


B.P - 120/69  
P - 80  
S - 98  
W - 66kg  
H - 152cm

(BMI) (28.6) overweight (+ 8.3 kg)



 भारतीय विशिष्ट पहचान प्राधिकरण  
UNIQUE IDENTIFICATION AUTHORITY OF INDIA

पता:  
डब्ल्यू/ओ हार्श बागनिया, फ्लैट न 11171 फ्लोर 17 टवर  
11 प्रेस्टीन, पुष्पा मार्ग, विभाग 150 नोएडा, नोएडा,  
गौतमबुद्ध नगर,  
उत्तर प्रदेश - 201301

Address:  
W/o harsh bagana, Flat no 11171 floor 17 tower 11  
ats prestine, Pushta road, Sector 150 noida, Noida,  
Gautam Buddha Nagar, Uttar Pradesh - 201301

6908 7648 2496  
VID : 9105 0379 3681 1458



1947 |  help@uidai.gov.in |  www.uidai.gov.in

*Anisha*  
04/7/24  
8130561789



भारत सरकार  
GOVERNMENT OF INDIA



अनिशा अग्रवाल  
Anisha Aggarwal  
जन्म तिथि / DOB: 29/06/1985  
महिना / FEMALE  
Mobile No.: 8130561789

6908 7648 2496  
VID : 9105 0379 3681 1458

मेरा आधार, मेरी पहचान

Female

04.07.2024 10:59:28 AM  
sjm hospital  
sector 63  
Gautam Budhha Nagar, UP-201307

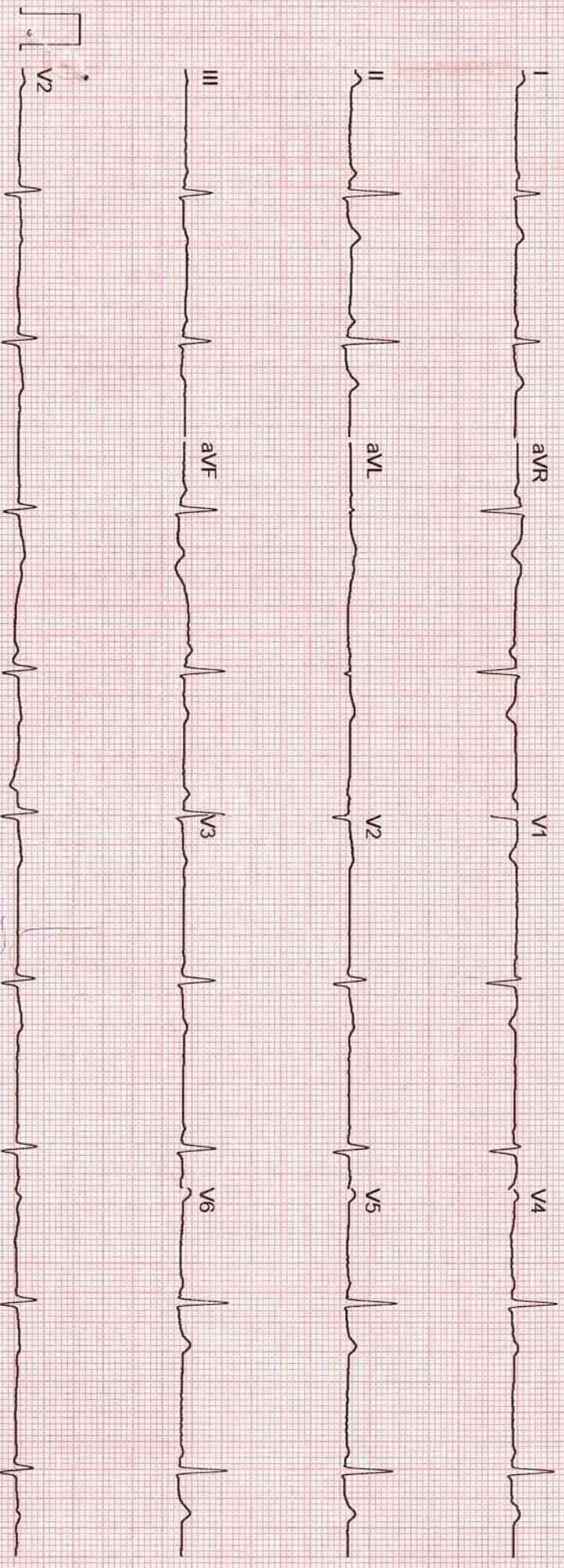
Location: Room:  
Order Number:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

