



**BHAILAL AMIN
GENERAL HOSPITAL**



CONCLUSION OF HEALTH CHECKUP

ECU Number	: 2860	MR Number	: 23204873	Patient Name	: SUDHA SINGH
Age	: 40	Sex	: Female	Height	: 159
Weight	: 65	Ideal Weight	: 58	BMI	: 25.71
Date	: 14/04/2023				

Dr. Manish Mittal

Internal Medicine

Note : General Physical Examination & routine Investigations included in the Health Checkup have certain limitations and may not be able to detect all the latent and asymptomatic diseases.



**BHAILAL AMIN
GENERAL HOSPITAL**



ECU Number : 2860 MR Number : 23204873 Patient Name: SUDHA SINGH
Age : 40 Sex : Female Height : 159
Weight : 65 Ideal Weight : 58 BMI : 25.71
Date : 14/04/2023

Past H/O : H/O:- LYMPH NODE DISSECTION :- 2010
 H/O :- THYROID ON MEDICATION SINCE 3 YRS

Present H/O : C/O:- RIGHT WRIST BONE PERFORMANCE :- 3 YRS

Family H/O : MOTHER:- DIABETES

Habits : NO HABITS
Gen.Exam. : G.C.GOOD
B.P : 150/100 mm Hg
Pulse : 98/MIN REG
Others : SPO2-98%
C.V.S : NAD
R.S. : NAD
Abdomen : NP
Spleen : NP
Skin : NAD
C.N.S : NAD
Advice :



H-2015-0297



MC-3004



E-2021-0037



ECU Number : 2860

Age : 40

Weight : 65

Date : 14/04/2023

MR Number : 23204873

Sex : Female

Ideal Weight : 58

Patient Name: SUDHA SINGH

Height : 159

BMI : 25.71

Ophthalmic Check Up :

Right

Left

Ext Exam

NIL

Vision Without Glasses

NA

NA

Vision With Glasses

6/6 N.5

6/6 N.5

Final Correction

-0.75 SPH I 180 ADD+1.00 SPH

NA

Fundus

NORMAL

Colour Vision

NORMAL

Advice

NIL

Orthopedic Check Up :

Ortho Consultation

Ortho Advice

ENT Check Up :

Ear

Nose

Throat

Hearing Test

ENT Advice

General Surgery Check Up :

General Surgery

Abdominal Lump

Hernia

External Genitals

PVR

Proctoscopy

Any Other

Surgical Advice



ECU Number : 2860

Age : 40

Weight : 65

Date : 14/04/2023

MR Number : 23204873

Sex : Female

Ideal Weight : 58

Patient Name: SUDHA SINGH

Height : 159

BMI : 25.71

Gynaec Check Up :

OBSTETRIC HISTORY G2 P2 2FTND L AND W

MENSTRUAL HISTORY

PRESENT MENSTRUAL CYCLE LMP=01/04/2023

PAST MENSTRUAL CYCLE

CHIEF COMPLAINTS

PA SOFT

PS LAX VAg ORIFICE

PV NAD

BREAST EXAMINATION RIGHT NORMAL

BREAST EXAMINATION LEFT NORMAL

PAPSMEAR TAKEN

BMD

MAMMOGRAPHY

ADVICE REGULAR BSE, INVEST:- FOR SUI



Dietary Assesment

ECU Number : 2860 MR Number : 23204873 Patient Name: SUDHA SINGH
Age : 40 Sex : Female Height : 159
Weight : 65 Ideal Weight : 58 BMI : 25.71

Date : 14/04/2023

Body Type : Normal / Underweight / Overweight
Diet History : Vegetarian / Eggetarian / Mixed

Frequency of consuming fried food : / Day / Week or occasional

Frequency of consuming Sweets : / Day / or occasional

Frequency of consuming outside food : / Day / Week or occasional

Amount of water consumed / day : Glasses / liters

Life style assessment :

Physical activity : Active / moderate / Sedentary / Nil

Alcohol intake : Yes / No

Smoking : Yes / No

Allergic to any food : Yes / No

Are you stressed out ? : Yes / No

Do you travel a lot ? : Yes / No

General diet instructions :

Have small frequent meals.

