



Balaji Medical Centre

An ISO 9001:2015 Accredited Organization
info@balajimedicalcentre.com, dr@balajimedicalcentre.com



CHENNAI : No.5 (3/2), Jagadeeswaran Street,T.Nagar,Chennai-600 017. INDIA ☎: 044-24364651 / 52 / 53
No.36, Manikodi Srinivasan Nagar Main Road, Rajiv Gandhi Salai, Perungudi, Chennai-600 096. INDIA ☎: 044-29865513 / 14

TUTICORIN : Plot No.51, Door No.20/10, Roche Colony, South Beach Road,Tuticorin - 628 001.INDIA ☎: 0461-2332719 / 20

CUDDALORE : No.26, Dowlath Nagar, Semmandalam, Cuddalore - 607001.INDIA ☎ : 04142-202150,203150

KOCHI : No.66/2345A, Veekshnam Road, Ernakulam,Kochi-682018 . INDIA ☎: 0484-2395006 / 07 / 08

VIZAG : Door No.39-11- 63/4-1, Murali Nagar, Visakhapatnam,Andhra Pradesh-530 007. INDIA ☎ : 0891-2710299 / 399

MANGALORE : Shop No.5, Door No.1-65/31, Kulur-Kavoor Airport Road, Vivek Nagar, Panjimogaru, Mangalore-575 013.INDIA ☎: 0824-2972719 / 20.

KAKINADA : 70-17-15/1,RR Nagar,Road No.2, Kakinada, Andhra Pradesh -533003.INDIA ☎ : 0884-2345555, 0884-3500132.

REG. NO: MA24010000303

DATE: 27/01/2024

MEDICAL FITNESS CERTIFICATE

This is to certify that I have examined **Ms. HEJEEBU PADMAJA (54/F)**

Upon his annual pre check-up at our clinic today was subjected to all the necessary investigations as per your request.

Upon medical examination he is found to have his Fasting Blood sugar and PPBS is higher than the normal limits.

Advised to consult physician for the same.

Dietary Counseling was provided from our end

Known case of Diabetes since 22 years on treatment and under control.

Known case of Hypertension since 12 years on treatment and under control.

Known case of Dyslipidemia on treatment and under control

Deeksha

Dr. DEEKSHA. V. SHETTY

Reg.No. 32158

DGS Approval No. KAMG/09/2023

“HEALTHIER MARINERS TOWARDS A WEALTHIER NATION”



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PHYSICAL EXAMINATION

Date Of Exam : 27/01/2024 Reg. No: MA24010000303

Name : Ms. HEJEEBU PADMAJA (54/Female)

Type Of Exam : Physical

Reference : Apollo Health and Lifestyle Limited

The doctor has examined this client at Balaji Medical Centre Mangalore for updated Physical examination and found the following.

Temperature	:	36.0C
Blood Pressure	:	120/80mmHg
Pulse	:	86/min
Respiration Rate	:	16/min
Waist (cm)	:	85Cms
Height	:	152Cms
Weight	:	73.4Kgs
BMI	:	31.8 kg/m ²

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Name: Ms. HEJEEBU PADMAJA

Date: 27/01/2024

Reg. No : MA24010000303

Reference: Apollo Health and Lifestyle Limited

OPHTHALMIC REPORT

	RIGHT	LEFT
Distant: (Unaided)	6/60	6/6
Distant: (Aided)	6/6	6/6
Near: (Unaided)	N/5	N/5
Near: (Aided)	-	-
Colour:	Normal	Normal
Anterior Segment:	Normal	Normal
Intra Ocular Pressure:	Normal	Normal
Fundus:	Normal	Normal

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LABORATORY REPORT

DATE : 27/01/2024 REG. NO : MA24010000303

NAME : Ms. HEJEEBU PADMAJA

AGE : 54YRS SEX : FEMALE

REF BY : Apollo Health and Lifestyle Limited

COMPLETE BLOOD COUNT (CBC)

