/2024

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25282375

**Ref Doctor** 

Dr.RMO

Test

Result

Bio. Ref. Interval

Units

Method

Aerobic cultu

**URINE C/S** 

NAME OF SPECIMEN

**ORGANISM IDENTIFIED** 

Urine (Uncentrifuged)

NO ORGANISM

**GROWN IN CULTURE** AFTER 48 HRS OF **INCUBATION AT 37 C** 

DEGREE.

Method: .

Note: URINE CULTURE:

Presence of >105 cfu/ml (100000) in midstream urine sample is considered clinically significant. However in symptomati compromised or diabetic patients & patients with indwelling catheters, even a smaller count of bacteria may signify infec 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 (This is only professional opinion and not the diagnosis, please correlate clinically)

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**Patient Name** 

Mr. RAJESH KUMAR

MR No

698635

Age/Sex

: 40 Years / Male

Type

: OPD

TPA/Corporate : MEDIWHEEL PVT LTD

**BIII Date** 

15/04/2024

Reporting Date:

15/04/2024

Sample ID

272380

BIII/Req. No. :

25282375

Dr RMO

esuit LFT (LIVER I	Bio. Ref. Interval FUNCTION TEST)	Units	Method
LFT (LIVER I	FUNCTION TEST)		
8	0 - 1.2	mg/dL	DIAZO
3	0 - 0.4	mg/dL	DIAZO
5	0.10 - 0.6	mg/dL	CALCULATED
	0 - 45	U/L	IFCC WITHOUT
	0 - 45	U/L	IFCC WITHOUT
Ĩ	30 - 170	IU/L	MODIFIED IFCC
4	6.4 - 8.0	g/dL	BIURET
3	3.3 - 5.5	g/dL	BCG DYE
в <i>L</i>	2.3 - 4.5	g/dL	CALCULATED
<b>р</b>	1.1 - 2.2		CALCULATED
	4 3 <b>5</b> <i>L</i> <b>0</b> <i>H</i>	6.4 - 8.0 3.3 - 5.5 4. 2.3 - 4.5 4. 1.1 - 2.2	4 6.4 - 8.0 g/dL 3 3.3 - 5.5 g/dL 5 L 2.3 - 4.5 g/dL

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



Dr. JAY PRAKASH SINGH MBBS, MD (PATHOLOGY)

**Dr.ISHA RASTOGI** MD, MBBS MICROBIOLOGY **CONSULTANT CLINICAL MICROBIOLOGIST** 



**USER NM** 

AJAY039

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**Patient Name** 

: Mr. RAJESH KUMAR

MR No

698635

Age/Sex

40 Years / Male

Type

**TPA/Corporate** 

: OPD

: MEDIWHEEL PVT LTD

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15/04/2024

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272380

Bill/Req. No.

25282375

			Ref Doctor	: Dr.RMO
Test	Result	Blo. Ref. Interval	Units	Method
•	KFT	(RENAL PROFILE)		
KFT				
SERUM UREA	23	10 - 45	mg/dL	
SERUM CREATININE	0.8	0.4 - 1.4	mg/dL	MODIFIED JAFFES
SERUM URIC ACID	6.1	2.5 - 7.0	mg/dL	URICASE
SERUM SODIUM	137	135 - 150	mmol/L	ISE
SERUM POTASSIUM	4.0	3.5 - 5.5	mmol/L	ISE
SERUM CALCIUM	8.7	8.5 - 10.5	mg/dL	ARSENAZO III
SERUM PHOSPHORUS	2.5	2.5 - 4.5	mg/dL	AMMONIUM
SAMPLE TYPE:	SERUM			

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



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**Patient Name** : Mr. RAJESH KUMAR