Avoid fatty products like oil, ghee, butter, cheese.

Take salt restricted diet and avoid table salt.

Consume fibrous food regularly like whole grains, Daliya, Oats, Bajra, Flex seeds, Pulses, Fruits and Salads.

Keep changing your cooking oil every three months.

Avoid Maida, Starchy foods and Bakery products.

Consume 1-2 servings of all fruits and vegetables, For Diabetic patients avoid Mango, Chikoo, Banana, Grapes and Custurd apple

Dring 3 to 4 liters (12 - 14 glass) of water daily.

Eat Beetroots, Figs, Almond, Walnut, Dates, Leafy vegetables, roasted Channa and Jeggary (Gur) for Heamoglobin in case of diabetic patient avoid Rasins, Dates and Jeggary

Drink green Tea or black Coffee once in a day.

Do brisk walking daily.



Patient Name : Mrs. SUDHA SINGH Type : OPD
 Gender / Age : Female / 40 Years 2 Months 14 Days Request No. : 122741
 MR No / Bill No. : 23204873 / 241004295 Request Date : 14/04/2023 09:35 AM
 Consultant : Dr. Manish Mittal Collection Date : 14/04/2023 09:54 AM
 Location : OPD Approval Date : 14/04/2023 03:08 PM

CBC + ESR

Test	Result	Units	Biological Ref. Range
Haemoglobin.			
Haemoglobin	11.6	gm/dL	12 - 15
Red Blood Cell Count (T-RBC)	4.42	mill/cmm	3.8 - 4.8
Hematocrit (HCT)	36.1	%	36 - 46
Mean Corpuscular Volume (MCV)	81.7	fl	83 - 101
Mean Corpuscular Haemoglobin (MCH)	26.2	pg	27 - 32
MCH Concentration (MCHC)	32.1	%	31.5 - 34.5
Red Cell Distribution Width (RDW-CV)	15.4	%	11.6 - 14
Red Cell Distribution Width (RDW-SD)	46.8	fl	39 - 46
Total Leucocyte Count (TLC)			
Total Leucocyte Count (TLC)	9.15	thou/cmm	4 - 10
Differential Leucocyte Count			
Polymorphs	67	%	40 - 80
Lymphocytes	27	%	20 - 40
Eosinophils	1	%	1 - 6
Monocytes	5	%	2 - 10
Basophils	0	%	0 - 2
Polymorphs (Abs. Value)	6.19	thou/cmm	2 - 7
Lymphocytes (Abs. Value)	2.47	thou/cmm	1 - 3
Eosinophils (Abs. Value)	0.07	thou/cmm	0.2 - 0.5
Monocytes (Abs. Value)	0.37	thou/cmm	0.2 - 1
Basophils (Abs. Value)	0.05	thou/cmm	0.02 - 0.1
Immature Granulocytes	0.2	%	1 - 3 : Borderline > 3 : Significant
Platelet Count			
Platelet Count	174	thou/cmm	150 - 410
Smear evaluation	Adequate		
Remarks	Few large platelets seen.		
ESR	7	mm/1 hr	0 - 12

Test Results are dependent on a number of variables & technical limitations. Hence, it is advised to correlate with clinical findings and other related investigations before any firm opinion is made. Recheck / Retest may be suggested.