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
ERYTHROCYTE (RBC) COUNT	4.5	mill/cu.mm	4.7-6.0
HAEMOGLOBIN (Hb)	11.7	gm/dl	13.5-18
PCV (PACKED CELL VOLUME)	35.1	%	42-52
MCV (MEAN CORPUSCULAR VOLUME)	77.3	fl	78-100
MCH (MEAN CORPUSCULAR HAEMOGLOBIN)	27.1	pg	27-31
MCHC (MEAN CORPUSCULAR Hb CONC.N.)	35.4	g/dl	32-36
RDW (RED CELL DISTRIBUTION WIDTH)	13.9	%	11.5-14.0
TOTAL LEUCOCYTES (WBC) COUNT	10270	Cells /cu.mm	4000-10500
ABSOLUTE NEUTROPHILS COUNT	7260	/c.mm	2000-7000
ABSOLUTE LYMPHOCYTE COUNT	2080	/c.mm	1000-3000
ABSOLUTE MONOCYTE COUNT	670	/c.mm	200-1000
ABSOLUTE EOSINOPHIL COUNT	170	/c.mm	20-500
ABSOLUTE BASOPHIL COUNT	90	/c.mm	20-100
NEUTROPHILS	70.0	%	40-80
LYMPHOCYTES	20.0	%	20-40
MONOCYTES	7.0	%	2-10
EOSINOPHILS	2.0	%	1-6
BASOPHILS	1.0	%	0-2
PLATELET COUNT	3.9	10 ³ /μl	1.50-4.50
MPV (MEAN PLATELET VOLUME)	8.2	fl.	6-9.5
PCT (PLATELET HAEMATOCRIT)	0.2	%	0.2-0.5
PDW (PLATELET DISTRIBUTION WIDTH)	16.9	%	9-17

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LABORATORY REPORT

DATE : 27/01/2024 REG. NO : MA24010000302
 NAME : Ms. HEJEEBU PADMAJA
 AGE : 54YRS SEX : FEMALE
 REF BY : Apollo Health and Lifestyle Limited

ROUTINE EXAMINATION URINE

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
GENERAL EXAMINATION:			
COLOUR	PALE YELLOW		PALE YELLOW
APPEARANCE	CLEAR		CLEAR
REACTION (pH)	5.0		4.5 - 8
SPECIFIC GRAVITY	1.010		1.010 - 1.030
CHEMICAL EXAMINATION (AUTOMATED DIPSTICK METHOD):			
URINE PROTEIN(ALBUMIN)	ABSENT		ABSENT
URINE GLUCOSE(SUGAR)	ABSENT		ABSENT
URINE KETONES(ACETONE)	ABSENT		ABSENT
BILE SALTS	ABSENT		ABSENT
BILE PIGMENTS	ABSENT		ABSENT
UROBILINOGEN	NORMAL		NORMAL
NITRITE	NEGATIVE		NEGATIVE
MICROSCOPIC EXAMINATION			
RED BLOOD CELLS	NIL	/hpf	0 - 2
PUS CELLS (WBCs)	2-4	/hpf	0 - 5
EPITHELIAL CELLS	2-3	/hpf	0 - 5
CRYSTALS	ABSENT	/hpf	ABSENT
CAST	ABSENT	/hpf	ABSENT
AMORPHOUS DEPOSITS	ABSENT	/hpf	ABSENT
BACTERIA	ABSENT	/hpf	ABSENT

Deeksha

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LABORATORY REPORT

Date : 27/01/2024 Reg. No : MA24010000303
Name : Ms. HEJEEBU PADMAJA
Age : 54Yrs Sex : Female
Ref By : Apollo Health and Lifestyle Limited

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
ESR - Erythrocyte Sedimentation Rate (EDTA Whole Blood, Automated-Capillary photometry aggregation/ Manual - Westergrens method)	22	mm/hr	0-15

Method: Automated Westergren

Interpretation;

1. It indicates presence and intensity of an inflammatory process, never diagnosis of a specific disease, Chance are more significant than a single abnormal test.
2. It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis, polymyalgia rheumatica.
3. It is also increased in pregnancy, multiple myeloma, menstruation and hypothyroidism.

Remark: ESR Performed using capillary photometric aggregation (for automated analysis) & westergrens (for manual testing).

