



**BHAILAL AMIN
GENERAL HOSPITAL**

ESTD. 1964



CONCLUSION OF HEALTH CHECKUP

ECU Number : 9907
Age : 30
Weight : 58.8
Date : 06/03/2024

MR Number : 23230013
Sex : Female
Ideal Weight : 55

Patient Name: NAZREEN FATMA
Height : 155
BMI : 24.47

Medical Opinion

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.





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Past H/O : K/C/O RA

Present H/O : NO MEDICAL COMPLAIN AT PRESENT .

Family H/O : NO F/H/O ANY MAJOR ILLNESS.

Habits : NO

Gen.Exam. : G.C.GOOD

B.P : 116/80

Pulse : 74

Others : SPO2 99 %

C.V.S : NAD

R.S. : NAD

Abdomen : NP

Spleen : NP

Skin : NAD

C.N.S : NAD

Advice :





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Ophthalmic Check Up :

| | | |
|------------------------|--------|--------|
| | Right | Left |
| Ext Exam | | NORMAL |
| Vision Without Glasses | 6/6 | 6/6 |
| Vision With Glasses | N.6 | N.6 |
| Optical Correction | - | - |
| 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





Patient Name : Ms. NAZREEN FATMA
 Gender/ Age : Female / 30 Years 1 Months 7 Days
 MR No/ Bill No. : 23230013 / 242087614
 Consultant : Dr. Manish Mittal
 Location : OPD

Type : OPD
 Request No. : 205145
 Request Date : 06/03/2024 09:14 AM
 Collection Date : 06/03/2024 09:20 AM
 Approval Date : 06/03/2024 02:46 PM

CBC + ESR

| Test | Result | Units | Biological Ref. Range |
|--------------------------------------|----------------------------|----------|---|
| Haemoglobin. | | | |
| Haemoglobin | 10.6 | gm/dL | 12 - 15 |
| Red Blood Cell Count (T-RBC) | 4.50 | mill/cmm | 3.8 - 4.8 |
| Hematocrit (HCT) | 35.9 | % | 36 - 46 |
| Mean Corpuscular Volume (MCV) | 79.8 | fl | 83 - 101 |
| Mean Corpuscular Haemoglobin (MCH) | 23.6 | pg | 27 - 32 |
| MCH Concentration (MCHC) | 29.5 | % | 31.5 - 34.5 |
| Red Cell Distribution Width (RDW-CV) | 15.6 | % | 11.6 - 14 |
| Red Cell Distribution Width (RDW-SD) | 45.1 | fl | 39 - 46 |
| Total Leucocyte Count (TLC) | | | |
| Total Leucocyte Count (TLC) | 5.82 | thou/cmm | 4 - 10 |
| Differential Leucocyte Count | | | |
| Polymorphs | 62 | % | 40 - 80 |
| Lymphocytes | 28 | % | 20 - 40 |
| Eosinophils | 4 | % | 1 - 6 |
| Monocytes | 6 | % | 2 - 10 |
| Basophils | 0 | % | 0 - 2 |
| Polymorphs (Abs. Value) | 3.58 | thou/cmm | 2 - 7 |
| Lymphocytes (Abs. Value) | 1.62 | thou/cmm | 1 - 3 |
| Eosinophils (Abs. Value) | 0.21 | thou/cmm | 0.2 - 0.5 |
| Monocytes (Abs. Value) | 0.35 | thou/cmm | 0.2 - 1 |
| Basophils (Abs. Value) | 0.06 | thou/cmm | 0.02 - 0.1 |
| Immature Granulocytes | 0.3 | % | 1 - 3 : Borderline > 3 : Significant |
| Platelet Count | | | |
| Platelet Count | 200 | thou/cmm | 150 - 410 |
| Smear evaluation | Adequate | | |
| Remarks | Few large platelets seen . | | |
| ESR | 39 | 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 requested.