365 Days / 24 Hours Laboratory Services

Home Collection Facility Available
(Mon To Sat 8:00 am to 5:00 pm)



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GENERAL HOSPITAL

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DEPARTMENT OF LABORATORY MEDICINE

Patient Name	: Mrs. SUDHA SINGH	Type	: OPD
Gender / Age	: Female / 40 Years 2 Months 14 Days	Request No.	: 122741
MR No / Bill No.	: 23204873 / 241004295	Request Date	: 14/04/2023 09:35 AM
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CBC + ESR

Immature Granulocyte (IG) count is a useful early marker of infection or inflammation, even when other markers are normal. It is an early and rapid discrimination of bacterial from viral infections. It is also increased in patients on steroid therapy / chemotherapy or haematological malignancy. High IG is always pathological; except in pregnancy and neonates of < 7 days.
Method : HB by Non-Cyanide Hemoglobin analysis method. HCT by RBC pulse height detection method. RBC, TLC & PLC are by Particle Count by Electrical Impedance in Cell Counter. Optical Platelets by Fluorescent + Laser Technology. MCV, MCH, MCHC, RDW (CV & SD) are calculated parameter. DLC by Flowcytometry method using semi-conductor Laser+Smear verification. ESR on Ves metic 20, comparable to Westergrens method and in accordance to ICSH reference method.

--- End of Report ---

Dr. Sejal Odedra
M.D.Pathology

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Consultant	: Dr. Manish Mittal	Collection Date	: 14/04/2023 09:54 AM
Location	: OPD	Approval Date	: 14/04/2023 03:24 PM

Haematology

<u>Test</u>	<u>Result</u>	<u>Units</u>	<u>Biological Ref. Range</u>
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Blood Group

ABO system	O
Rh system.	Positive

By Gel Technology / Tube Agglutination Method
Note :

This blood group has been done with new sensitive Gel Technology using both Forward and Reverse Grouping Card with Autocontrol. This method checks group both on Red blood cells and in Serum for "ABO" group.

----- End of Report -----

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M.D.Pathology**

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Fasting Plasma Glucose

Test	Result	Units	Biological Ref. Range
Fasting Plasma Glucose			
Fasting Plasma Glucose	95	mg/dL	70 - 110
Post Prandial 2 Hr. Plasma Glucose	108	mg/dL	70 - 140

By Hexokinase method on RXL Dade Dimesion

---- End of Report ----

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M.D. Pathology

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HbA1c (Glycosylated Hb)

Test	Result	Units	Biological Ref. Range
HbA1c (Glycosylated Hb)			
Glycosylated Heamoglobin (HbA1c)	5.6	%	
estimated Average Glucose (e AG) *	114.02	mg/dL	

(Method:

By Automated HPLC analyser on D-10 Biorad. NGSP Certified, US-FDA approved, Traceable to IFCC reference method.

* Calculated valued for past 60 days, derived from HbA1c %, based on formula recommended by the A1c - Derived Average Glucose study from ADA and EASD funded The ADAG trial.

Guidelines for Interpretation:

Indicated Glycemic control of previous 2-3 months

HbA1c%	e AG (mg/dl)	Glycemic control
> 8	> 183	Action suggested...High risk of developing long-term complications. Action suggested, depends on individual patient circumstances
7 - 8	154 - 183	Good
< 7	< 154	Goal...Some danger of hypoglycemic reaction in type I Diabetics. Some Glucose intolerant individuals and Sub-Clinical diabetics may demonstrate (elevated) HbA1c in this area.
6 - 7	126 - 154	Near Normal
< 6	< 126	Nondiabetic level)

---- End of Report ----

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Complete Lipid Profile

Test	Result	Units	Biological Ref. Range
Complete Lipid Profile			
Appearance	Clear		
Triglycerides (By Lipase / Glycerol dehydrogenase on RXL Dade Dimension)	201	mg/dL	1 - 150
			< 150 Normal 150-199 Borderline High 200-499 High > 499 Very High
Total Cholesterol (By enzymatic colorimetric method on RXL Dade Dimension)	167	mg/dL	1 - 200
			<200 mg/dL - Desirable 200-239 mg/dL - Borderline High > 239 mg/dL - High
HDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)	41	mg/dL	40 - 60
			< 40 Low > 60 High
Non HDL Cholesterol (calculated) (Non- HDL Cholesterol)	126	mg/dL	1 - 130
			< 130 Desirable 139-159 Borderline High 160-189 High > 191 Very High
LDL Cholesterol (By Direct homogenous technique, modified enzymatic non-immunological method on RXL Dade Dimension)	90	mg/dL	1 - 100
			< 100 Optimal 100-129 Near / above optimal 130-159 Borderline High 160-189 High > 189 Very High
VLDL Cholesterol (calculated)	40.2	mg/dL	12 - 30
LDL Ch. / HDL Ch. Ratio	2.2		2.1 - 3.5
T. Ch./HDL Ch. Ratio (Recent NECP / ATP III Guidelines / Classification (mg/dl) :)	4.07		3.5 - 5