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 Age : 54Yrs Sex : Female
 Ref By : Apollo Health and Lifestyle Limited

BIOCHEMISTRY

<u>Investigation</u>	<u>Observed value</u>	<u>unit</u>	<u>biological reference interval</u>
HbA1c-Glycated Haemoglobin (HPLC)	6.7	%	non-diabetic: <= 5.6 pre- diabetic: 5.7-6.4 Diabetic : > = 6.5
Estimated Average glucose (e AG)	145.59	mg/dl	

INTERPRETATION & REMARK:

- HbA1c is used for monitoring diabetic control.it reflects the estimated average glucose. (eAG)
- HbA1c has been endorsed by clinical group & ADA (American Diabetes Association) guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1Care a better indicator of diabetic control than a solitary test.
- Low glycated haemoglobin (below 4%) in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anemia (especially severe iron deficiency & haemolytic), chronic renal failure and liver diseases.clinical correlation suggested.
- To estimate the eAG from the HbA1C value, the following equation is used:
eAG(mg/dl) =28.7*A1c-46.7
- Interference of heamoglobinopathies in HbA1c estimation.
 - for HbF >25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring Diabetic status.
 - Heterozygous state detected (D10/turbo is corrected for HbS & HbC trait)
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control. Excellent control-6 to 7%, fair to good control -7 to 8%, unsatisfactory control -8 to 10 % and poor control -More than 10%

NOTE: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy

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Date : 27/01/2024 Reg. No : MA24010000303

Name : Ms. HEJEEBU PADMAJA

Age : 54yrs Sex : Female

Reference : APOLLO HEALTH AND LIFESTYLE LIMITED

Test Name	Result	Units	Ref.Interval
LIPID SCREEN, SERUM (Spectrophotometry)			
Cholesterol	186.00	mg/dL	(<200.00)
Triglycerides	143.00	mg/dL	(<150.00)
HDL Cholesterol	38.0	mg/dL	(<40.00)
LDL Cholesterol, Calculated	97.5	mg/dL	(<100.00)
VLDL Cholesterol, Calculated	28.6	mg/dL	(<30.00)

Note:

- Measurements in the same patient can show physiological & analytical variations.Three serial samples 1 week apart are recommended for Total cholesterol, Triglycerides, HDL & LDL Cholesterol.
- ATP III recommends a complete lipoprotein profile as the initial test for evaluating cholesterol.
- Friedewald equation to calculate LDL cholesterol is most accurate when Triglyceride level is <400 mg/dL. Measurement of Direct LDL cholesterol is recommended when Triglyceride level is >400 mg/dL.

INTERPRETATION	TOTAL CHOLESTEROL in mg/dL	Triglyceride in mg/dL	LDL CHOLESTEROL in mg/dL
Optimal	< 200	<150	<100
Above Optimal	-	-	100-129
Boderline High	200-239	150-199	130-159
High	>=240	200-499	160-189
Very High	-	>=500	>=190

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Name : Ms. HEJEEBU PADMAJA

Age : 54yrs

Sex : Female

Reference : Apollo Health and Lifestyle Limited

LIVER FUNCTION TEST

TEST	PATIENT'S VALUES	UNITS	NORMAL RANGE	
			FROM	TO
Serum Bilirubin (Total)	0.6	mg/dl	0.1	1.2
Serum Bilirubin (Direct)	0.1	mg/dl	-	<0.3
Serum Bilirubin (Indirect)	0.5	mg/dl	0.1	1
S. Alkaline Phosphatase	73.0	U/L	-	<150
Serum Gamma G.T.	13.0	U/L	4	40
Serum G. P. T.	15.0	U/L	10	40
Serum G. O. T.	17.0	U/L	10	42
Serum Total Proteins	7.3	gm/dl	6.0	7.8
Albumin	4.5	gm/dl	3.5	5.0
Globulin	2.8	gm/dl	2.6	3.5
Albumin: Globulin Ratio	1.6	-	-	-


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- KAKINADA** : 70-17-15/1,RR Nagar,Road No.2, Kakinada, Andhra Pradesh -533003.INDIA ☎ : 0884-2345555, 0884-3500132.

LABORATORY REPORT

Date : 27/01/2024 Reg. No : MA24010000303

Name : Ms. HEJEEBU PADMAJA

Age : 54Yrs Sex : Female

Reference : Apollo Health and Lifestyle Limited

<u>Tests</u>	<u>Value/Results</u>	<u>Units</u>	<u>Reference Interval</u>
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BIO-CHEMISTRY

Blood Sugar (F)	: 193	mg/dl	70-110
Blood Sugar (PPBS)	: 257	mg/dl	120-140

Deeksha
Dr. DEEKSHA. V. SHETTY
Reg.No. 32158
DGS Approval No. KAMG/09/2023

“HEALTHIER MARINERS TOWARDS A WEALTHIER NATION”