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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 by Fluorescent flow cytometry using a semi-conductor laser and hydrodynamic focusing in dedicated channels. 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 ISL-30, comparable to Westergrens method and in accordance to ICSH reference method.

— End of Report —

Dr. Ameer Soni
MD (Path)



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Approval Date : 06/03/2024 03:32 PM

Haematology

| Test | Result | Units | Biological Ref. Range |
|--------------------|----------|-------|-----------------------|
| 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 check's group both on Red blood cells and in Serum for "ABO" group.

— End of Report —

Dr. Rakesh Vaidya
MD (Path). DCP.

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ESTD. 1964

DEPARTMENT OF LABORATORY MEDICINE

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Fasting Plasma Glucose

| Test | Result | Units | Biological Ref. Range |
|------------------------------------|--------|-------|-----------------------|
| Fasting Plasma Glucose | | | |
| Fasting Plasma Glucose | 98 | mg/dL | 70 - 110 |
| Post Prandial 2 Hr. Plasma Glucose | 106 | mg/dL | 70 - 140 |

By Hexokinase method on EXL Dade Dimension

— End of Report —

Dr. Rakesh Vaidya
MD (Path). DCP.

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 requested.



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HbA1c (Glycosylated Hb)

| Test | Result | Units | Biological Ref. Range |
|------------------------------------|--------|-------|-----------------------|
| HbA1c (Glycosylated Hb) | | | |
| Glycosylated Hemoglobin (HbA1c) | 5.0 | % | |
| estimated Average Glucose (e AG) * | 96.8 | 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) |

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Complete Lipid Profile

| Test | Result | Units | Biological Ref. Range |
|--|--------|-------|-----------------------|
| Complete Lipid Profile | | | |
| Appearance | Clear | | |
| Triglycerides | 89 | mg/dL | 1 - 150 |
| <i>(Done by Lipase /Glycerol kinase on Vitros 5600)</i> | | | |
| <i>< 150 Normal</i> | | | |
| <i>150-199 Borderline High</i> | | | |
| <i>200-499 High</i> | | | |
| <i>> 499 Very High)</i> | | | |
| Total Cholesterol | 165 | mg/dL | 1 - 200 |
| <i>(Done by Colorimetric - Cholesterol Oxidase, esterase, peroxidase on Vitros 5600.</i> | | | |
| <i><200 mg/dL - Desirable</i> | | | |
| <i>200-239 mg/dL - Borderline High</i> | | | |
| <i>> 239 mg/dL - High)</i> | | | |
| HDL Cholesterol | 61 | mg/dL | 40 - 60 |
| <i>(Done by Colorimetric: non HDL precipitation method PTA/MgCl2 on Vitros 5600</i> | | | |
| <i>< 40 Low</i> | | | |
| <i>> 60 High)</i> | | | |
| Non HDL Cholesterol (calculated) | 104 | mg/dL | 1 - 130 |
| <i>(Non-HDL Cholesterol</i> | | | |
| <i>< 130 Desirable</i> | | | |
| <i>139-159 Borderline High</i> | | | |
| <i>160-189 High</i> | | | |
| <i>> 191 Very High)</i> | | | |
| LDL Cholesterol | 76 | mg/dL | 1 - 100 |
| <i>(Done by Enzymatic (Two Step CHE/CHO/POD) on Vitros 5600</i> | | | |
| <i>< 100 Optimal</i> | | | |
| <i>100-129 Near / above optimal</i> | | | |
| <i>130-159 Borderline High</i> | | | |
| <i>160-189 High</i> | | | |
| <i>> 189 Very High)</i> | | | |
| VLDL Cholesterol (calculated) | 17.8 | mg/dL | 12 - 30 |
| LDL Ch. / HDL Ch. Ratio | 1.25 | | 2.1 - 3.5 |
| T. Ch./HDL Ch. Ratio | 2.7 | | 3.5 - 5 |
| <i>(Recent NECP / ATP III Guidelines / Classification (mg/dl) :)</i> | | | |