---- End of Report ----

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Liver Function Test (LFT)

Test	Result	Units	Biological Ref. Range
Bilirubin			
Bilirubin - Total	0.53	mg/dL	0 - 1
Bilirubin - Direct	0.10	mg/dL	0 - 0.3
Bilirubin - Indirect	0.43	mg/dL	0 - 0.7
<i>(By Diazotized sulfanilic acid on RXL Dade Dimension.)</i>			
Aspartate Aminotransferase (SGOT/AST)	30	U/L	13 - 35
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alanine Aminotransferase (SGPT/ALT)	22	U/L	14 - 59
<i>(By IFCC UV kinetic method on RXL Dade Dimension.)</i>			
Alkaline Phosphatase	84	U/L	42 - 98
<i>(BY PNPP AMP method on RXL Dade Dimension.)</i>			
Gamma Glutamyl Transferase (GGT)	21	U/L	5 - 55
<i>(By IFCC method on RXL Dade Dimension.)</i>			
Total Protein			
Total Proteins	8.23	gm/dL	6.4 - 8.2
Albumin	4.27	gm/dL	3.4 - 5
Globulin	3.96	gm/dL	3 - 3.2
A : G Ratio	1.08		1.1 - 1.6
<i>(By Biuret endpoint and Bromocresol purple method on RXL Dade Dimesion.)</i>			

---- End of Report ----

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 Gender / Age : Female / 40 Years 2 Months 14 Days
 MR No / Bill No. : 23204873 / 241004295
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 122741
 Request Date : 14/04/2023 09:35 AM
 Collection Date : 14/04/2023 09:54 AM
 Approval Date : 14/04/2023 01:36 PM

Renal Function Test (RFT)

Test	Result	Units	Biological Ref. Range
Urea (By Urease Kinetic method on RXL Dade Dimension)	12	mg/dL	10 - 45
Creatinine (By Modified Kinetic Jaffe Technique)	0.88	mg/dL	0.6 - 1.1
Estimate Glomerular Filtration rate (Ref. range : > 60 ml/min for adults between age group of 18 to 70 yrs. EGFR Calculated by IDMS Traceable MDRD Study equation. Reporting of eGFR can help facilitate early detection of CKD. By Modified Kinetic Jaffe Technique)	More than 60		
Uric acid (By Uricase / Catalase method on RXL Siemens)	5.4	mg/dL	2.2 - 5.8

— End of Report —

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 Consultant : Dr. Manish Mittal
 Location : OPD

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 Approval Date : 14/04/2023 01:35 PM

Thyroid Hormone Study

Test	Result	Units	Biological Ref. Range
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Triiodothyronine (T3)	1.18	ng/ml	
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(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (ng/ml)

1 - 3 days : 0.1 - 7.4
 1-11 months : 0.1 - 2.45
 1-5 years : 0.1 - 2.7
 6-10 years : 0.9 - 2.4
 11-15 years : 0.8 - 2.1
 16-20 years : 0.8 - 2.1
 Adults (20 - 50 years) : 0.7 - 2.0
 Adults (> 50 years) : 0.4 - 1.8
 Pregnancy (in last 5 months) : 1.2 - 2.5

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroxine (T4)	9.16	mcg/dL	
----------------	------	--------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (mcg/dL)