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LABORATORY REPORT

Reg. No : MA24010000305 Date: 27/01/2024

Name : Ms. HEJEEBU PADMAJA

Age : 54Yrs Sex: Female

Reference : Apollo Health and Lifestyle Limited

HAEMOTOLOGY

Blood Group & Rh Type : "B" POSITIVE


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LABORATORY REPORT

Reg. No : MA24010000303
Name : Ms. HEJEEBU PADMAJA (54/Female)
Reference : Apollo Health and Lifestyle Limited
Reported On : 27/01/2024

<u>TEST</u>	<u>Value/Results</u>	<u>Units</u>	<u>REFERENCE INTERVAL</u>
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RENAL FUNCTION TEST

Urea	:	20	mg/dL	15-40
Creatinine	:	0.8	mg/dL	0.2-1.2
BUN	:	09	mg/dL	6-21
Blood Uric Acid	:	5.1	mg/dL	4.7-6.1

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LABORATORY REPORT

Reg No : MA24010000303

Name : Ms. HEJEEBU PADMAJA Date :27/01/2024

Age : 54yrs Sex : Female

Reference : Apollo Health and Lifestyle Limited.

PERIPHERAL SMEAR EXAMINATION

RED BLOOD CELL MORPHOLOGY : **NORMAL**

W B C MORPHOLOGY : **NORMAL**

PLATELET MORPHOLOGY : **NORMAL**

Deeksha

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LABORATORY REPORT

Reg. No : MA24010000303 Date : 27/01/2024
Name : Ms. HEJEEBU PADMAJA
Age : 54yrs Sex : Female
Ref By : Apollo Health and Lifestyle Limited

Test Name	Result	Units	Ref.Range
THYROID PROFILE,TOTAL,SERUM (CLIA)			
T3>Total	156.0	ng/dl	(70-204)
T4>Total	8.10	ug/dL	(5.0-12.5)
TSH	2.3	uIU/ml	(0.45-4.5)

Reference Range for pregnancy:

TSH	REFERENCE RANGE IN Uiu/ml.
Pregnancy	
1 st Trimester	0.30-4.50
2 nd Trimester	0.50-4.60
3 rd Trimester	0.80-5.20

Note: 1 TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m. and a minimum between 6-10pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.

2 Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.

3 Physiological rise in Total T3 /T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic-Pituitary hypothyroidism
- Inappropriate TSH secretion
- Non thyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood

Deeksha

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DENTAL CERTIFICATE


LAST NAME	FIRST NAME	DATE OF BIRTH	CDC NO./PP. NO
	Ms. HEJEEBU PADMAJA	27/08/1969	402355826721

Please tick box if treatment pending or recommended

Please provide details of any dental/orthodontic work that is recommended or anticipated in the next 2 years.

-----NIL-----

Please tick box if no treatment pending or recommended

NAME OF DENTIST	QUALIFICATION OF DENTIST	SIGNATURE & STAMP	DATE
DR. S. NARESH	BDS	 BDS Reg. No.: 11291	27/01/2024

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DIGITAL RADIOGRAPH – CHEST PA- VIEW

Date : 27/01/2024 Reg. No : MA24010000303

Name : Ms. HEJEEBU PADMAJA

Age : 54 yrs

Sex : Female

Ref By : Apollo Health and Lifestyle Limited

The cardio mediastinal silhouette is normal.

The lungs are well inflated. No focal mass lesion, lobar collapse or consolidation is seen.

No pleural effusion is detected.

The soft tissues and bones appear unremarkable.

Conclusion:

- Normal chest radiograph.


Dr. DEEKSHA. V. SHETTY
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ECG REPORT

Date : 27/01/2024 Reg. No : MA24010000303

Name : Ms. HEJEEBU PADMAJA

Age : 54yrs

Sex : Female

Ref By : Apollo Health and Lifestyle Limited

Impression : Normal Sinus Rhythm.

Deeksha

Dr. DEEKSHA. V. SHETTY
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NAME : Ms. HEJEEBU PADMAJA

AGE/SEX : 54YRS /FEMALE

STUDY DATE : 27/01/2024

PATIENT ID : MA24010000303

Description: Female-Whole Abdomen REF. DOCTOR : Apollo Health and Lifestyle Limited

Real time B-mode ultrasonography of abdomen, KUB, Uterus and Ovaries Done.

Abdomen

Liver Filled with homogeneous parenchymal echoes. No abscess or mass lesion in the liver.
Gallbladder walls appeared normal. No calculi seen in the gallbladder.
Common duct appeared normal. No calculi seen in the common duct.
Pancreas appeared normal.
Spleen appeared normal.
No free fluid in the peritoneal cavity.
No Para aortic lymphadenopathy.
Adrenal glands appeared normal.