— End of Report —

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Renal Function Test (RFT)

| Test | Result | Units | Biological Ref. Range |
|--|--------------|-------|-----------------------|
| Urea <i>(Done by Endpoint/Colorimetric - Urease on Vitros 5600)</i> | 18 | mg/dL | 10 - 45 |
| BUN | 8.41 | mg/dL | 5 - 21 |
| Creatinine <i>(By Modified Kinetic Jaffe Technique)</i> | 0.73 | mg/dL | 0.6 - 1.1 |
| Estimate Glomerular Filtration rate <i>(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)</i> | More than 60 | | |
| Uricacid <i>(Done by Colorimetric - Uricase, Peroxidase on Vitros 5600)</i> | 5.5 | mg/dL | 2.2 - 5.8 |

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Thyroid Hormone Study

| Test | Result | Units | Biological Ref. Range |
|--|--------|------------|-----------------------|
| Triiodothyronine (T3) (Done by CLIA based method on automated immunoassay Vitros 5600. 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 - 99 years) : 1.07 - 1.85 Pregnancy (in last 5 months) : 1.2 - 2.5 (Reference : Tietz - Clinical guide to laboratory test, 4th edition)) | 1.28 | ng/ml | |
| Thyroxine (T4) (Done by CLIA based method on automated immunoassay Vitros 5600. 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 (20-99 years) : 5.91 - 12.98 (Reference : Tietz - Clinical guide to laboratory test, 4th edition)) | 8.10 | mcg/dL | |
| Thyroid Stimulating Hormone (US-TSH) (Done by CLIA based method on automated immunoassay Vitros 5600. Reference interval (microIU/ml) Infants (1-4 days) : 1.0 - 39 2-20 weeks : 1.7 - 9.1 5 months - 20 years : 0.7 - 6.4 Adults (20-99 years) : 0.4001 - 4.049 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)) | 1.96 | microIU/ml | |

— End of Report —

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Liver Function Test (LFT)

| Test | Result | Units | Biological Ref. Range |
|--|-------------|-------|-----------------------|
| Bilirubin | | | |
| Bilirubin - Total | 0.40 | mg/dL | 0 - 1 |
| Bilirubin - Direct | 0.19 | mg/dL | 0 - 0.3 |
| Bilirubin - Indirect | 0.21 | mg/dL | 0 - 0.7 |
| <i>(Done by Dual Wavelength - Reflectance Spectrophotometry on Vitros 5600)</i> | | | |
| Aspartate Aminotransferase (SGOT/AST) | 29 | U/L | 13 - 35 |
| <i>(Done by Multipoint Rate Colorimetric with P-5-P on Vitros 5600)</i> | | | |
| Alanine Aminotransferase (SGPT/ALT) | 29 | U/L | 14 - 59 |
| <i>(Done by Multipoint-Rate/Colorimetric with P-5-P (pyridoxa-5-phosphate) on Vitros 5600)</i> | | | |
| Alkaline Phosphatase | 141 | U/L | 42 - 98 |
| <i>(Done by Multipoint-Rate - p-nitrophenyl Phosphate, AMP buffer on Vitros 5600)</i> | | | |
| Gamma Glutamyl Transferase (GGT) | 17 | U/L | 5 - 55 |
| <i>(Done by Multipoint Rate - L-γ²-glutamyl-p-nitroanilide on Vitros 5600)</i> | | | |
| Total Protein | | | |
| Total Proteins | 7.85 | gm/dL | 6.4 - 8.2 |
| Albumin | 4.50 | gm/dL | 3.4 - 5 |
| Globulin | 3.35 | gm/dL | 3 - 3.2 |
| A : G Ratio | 1.34 | | 1.1 - 1.6 |
| <i>(Done by Biuret endpoint and Bromocresol green method on vitros 5600.)</i> | | | |

— End of Report —

Dr. Rakesh Vaidya
MD (Path). DCP.