1 - 3 days : 11.8 - 22.6
 1 - 2 weeks : 9.8 - 16.6
 1 - 4 months : 7.2 - 14.4
 4 - 12 months : 7.8 - 16.5
 1-5 years : 7.3 - 15.0
 5 - 10 years : 6.4 - 13.3
 10 - 20 years : 5.6 - 11.7
 Adults / male : 4.6 - 10.5
 Adults / female : 5.5 - 11.0
 Adults (> 60 years) : 5.0 - 10.7

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

Thyroid Stimulating Hormone (US-TSH)	1.25	microlU/ml	
--------------------------------------	------	------------	--

(Done by 4th generation electrochemiluminescence based method on automated immunoassay / Cobas e 411.)

Reference interval (microlU/ml)

Infants (1-4 days) : 1.0 - 39
 2-20 weeks : 1.7 - 9.1
 5 months - 20 years : 0.7 - 6.4
 Adults (21 - 54 years) : 0.4 - 4.2
 Adults (> 55 years) : 0.5 - 8.9

Pregnancy :

1st trimester : 0.3 - 4.5
 2nd trimester : 0.5 - 4.6
 3rd trimester : 0.8 - 5.2

(Reference : Tietz - Clinical guide to laboratory test, 4th edition))

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— End of Report —

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M.D.Pathology

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Location : OPD Approval Date : 14/04/2023 04:44 PM

Pap Smear

Test	Result	Units	Biological Ref. Range
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Pap Smear

Pap Smear Screening Report / Cervico-Vaginal Cytology...

Cyto No : P/707 /23

Received at 02.00 pm.

Clinical Details : No complain

P/V findings : Cx. / Vg. - NAD.

LMP : 7/4/2023

TBS Report / Impression :

* Satisfactory for evaluation; transformation zone components identified.

* Mild inflammatory cellularity (Neutrophils rich).

* No epithelial cell abnormality favouring squamous intraepithelial lesion or frank malignancy (NILM).

Note / Method :

The material received in LBC container, cytosmear was stained by rapid pap method and reported with due consideration to The Bethesda system (Modified 2014)

---- End of Report ----

Dr. Sejal Odedra
M.D.Pathology

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 Consultant : Dr. Manish Mittal Collection Date : 14/04/2023 09:54 AM
 Location : OPD Approval Date : 14/04/2023 03:07 PM

Urine routine analysis (Auto)

Test	Result	Units	Biological Ref. Range
Physical Examination			
Quantity	30	mL	
Colour	Pale Yellow		
Appearance	Clear		
Chemical Examination (By Reagent strip method)			
pH	6.5		
Specific Gravity	<1.005		
Protein	Negative	gm/dL	0 - 5
Glucose	Negative	mg/dL	0 - 5
Ketones	Negative		0 - 5
Bilirubin	Negative		Negative
Urobilinogen	Negative		Negative (upto 1)
Blood	Negative		Negative
Leucocytes	Negative		Negative
Nitrite	Negative		Negative
Microscopic Examination (by Microscopy after Centrifugation at 2000 rpm for 10 min or on fully automated Sysmex urine sedimentation analyzer UF4000)			
Red Blood Cells	0 - 1	/hpf	0 - 2
Leucocytes	0 - 1	/hpf	0 - 5
Epithelial Cells	1 - 5	/hpf	0 - 5
Casts	Nil	/lpf	Nil
Crystals	Nil	/hpf	Nil
Mucus	Absent	/hpf	Absent
Organism	Absent		

---- End of Report ----

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M.D.Pathology



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DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23204873 Report Date : 14/04/2023
Request No. : 190061026 14/04/2023 9:35 AM
Patient Name : Mrs. SUDHA SINGH
Gender / Age : Female / 40 Years 2 Months 14 Days

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

X-Ray Chest AP

Both lung fields are clear.
Both costophrenic sinuses appear clear.
Heart size is normal.
Hilar shadows show no obvious abnormality.
Aorta is normal.
Left side cervical rib.

• ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 • NOT VALID FOR MEDICO-LEGAL PURPOSES
 • CLINICAL CORRELATION RECOMMENDED

Dr. Priyanka Patel, MD
Consultant Radiologist





DEPARTMENT OF DIAGNOSTIC RADIOLOGY

ADVANCED DIGITAL SOLUTIONS

- Computer Radiography
- Ultra Sensitive Colour Doppler
- Ultra High Resolution Sonography
- Multi-Detector CT Scan
- Mammography
- Interventional Radiology
- Digital Subtraction Angiography
- Foetal Echocardiography
- Echocardiography

Patient No. : 23204873 Report Date : 14/04/2023
Request No. : 190060966 14/04/2023 9.35 AM
Patient Name : Mrs. SUDHA SINGH
Gender / Age : Female / 40 Years 2 Months 14 Days

USG : Abdomen (Excluding Pelvis) Or Upper Abdomen

Liver is normal in size and echopattern. No mass lesion identified. The hepatic veins are clear and patent. PV patent. No dilated IHBR.
Gall bladder is well distended and shows no obvious abnormality. Common bile duct measures 4 mm in diameter.
Pancreas shows no obvious abnormality. Tail obscured.
Spleen is normal size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis or mass lesion seen. **Left kidney shows lower pole and Right kidney shows upper pole tiny concretion.**

	RIGHT	LEFT
Renal length :	90 mm.	100 mm.
A.P. :	37 mm.	46 mm.

Uterus is anteverted, normal in size and echo pattern. Endometrium thickness is about 7 mm . **Posterior wall uterine fibroid measures around 10x9mm seen in uterus.**

Uterine length : 93 mm.
A.P. : 46 mm.

Both ovaries reveal small follicles.
Right ovary measures 30mm x 16mm. in size.
Left ovary measures 30mm x 23mm. in size.

Urinary bladder is Minimally distended and appears normal.
No ascites.

COMMENT:

Bilateral renal tiny concretion.
Small posterior wall uterine fibroid .

Kindly correlate clinically

Dr. Priyanka Patel, MD
Consultant Radiologist



* ULTRA SONOGRAPHY CANNOT DETECT ALL ABNORMALITIES
 * NOT VALID FOR MEDICO-LEGAL PURPOSES
 * CLINICAL CORRELATION RECOMMENDED

Patient No. : 23204873 Report Date : 14/04/2023
Request No. : 190061046 14/04/2023 9.35 AM

Patient Name : Mrs. SUDHA SINGH

Gender / Age : Female / 40 Years 2 Months 14 Days

Echo Color Doppler

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, TRACE TR, PASP BY TR JET=15 MMHG
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=60%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL
COLOUR/DOPPLER FLOW MAPPING : No diastolic dysfunction

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=60%
4. NORMAL VALVES
5. NO DIASTOLIC DYSFUNCTION
6. TRACE TR, NO PULMONARY HYPERTENSION , (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

A
Dr. V C CHAUHAN
Consultant Cardiologist

Name: **Sudha Singh**
Patient ID: **23204873**

Date: **14/04/2023 10:55:50**
Standard 12-Lead

Date of birth: **Female**
Gender: **Female**
Height: **Undefined**
Weight: **Undefined**
Ethnicity: **Unknown**
Facemaker: **Unknown**
Indication: **Remark**