56 bpm  
- / - mmHg

QRS	:	80 ms
QT / QTcBaz	:	418 / 403 ms
PR	:	150 ms
P	:	108 ms
RR / PP	:	1072 / 1071 ms
P / QRS / T	:	55 / 58 / 35 degrees

Sinus bradycardia  
Nonspecific ST abnormality  
Abnormal ECG

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:



Unconfirmed



# SJM SUPER SPECIALITY HOSPITAL

100 Bedded Super Speciality Hospital

Sector-63, Noida, NH-9, Near Hindon Bridge

Ph.: 0120-6530900 / 10, Mob.: +91 9599259072

E-mail: sjmhospital@yahoo.com / Website: sjmhospital.com

(24 Hours Emergency, NICU/ICU, Pharmacy & Ambulance Available)



4/7/24

### (IVF SPECIALIST)

Dr. Pushpa Kaul (IVF)  
M.B.B.S, MD(Obst, & Gynae)  
Dr. Neha Zutshi (Embryologist)

### OTHER SPECIALIST

Dr. Pushpa Kaul (IVF)  
M.B.B.S, MD(Obst, & Gynae)  
Dr. Smritee Virmani (Endoscopy)  
MBBS, DGO, DNB, ICOG (Obst. & Gynae)  
Dr. Vinod Bhat  
M.B.B.S, MD (General Medicine)  
Dr. Vineet Gupta, MS (ENT)  
Dr. Naveen Gupta, MS (EYE)  
Dr. Ashutosh Singh, MS (Urology)  
Dr. Rahul Kaul (Spine Surgeon)  
MBBS, MS, (Orthopaedic)  
Dr. Jaideep Gambhir, M.D(Psychiatrist)  
Consultant Psychiatry, Mob.: 8006888664  
Dr. Monica Gambhir, MBBS  
Family Therapist & Relationship Counsellor  
Mob.: 8006888663  
Dr. B.P. Gupta, MS (Surgeon)  
Dr. Deepa Maheshwari  
M.B.B.S., MD, FRM, (IVF Specialist)  
Dr. Vivek Kumar Gupta  
MBBS, MS (General Surgeon)  
M.Ch. (Plastic Surgery)  
Dr. Anand Kumar  
MBBS, MD (Paediatrics)  
Dr. Amit kumar Kothari  
MBBS, MD (Medicine)  
Dr. Amit Aggarwal  
M.B.B.S., M.S. Ortho.

### Facilities:

100 Beds. Private & Public wards  
Inpatient & Outpatient - (OPD)Facilities  
24-Hour ambulance and emergency  
3 Operation theatres  
Laposcopic & Conventional Surgery  
In vitro fertilization centre (IVF)  
Intensive Care Unit. (ICU)  
Neonatal ICUs (NICU)  
Dental Clinic  
Computerized pathology lab  
Digital X-ray and ultrasound  
Physiotherapy facilities  
24-Hour Pharmacy  
Cafeteria & Kitchen

Ms. Anisha (39y/f)

Vinyl { 616p  
616,  
N6

— No complaint

CSG

R

L

(BS)

Lubex Eye Drops - 2T/D

X 2 months.



## CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

**Panels:** Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Serices Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medicate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parekh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd. (Corporate)



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Dr. Rahul Kaul (Spine Surgeon)

MBBS, MS, (Orthopaedic)

Dr. Jaideep Gambhir, M.D(Psychiatrist)

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Dr. Monica Gambhir, MBBS

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MBBS, MD (Medicine)

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In vitro fertilization centre (IVF)

Intensive Care Unit. (ICU)

Neonatal ICUs (NICU)

Dental Clinic

Computerized pathology lab

Digital X-ray and ultrasound

Physiotherapy facilities

24-Hour Pharmacy

Cafeteria & Kitchen

Mrs. Anisha Aggarwal  
Age - 39 yrs / Female.