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Urine routine analysis (Auto)

| Test | Result | Units | Biological Ref. Range |
|---|---------------|-------|-----------------------|
| Physical Examination | | | |
| Quantity | 20 | mL | |
| Colour | Pale Yellow | | |
| Appearance | Clear | | |
| Chemical Examination (By Reagent strip method) | | | |
| pH | 5.0 | | |
| Specific Gravity | 1.011 | | |
| 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 | Trace | | 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 —

Dr. Rakesh Vaidya
MD (Path). DCP.



**BHAILAL AMIN
GENERAL HOSPITAL**



ADVANCED DIGITAL SOLUTIONS

Computerized Radiography

Ultra Sensitive Colour Doppler

Ultra High Resolution Sonography

Multi-Detector CT Scan

Magnetic Resonance Imaging (MRI)

Mammography

Interventional Radiology

Digital Subtraction Angiography (DSA)

Foetal Echocardiography

Echocardiography

4D USG & Doppler

DEPARTMENT OF DIAGNOSTIC RADIOLOGY

Patient No. : 23230013 Report Date : 06/03/2024

Request No. : 190106366 06/03/2024 9.14 AM

Patient Name : **Ms. NAZREEN FATMA**

Gender / Age : Female / 30 Years 1 Months 7 Days

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.

• 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

Patient No. : 23230013 Report Date : 06/03/2024

Request No. : 190106375 06/03/2024 9.14 AM

Patient Name : Ms. NAZREEN FATMA

Gender / Age : Female / 30 Years 1 Months 7 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.

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 in size and echopattern.

Both kidneys are normal in shape and position. Normal echogenicity and cortico medullary differentiation is noted. No hydronephrosis seen. **4x3mm echogenic focus is seen in mid pole cortex of right kidney--p/o angiomyolipoma.**

No ascites.

COMMENT:

• Echogenic focus in right kidney--p/o angiomyolipoma.

Kindly correlate clinically.

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


Dr. Priyanka Patel, MD.

Consultant Radiologist



Patient No. : 23230013 Report Date : 06/03/2024
Request No : 190106403 06/03/2024 9.14 AM
Patient Name : **Ms. NAZREEN FATMA**
Gender / Age : Female / 30 Years 1 Months 7 Days

Echo Doppler Screening

MITRAL VALVE : NORMAL
AORTIC VALVE : TRILEAFLET, NORMAL
TRICUSPID VALVE : NORMAL, NO TR, NO PAH
PULMONARY VALVE : NORMAL
LEFT ATRIUM : NORMAL
AORTA : NORMAL
LEFT VENTRICLE : NORMAL, NO REGIONAL WALL MOTION ABNORMALITY,
LVEF=65%
RIGHT ATRIUM : NORMAL
RIGHT VENTRICLE : NORMAL
I.V.S. : INTACT
I.A.S. : INTACT
PULMONARY ARTERY : NORMAL
PERICARDIUM : NORMAL

COLOUR/DOPPLER FLOW MAPPING : NO AR, MR, TR, NO PAH

FINAL CONCLUSION:

1. ALL CARDIAC CHAMBERS ARE NORMAL IN DIMENSIONS.
2. NO REGIONAL WALL MOTION ABNORMALITY AT REST
3. NORMAL LV SYSTOLIC FUNCTION, LVEF=65%
4. NORMAL VALVES
5. NO LV DIASTOLIC DYSFUNCTION
6. NO AR, MR, TR, NO PULMONARY HYPERTENSION, (IVC COLLAPSING)
7. NO PERICARDIAL EFFUSION, CLOT VEGETATION.