Visit ID: **Room**
Medication: **Order ID**
Ord. prov: **Ord. prov**

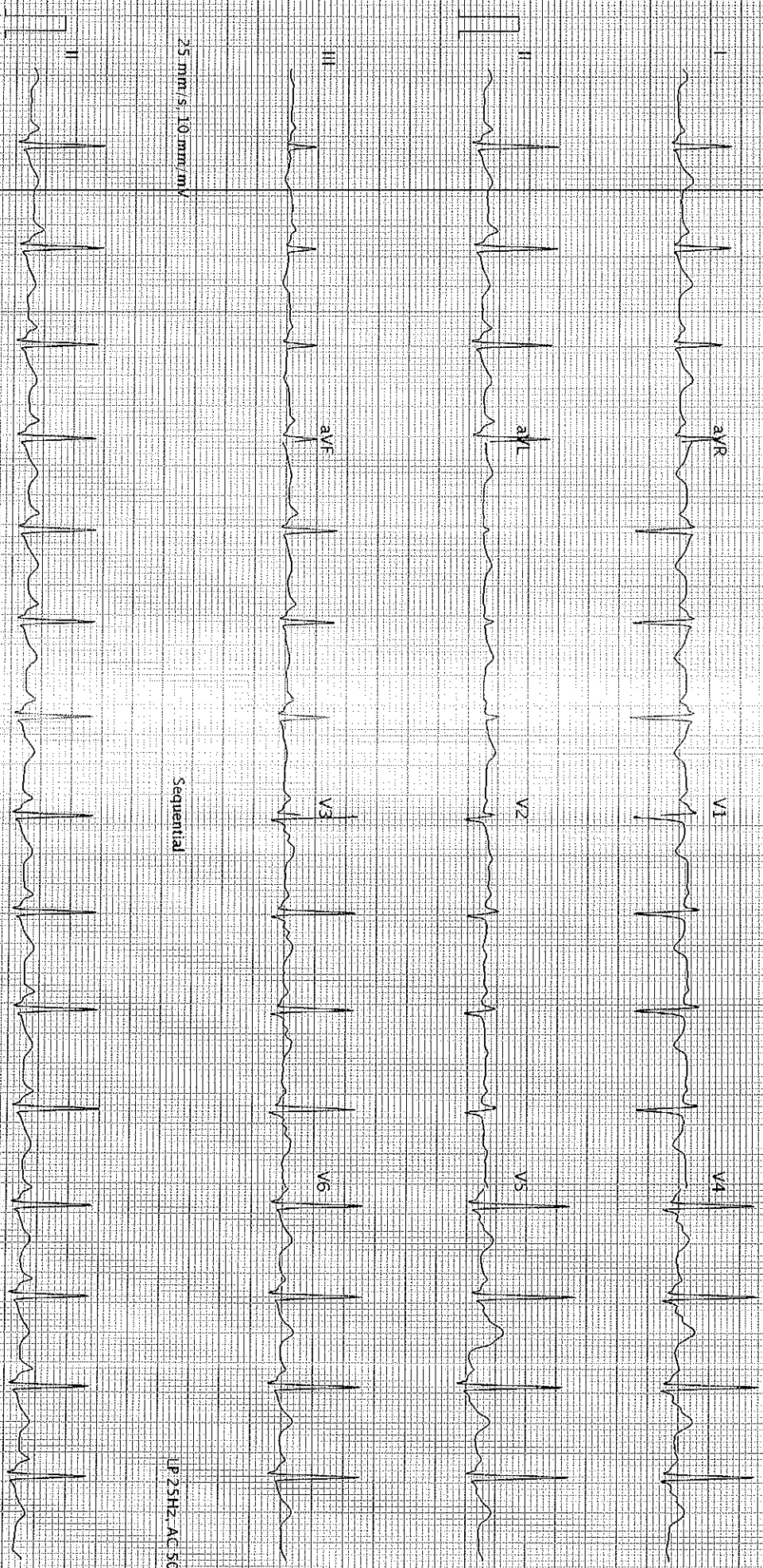
HR: **94 bpm**
P axis: **48°**
QRS axis: **51°**
T axis: **16°**

RR: **636 ms**
P: **100 ms**
PR: **131 ms**
QRS: **82 ms**
QT: **363 ms**
QTcB: **455 ms**

Sinus rhythm
Normal electrical axis
Normal ECG
Unconfirmed report

POUN

Normal



25 mm/s, 10 mm/mV

Sequential

LP 25HZ, AC 50HZ

AT-102 G2 I 2.0 (U080 011030)

Printed on 14/04/2023 10:56:03

LP 25HZ, AC 50HZ

SCHILLER

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