Mrs Anisha Aggarwal Age  
39 yrs / Female. No active  
complaint. Pt Mentally  
& Physically Fit



4/07/2024.

## CGHS & AYUSHMAN BHARAT

+ Not for medico legal purpose + No substitution of drugs allowed

**Panels:** Raksha TPA Pvt Ltd., Vipul Med Corp TPA Pvt Ltd., E-Meditek (TPA) Services Ltd., Medi-Assit India TPA Pvt Ltd., Park Mediclaim, Genins India TPA Pvt Ltd., Family Healthcare TPA Pvt Ltd., Medsave Healthcare TPA Pvt Ltd., Vidal Health Care TPA Pvt Ltd., MD India Healthcare, DHS TPA (India) Private Ltd., Medicate TPA Service (I) Pvt. Ltd., East West Assist TPA Pvt Ltd., United Healthcare Parekh TPA Pvt Ltd., Good Health TPA Services Ltd., Bajaj Allianz General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., IFFCO Tokio General Insurance Co. Ltd., Universal Insurance General Co. Ltd., TATA AIG General Insurance Co. Ltd., Cholamandalam General Insurance Co. Ltd., Liberty Videocon General Insurance Ltd., SBI General Insurance Co. Ltd., Kotak Mahindra General Insurance Co. Ltd., HDFC Standard Life Insurance Co. Ltd., The Oriental Insurance Co. Ltd.(Corporate), National Insurance Co. Ltd.(Corporate), The New India Insurance Co. Ltd. (Corporate), United India Insurance Co Ltd.(Corporate)

## Laboratory Report

Lab Serial no.	: LSHHI291091	Mr. No	: 117594
Patient Name	: Mrs. ANISHA AGGARWAL	Reg. Date & Time	: 04-Jul-2024 09:52 AM
Age / Sex	: 39 Yrs / F	Sample Receive Date	: 04-Jul-2024 10:08 AM
Referred by	: Dr. SELF	Result Entry Date	: 04-Jul-2024 01:23PM
Doctor Name	: Dr. Pushpa Kaul	Reporting Time	: 04-Jul-2024 01:23 PM
OPD	: OPD		

### HAEMATOLOGY

results                      unit                      reference

#### CBC / COMPLETE BLOOD COUNT

HB (Haemoglobin)	12.5	gm/dL	12.0 - 16.0
TLC	9.7	Thousand/mm	4.0 - 11.0
DLC			
Neutrophil	68	%	40 - 70
Lymphocyte	25	%	20 - 40
Eosinophil	05	%	02 - 06
Monocyte	02	%	02 - 08
Basophil	00	%	00 - 01
R.B.C.	4.66	Thousand / UI	3.8 - 5.10
P.C.V	39.9	million/UI	0 - 40
M.C.V.	85.6	fL	78 - 100
M.C.H.	<b>26.8</b>	pg	27 - 32
M.C.H.C.	<b>31.3</b>	g/dl	32 - 36
Platelet Count	2.68	Lacs/cumm	1.5 - 4.5

#### INTERPRETATION:

To determine your general health status; to screen for, diagnose, or monitor any one of a variety of diseases and conditions that affect blood cells, such as anemia, infection, inflammation, bleeding disorders or cancer.



technician :

Typed By : Mr. BIRJESH

## Laboratory Report

Lab Serial no. : LSHHI291091	Mr. No : 117594
Patient Name : Mrs. ANISHA AGGARWAL	Reg. Date & Time : 04-Jul-2024 09:52 AM
Age / Sex : 39 Yrs / F	Sample Receive Date : 04-Jul-2024 10:08 AM
Referred by : Dr. SELF	Result Entry Date : 04-Jul-2024 11:23 PM
Doctor Name : Dr. Pushpa Kaul	Reporting Time : 04-Jul-2024 01:24 PM
OPD : OPD	

### HAEMATOTOLOGY

results	unit	reference
---------	------	-----------

#### ESR / ERYTHROCYTE SEDIMENTATION RATE

ESR (Erythrocyte Sedimentation Rate)	18	mm/1hr	00 - 20
--------------------------------------	----	--------	---------

#### Comments

The ESR is a simple non-specific screening test that indirectly measures the presence of inflammation in the body. It reflects the tendency of red blood cells to settle more rapidly in the face of some disease states, usually because of increases in plasma fibrinogen, immunoglobulins, and other acute-phase reaction proteins. Changes in red cell shape or number may also affect the ESR.