KUB

Cortex and collecting system of both kidneys appeared normal. No calculi seen.
Right Kidney measured 10.5x4.5cms.
Left Kidney measured 11.0x4.7cms.
Both Ureters appeared normal. No dilatation seen.
Bladder appeared normal.

Pelvis

Normal appearing uterus with homogenous myometrial echoes. Cavity echo appeared normal.
Right Ovary appeared normal. Left Ovary appeared normal. Both adnexae appeared normal.

Impression

- **NORMAL APPEARING LIVER, GALL BLADDER, COMMON DUCT, PANCREAS, SPLEEN, BOTH KIDNEYS, BLADDER, UTERUS BOTH OVARIES.**



భారత ప్రభుత్వం
Government of India



Aadhaar no. issued: 16/03/2012



హీజీబు పద్మజ
Hejeebu Padmaja
పుట్టిన తేదీ/DOB: 27/08/1969
స్వ/ FEMALE

ఆధార్ అనేది గుర్తింపు రుజువు మాత్రమే, పౌరసత్వం లేదా పుట్టిన తేదీ కాదు. ఇది ధృవీకరణతో మాత్రమే ఉపయోగించాలి (ఆన్‌లైన్ ప్రమాణీకరణ లేదా QR కోడ్ / ఆఫ్‌లైన్ XML యొక్క స్కానింగ్).

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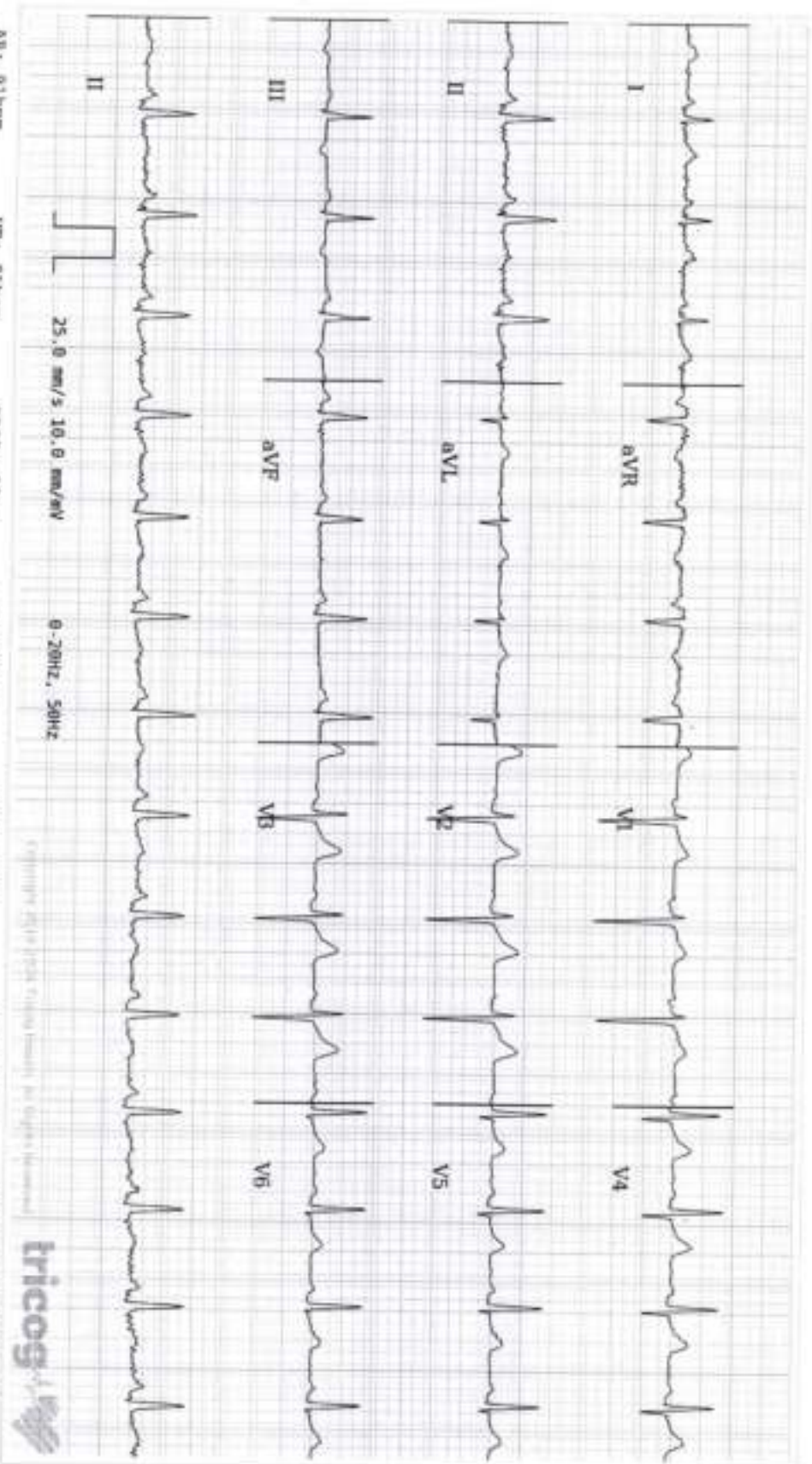
నా ఆధార్, నా గుర్తింపు