Dr. **PILLOK KANERIA MD, DM**
Consultant Cardiologist

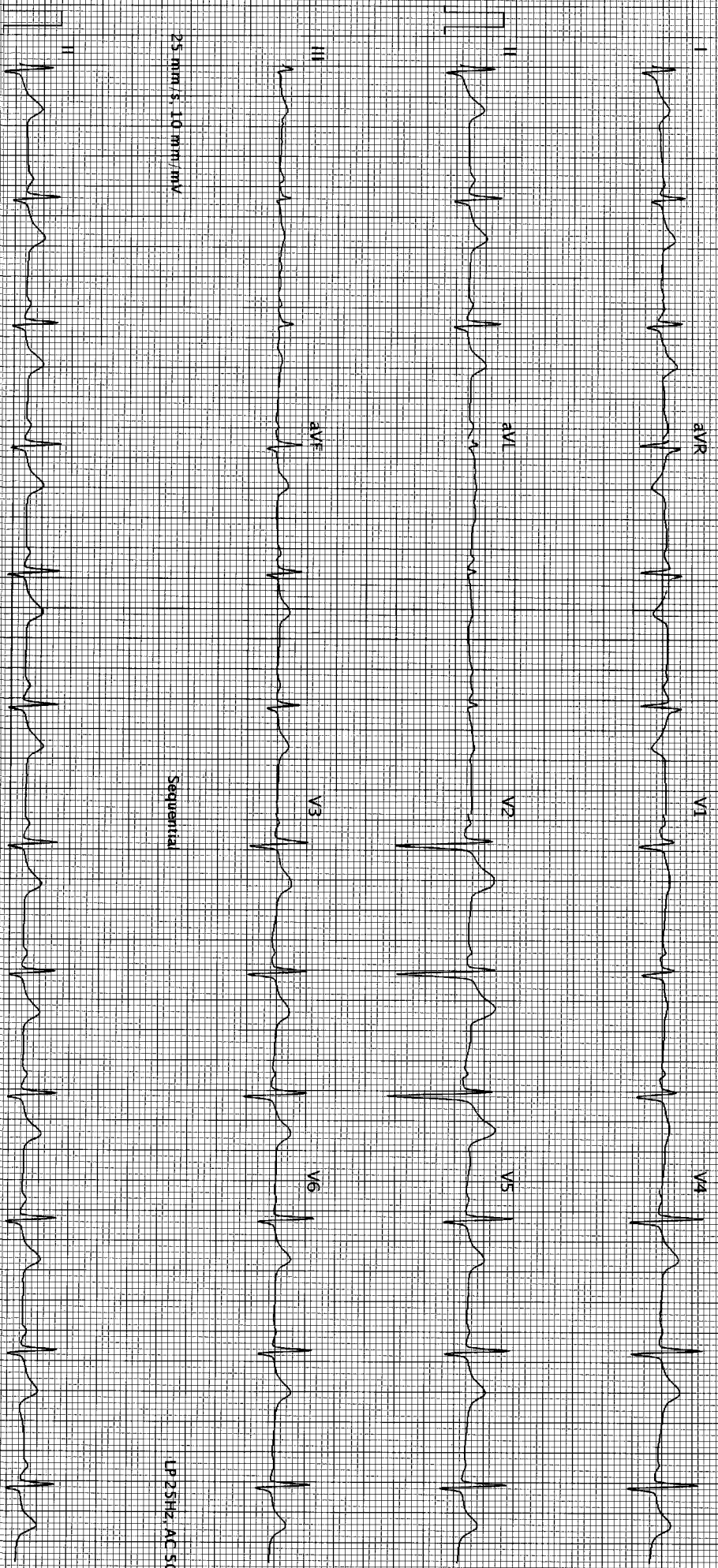
Age 030Y
 Gender Female
 Ref. phys.
 Pacemaker Unknown
 Remark

HR 70 bpm
 RR 82 ms
 P axis 50°
 QRS axis 37°
 T axis QTcB

PR 131 ms
 QRST 84 ms
 QT 390 ms
 QTcB 423 ms

Unconfirmed report

Handwritten signature



25 mm/s, 10 mm/mV

Sequential

LP 25HZ, AC 50HZ

25 mm/s, 10 mm/mV

LP 25HZ, AC 50HZ