### BIOCHEMISTRY

results	unit	reference
---------	------	-----------

#### HbA1C / GLYCATED HEMOGLOBIN / GHb

Hb A1C	5.1	%	4.0 - 6.0
ESTIMATED AVERAGE GLUCOSE eAG[Calculated]	99.67	mg/dl	

#### INTERPRETATION-

	HBA1C
NON DIABETIC	4-6 %
GOOD DIABETIC CONTROL	6-8 %
FAIR CONTROL	8-10 %
POOR CONTROL	>-10 %

The Glycosylated haemoglobin assay has been validated as a reliable indicator of mean blood glucose levels for a 3 months period. AMERICAN DIABETES ASSOCIATION recommends the testing twice an year in patients with stable blood glucose, or quarterly if treatment changes or blood glucose is abnormal

Technician :  
Typed By : Mr. BIRJESH



## Laboratory Report

Lab Serial no. : LSHHI291091	Mr. No : 117594
Patient Name : Mrs. ANISHA AGGARWAL	Reg. Date & Time : 04-Jul-2024 09:52 AM
Age / Sex : 39 Yrs / F	Sample Receive Date : 04-Jul-2024 10:08 AM
Referred by : Dr. SELF	Result Entry Date : 04-Jul-2024 01:23PM
Doctor Name : Dr. Pushpa Kaul	Reporting Time : 04-Jul-2024 01:24 PM
OPD : OPD	

### BIOCHEMISTRY

	results	unit	reference
<b>LIPID PROFILE, Serum</b>			
S. Cholesterol	193.0	mg/dl	< - 200
HDL Cholesterol	<b>34.1</b>	mg/dl	42.0 - 88.0
LDL Cholesterol	106.6	mg/dl	50 - 150
VLDL Cholesterol	<b>52.3</b>	mg/dl	00 - 40
Triglyceride	<b>261.6</b>	mg/dl	00 - 170
Chloestrol/HDL RATIO	<b>5.7</b>	%	3.30 - 4.40

#### INTERPRETATION:

Lipid profile Or lipid panel IS a panel of blood tests that serves as an initial screening tool for abnormalities in lipids, such as cholesterol and triglycerides. The results of this test can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis, and other diseases.

#### BLOOD SUGAR F, Sodium Fluoride Pla

Blood Sugar (F)	82.7	mg/dl	70 - 110
-----------------	------	-------	----------

#### Comments:

Accurate measurement of glucose in body fluid is important in diagnosis and management of diabetes, hypoglycemia, adrenal dysfunction and various other conditions.

High levels of serum glucose may be seen in case of Diabetes mellitus, in patients receiving glucose containing fluids intravenously, during severe stress and in cerebrovascular accidents.

Decreased levels of glucose can be due to insulin administration, as a result of insulinoma, inborn errors of carbohydrate metabolism or fasting.



technician :

Typed By : Mr. BIRJESH

## Laboratory Report

Lab Serial no. : LSHHI291091	Mr. No : 117594	
Patient Name : Mrs. ANISHA AGGARWAL	Reg. Date & Time : 04-Jul-2024	09:57 AM
Age / Sex : 39 Yrs / F	Sample Receive Date : 04-Jul-2024	10:03 AM
Referred by : Dr. SELF	Result Entry Date : 04-Jul-2024	11:23 PM
Doctor Name : Dr. Pushpa Kaul	Reporting Time : 04-Jul-2024	1:24 PM
OPD : OPD		

### BIOCHEMISTRY

	results	unit	reference
<u>KFT,Serum</u>			
Blood Urea	16.1	mg/dL	13 - 40
Serum Creatinine	0.83	mg/dl	0.6 - 1.1
Uric Acid	5.4	mg/dl	2.6 - 6.0
Calcium	10.0	mg/dL	8.8 - 10.2
Sodium (Na+)	135.8	mEq/L	135 - 150
Potassium (K+)	4.28	mEq/L	3.5 - 5.0
Chloride (Cl)	100.7	mmol/L	94 - 110
BUN/ Blood Urea Nitrogen	7.52	mg/dL	7 - 18
PHOSPHORUS-Serum	<b>4.97</b>	mg/dl	2.5 - 4.5

**Comment:-**

Kidneys play an important role in the removal of waste products and maintenance of water and electrolyte balance in the body. Kidney Function Test (KFT) includes a group of blood tests to determine how well the kidneys are working.