MR No 698635

Age/Sex 40 Years / Male

OPD Type

: MEDIWHEEL PVT LTD TPA/Corporate

**Bill Date** 15/04/2024

Reporting Date: 15/04/2024

Sample ID 272380

25282375 Bill/Reg. No.

			Ref Doctor	:	Dr.RMO
Test	Result	Bio. Ref. interval	Units		Method
		LIPID PROFILE			
LIPID PROFILE					
TOTAL CHOLESTEROL	144	0 - 250	mg/dL		CHOD -Trinder
SERUM TRIGLYCERIDES	116	60 - 165	mg/dl		GPO-TRINDER
HDL-CHOLESTEROL	52	30 - 70	mg/dl		DIRECT
VLDL CHOLESTEROL	23.2	6 - 32	mg/dL		calculated
LDL	68.8	50 - 135	mg/dl		calculated
LDL CHOLESTEROL/HDL RATIO	1.32	1.0 - 3.0	mg/dL		calculated
TOTAL CHOLESTEROL/HDL RATIO	2.77	2.0 - 5.0	mg/dl		calculated
SAMPLE TYPE:	SERUM				

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

Step 1 - Determine lipoprotein levelsobtain 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** 

<200 200-239 Desirable

Borderline high

>240

High

**HDL Cholesterol** 

<40

Low

>60

High

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



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DEPARTMENT OF IMMUNOLOGY

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Mr. RAJESH KUMAR

MR No

Type

698635

Age/Sex

40 Years / Male

OPD

**TPA/Corporate** 

MEDIWHEEL PVT LTD

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Units

15/04/2024

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272380

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**Ref Doctor** 

Dr.RMO

Test Result

**PSA TOTAL** 

0.57 - 4.0

PROSTATE SPECIFIC ANTIGEN(PSA)

0.50

ng/ml

Chemiluminscence

Method

SPECIMEN TYPE

SERUM

Method: chemiluminescent immunoassay

Note: Clinical Use: -

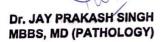
An aid in the early detection of Prostate cancer in Male. Follow up and amazement of Prostate cancer patients. Detect metastatic or page 1 rsistent disease in patients following surgical or medicaltreatment of Prostate cancer

Blo. Ref. Interval

False negative / positive results are observed in patients receiving mousemonoclonal antibodies for diagnosis or therapy. PSA levels may appear consistently elevated / depressed due to theinterference by heterophilic antibodies & nonspecific protein binding. PSA va ues regardless of levels should not be interpreted as absolute evidenceof the presence or absence of disease. All values should be c rrelated withclinical findings and results of other investigations.

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





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DINESH

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Ph.: 0124-4900000 (100 Lines), Toll Free No. : 1800-102-6767, Mob.: 62 62 82 82 35, Email: customercare@packhospital.in





Sental Routine beach checkup of E:- Plague ++ Calculus +> Etains ++

Vitals:

Hight-175 c.m. 175 kg/H/O Present Illness:

Cheif Complaints:

Investigation: Drug Allergies: (if any)

Treatment:

Adv. Scally & Parishly.

Gurgaon

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



NAME	MR. RAJESH KUMAR		_	
Age Sex	40 Years / Male	DATE		15 / 3 / 2024
PERFORMED BY		UHID	:	698635
	 Dr. JOGINDER S. DUHAN	BILL NO.		25282375

# 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 / Clacification / Prolapse / Vegetation / Doming.

Normal / Abnormal

Tricuspid Stenosis: Present / Absent.

Tricuspid Regurgitation; Absent / Normal / Mild /Trace / Moderate / Severe.

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 / Trivial



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Measureme	<u>ents</u>		Normal Values	Measurem	ent	<u>s</u>	Normal Value
IVSD	:	1.0cm	(0.6-1.1cm)	LA	:	2.7cm	(1.9-4.0cm)
LVID	:	5.1cm	(3.7-5.6cm)	LVIDs	:	3.3cm	
LVPW	:	1.0cm		<b>AORTA</b>	:	2.3cm	(2.0-3.7cm)
EF	:	60-65%	(55% - 80%)	IVSmotion	:		Normal / Flat / Paradoxical
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 / Enlarged / Clear / Thrombus / Hypertrophied/ Dilated.

PERICARDIUM Normal / Thickening / Calcification / Effusion.

# **SUMMARY:-**

- All cardiac chambers dimensions are with in normal limits.
- LVEF- 60-65%
- No RWMA
- NORMAL LV FUNCTION
- NO 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.
- Tachycardia noted during study

**COMMENTS**:- Normal Biventricular Function

Please correlate clinically

DR.JOGINDER S. DUHAN

M.D.(Medicine) D.M (Cardiology).



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