Centre for Excellent Patient Care

Technician :

Performed By : Mr. BIRJESH



Page :

**Dr. Rajeev Goel**  
M.D. (Pathologist)  
36548 (MCI)

**Dr. Bupinder Zutshi**  
(M.B.B.S., MD)  
Pathologist & Microbiologist



## Laboratory Report

Lab Serial no. : LSHHI291091	Mr. No : 117594
Patient Name : Mrs. ANISHA AGGARWAL	Reg. Date & Time : 04-Jul-2024 09:42 AM
Age / Sex : 39 Yrs / F	Sample Receive Date : 04-Jul-2024 10:08 AM
Referred by : Dr. SELF	Result Entry Date : 04-Jul-2024 1:23 PM
Doctor Name : Dr. Pushpa Kaul	Reporting Time : 04-Jul-2024 01:24 PM
OPD : OPD	

### BIOCHEMISTRY

#### LIVER FUNCTION TEST, Serum

	results	unit	reference
Bilirubin- Total	0.61	mg/dL	0.1 - 2.0
Bilirubin- Direct	<b>0.26</b>	mg/dL	0.00 - 0.20
Bilirubin- Indirect	0.35	mg/dL	0.2 - 1.2
SGOT/AST	15.8	IU/L	00 - 31
SGPT/ALT	15.0	IU/L	00 - 34
Alkaline Phosphate	82.0	U/L	42.0 - 98.0
Total Protein	6.97	g/dL	6.4 - 8.3
Serum Albumin	4.40	gm%	3.50 - 5.20
Globulin	2.57	gm/dl	2.0 - 4.0
Albumin/Globulin Ratio	1.71	%	

#### INTERPRETATION

A Liver Function test or one or more of its component tests may be used to help diagnose liver disease if a person has symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor liver status and to evaluate the effectiveness of any treatments.

Centre for Excellent Patient Care



Technician :

Reported By : Mr. BIRJESH



**Dr. Rajeev Goel**  
 M.D. (Pathologist)  
 36548 (MCI)

Page 1

**Dr. Bupinder Zutshi**  
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**Laboratory Report**

Lab Serial No. : LSHHI291091	Reg. No. : 117594
Patient Name : MRS. ANISHA AGGARWAL	Reg. Date & Time : 04-Jul-2024 09:52 AM
Age/Sex : 39 Yrs /F	Sample Collection Date : 04-Jul-2024 10:08 AM
Referred By : SELF	Sample Receiving Date : 04-Jul-2024 10:08 AM
Doctor Name : Dr. Pushpa Kaul	Reporting Time : 04-Jul-2024 01:24 PM
OPD/IPD : OPD	

**URINE EXAMINATION TEST****PHYSICAL EXAMINATION**

Quantity: 20 ml  
 Color: Straw  
 Transparency: clear

**CHEMICAL EXAMINATION**

Albumin: nil  
 Glucose: nil  
 PH: Acidic

**MICROSCOPIC EXAMINATION**

Pus cells: 1-2 /HPF  
 RBC's: nil  
 Crystals: nil  
 Epithelial cells: 0-1 /HPF  
 Others: nil

**Note:-**

A urinalysis is a test of your urine. It's used to detect and manage a wide range of disorders, such as urinary tract infections, kidney disease and diabetes. A urinalysis involves checking the appearance, concentration and content of urine.



Mr. BIRJESH

<http://rgcipac3/SJM/Design/Finanance/LabTextReport.aspx>

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7/4/24  
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Doctor Name : Dr. Pushpa Kaul	ReportingTime : 04-Jul-2024 01:24 PM
OPD/IPD : OPD	

### TEST NAME

### VALUE

ABO

"B"

Rh

POSITIVE

### Comments:

Human red blood cell antigens can be divided into four groups A, B, AB AND O depending on the presence or absence of the corresponding antigens on the red blood cells. There are two glycoprotein A and B on the cell s surface that are responsible for the ABO types. Blood group is further classified as RH positive an RH negative.

Centre for Excellent Patient Care



Mr. BIRJESH

<http://gcipac3/SJM/Design/Finanace/LabTextReport.aspx>

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 36548 (MCI)

7/5/2024  
**Dr. Bupinder Zutshi**  
 (M.B.B.S., MD)  
 Pathologist & Micrbiologist



# Immuno Diagnostics Pvt. Ltd.

Leading Immuno Assays Laboratory of Northern India

ISO 9001:2015 CERTIFIED LABORATORY

CIN No. U74899DL1979PTC009991



Reference No.	: - 2407006913	Age/Gender	: 39 Yrs/Female
Pt's Name	: Mrs. ANISHA AGGARWAL		MJT-SJM
Referred By	: NA		
Sample Collection Date/Time	: 04-Jul-2024	Date	: 04-Jul-2024
Sample Receiving Date/Time	: 04-Jul-2024 01:54PM	Approved Date	: 04-Jul-2024 02:56PM
Sample From	: SJM SUPER SPECIALITY HOSPITAL	Report Print Time	: 05-Jul-2024 09:04AM

Test Description	Observed Value	Biological Reference Interval
	<b>T3 T4 TSH, Serum</b>	
Triiodothyronine, Total (T3), Serum Chemiluminescence Immuno Assay	81	60-181 ng/dL
Thyroxine, Total (T4), Serum Chemiluminescence Immuno Assay	9.6	4.5-10.9 ug/dL
3rd Gen. ( TSH Ultrasensitive ), Serum Chemiluminescence Immuno Assay	2.60	0.35-5.50 uIU/mL

#### COMMENT :

The levels of thyroid hormone (T3 & T4) Are Low In case of Primary, secondary and tertiary hypothyroidism and sometimes in non-thyroidal illness also. Increased levels are found in grave's disease, hyperthyroidism and thyroid hormone resistance. T3 levels are also raised in T3 thyrotoxicosis. TSH levels are raised in primary hypothyroidism and are low in hyperthyroidism and secondary hypothyroidism.

#### In Pregnancy:


LEVEL	TOTAL T3	TOTAL T4	TSH
Ist Trimester	81-190	6.6-12.4	0.1-2.5
IInd Trimester	100-260	6.6-15.5	0.2-3.0
IIIRD Trimester	100-260	6.6-15.5	0.3-3.0

Laboratory is NABL Accredited

\*\*\* End Of Report \*\*\*



Dr. Nidhi Vachher  
M.B.B.S. M.D.(Pathology)  
Hony Consultant Pathologist

  
Dr. Ajay Kumar  
Ph.D (BARC)  
Thyroid Physiology

Dr. Rohini Bhatia  
M.B.B.S. M.D.(Pathology)  
Hony Consultant Pathologist

Dr. Malti Goyal  
M.B.B.S. M.D. (Pathology)  
Hony Consultant Pathologist  
Page 1 of 1

This test is done by Immuno Diagnostics Pvt Ltd

B-17, Okhla Phase-II, Industrial Area, New Delhi-110020

All results should be co-related clinically; if results are alarming or unexpected, contact the laboratory immediately. Not valid for Medico-Legal. Result pertain to the specimen submitted.

## Ultrasound Report

NAME: Mrs.Anisha

AGE: 39yrs

DATE: 04/07/2024

### Real time USG of abdomen and pelvis reveals –

#### LIVER— Liver appears fatty with grade 1 changes.

There is no evidence of any focal lesion seen in the parenchyma.

Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

GALL BLADDER-Gall bladder is physiologically distended. The wall thickness is normal. There is no Evidence of any intraluminal mass lesion or calculi seen.

PANCREAS-Pancreas is normal in size, shape and echo pattern. No focal mass lesion seen. Pancreatic duct is not dilated.

SPLEEN-Spleen show normal size, shape and homogeneous echo pattern. No focal mass lesion is seen in parenchyma.

KIDNEY -Both the kidneys size, shape, position and axis. Parenchymal echo pattern is normal bilaterally. No focal solid or cystic lesion is seen. There is no evidence of renal calculi on either side.

RETROPERITONIUM- -There is no-evidence of ascites or Para – aortic adenopathy seen. Retroperitoneal structures appear normal.

URINARY BLADDER- Adequately distended. Walls were regular and thin. Contents are Normal. No stone formation seen.

UTERUS-Uterus and both ovaries are normal in size, shape and echo pattern. No focal lesion is seen. Endometrial normal. **There is evidence of free fluid seen in the pelvis.** There is no evidence of adnexal mass is seen.

IMPRESSION: Fatty Liver Grade 1,  
PID

For SJM Super Speciality Hospital

DR. PISHPA KAUL



## Ultrasound Report

NAME: Mrs.Anisha

AGE: 39yrs

DATE: 04/07/2024

### Real time USG of abdomen and pelvis reveals –

**LIVER**— Liver appears fatty with grade 1 changes.

There is no evidence of any focal lesion seen in the parenchyma. Intra-hepatic vascular and biliary radicles appear normal. Portal vein and common bile duct are normal.

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**SPLEEN**-Spleen show normal size, shape and homogeneous echo pattern. No focal mass lesion is seen in parenchyma.

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**URINARY BLADDER**- Adequately distended. Walls were regular and thin. Contents are Normal. No stone formation seen.

**UTERUS**-Uterus and both ovaries are normal in size, shape and echo pattern. No focal lesion is seen. Endometrial normal. **There is evidence of free fluid seen in the pelvis.** There is no evidence of adnexal mass is seen.

IMPRESSION: Fatty Liver Grade 1.  
PID

For SJM Super Specialty Hospital

DR. PISHPA KAUL









## Ultrasound Report

### TRANSTHORASCIC ECHO-DOPPLER REPORT

Name: **Mrs. Anisha**      Age /sex: **39Yrs/F**      Date:**04/07/2024**

**ECHO WINDOW: FAIR WINDOW**

	Observed values (cm)		Normal values (mm)
Aortic root diameter	2.1		22-36
Aortic valve Opening			15 -26
Left Atrium size	2.3		19 - 40
	End Diastole (cm)	End Systole (cm)	Normal Values (mm)
Left Ventricle size	3.9	2.4	(ED =39 -58)
Interventricular Septum	0.6		(ED = 6 -11)
Posterior Wall thickened	0.6		(ED = 6- 10)
LV Ejection Fraction (%)	60		55% -65 %

#### Doppler Velocities (cm / sec)

Pulmonary valve = Normal		Aortic valve = Normal	
Max velocity		Max velocity	
Mean PG		Max PG	
Pressure ½ time		Mean velocity	
Acceleration Time		Mean PG	
RVET		LVET	
Mitral valve =Normal		Tricuspid valve = Normal	
E	E>A	Max Velocity	
A		Mean Velocity	
DT		Mean PG	
E/E		TAPSE	



## Ultrasound Report

Regurgitation: -

MR = NIL		TR = NIL	
Severity		Severity	
Max Velocity		RVSP	
AR		PR	
Severity	NIL	Severity	NIL
Jet width /LVOT ratio		Mean PAP	

Final Interpretation: -

- 1.) NO LV HYPOKINASIA GLOBAL LVEF 60%
- 2.) NO MR NO MS NO AS/AR, NO TR
- 3.) No Intra cardiac clot, vegetation, pericardial effusion

**DR. AMIT KOTHARI**

Non-Interventional Cardiologist.







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Centre for Excellent Patient Care

PATIENT ID	: 28794 OPD	<b>X-Ray Report</b>	PATIENT NAME	: MRS ANISHA AGGARWAL
AGE	: 039Y		SEX	: Female
REF. PHY.	:		STUDY DATE	: 04-Jul-2024

## RADIOLOGY REPORT EXAM: X RAY CHEST

### TECHNIQUE:

Frontal projections of the chest were obtained

### FINDINGS:

Both lung fields are clear.  
 Both costophrenic angles appear normal.  
 The tracheal lucency is centrally placed.  
 The mediastinal and diaphragmatic outlines appear normal.  
 The heart shadow is normal.  
 The bony thoracic cage and soft tissues are normal.

### IMPRESSION:

1. The study is within normal limits.

*V.S. Sai Naren*

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Regn No: 2017/08/3835

Dr Sai Naren  
04th Jul 2024



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