Balaji Medical Centre Mangalore

Age / Gender: 54/Female
Patient ID: MA24010000303

Date and Time: 27th Jan 24 12:14 PM



ECG Within Normal Limits: Sinus Rhythm. Please correlate clinically.

Disclaimer: Analysis in this report is based on ECG alone and should only be used as an adjunct to clinical history, symptoms and results of other tests and not intended to be interpreted by a qualified physician.

REPORTED BY

Dr. Anitha

MD: 200002914



Balaji Medical Centre Mangalore

Address: shree Heights building ,Shop no 5, Door no 1-65/31,Kulur-Kavoor,Airport Road Vivek Nagar Panjimogaru, Mangaluru 575013 Karnataka India

Echocardiography Report

PATIENT NAME HEJEEBU PADMAJA	AGE 54 yrs	HEIGHT 152 cm	WEIGHT 73 kg	BSA 1.70 m ²	DATE TIME 2024/01/27 15:25
PATIENT ID MA24010000303	GENDER Female	REFERRING PHYSICIAN DR.DEEKSHA..V.SHETTY	REPORTED BY DR. JEEVARATHINAM. N		

PROCEDURE

An ECHO exam was performed including 2D, M-mode, Spectral, Color-flow.

SUMMARY

Normal chambers size and shape
Normal left ventricular systolic function (Ejection Fraction - 66%)
No regional wall motion abnormality seen at rest
Left ventricular diastolic function - impaired relaxation
Normal valves
Trace pericardial effusion seen anterior to right ventricle
No evidence of intracardiac clot / vegetation

LEFT VENTRICLE

Measurement	Value	Reference	Measurement	Value	Reference
Systolic Function			Dimensions		
LVEF MOD A4C (%)	66.13	(74-54)	LVIDd (cm)	4.09	(3.8-5.2)
%FS (%)	45.23	(>25)	LVIDd Index (cm/m ²)	2.41	(2.3-3.1)
SV MOD A4C (ml)	64.93	(57-117)	LVIDs (cm)	2.24	(2.2-3.5)
SI MOD A4C (ml/m ²)	38.19	(38-66)	LVIDs Index (cm/m ²)	1.32	(1.3-2.1)
LVEDV MOD A4C (ml)	98.19	(46-106)	EPSS (cm)	0.42	(<7)
LVESV MOD A4C (ml)	33.26	(14-42)	IVSd (cm)	1.08	(0.6-0.9)
LVEDVInd MOD A4C (ml/m ²)	57.76	(29-61)	LVPWd (cm)	0.80	(0.6-0.9)
LVESVInd MOD A4C (ml/m ²)	19.56	(8-24)	LVd Mass (g)	120.71	(67-162)
Diastolic Function			LVd Mass Index (g/m ²)	71.01	(43-95)
MV E Vel (m/s)	0.36	(0.6-0.8)	RWT	0.39	(0.22-0.42)
MV A Vel (m/s)	0.50	(0.2-0.35)	LV Area		
MV E/A Ratio	0.72	(>=0.8)	LV FAC A4C (%)	50.86	(>25)
			LVAd A4C (cm ²)	27.27	(-)
			LVAAs A4C (cm ²)	13.40	(-)

LEFT ATRIUM

Measurement	Value	Reference	Measurement	Value	Reference
LA Diam (cm)	3.65	(2.7-3.8)	LAESV MOD A4C (ml)	31.09	(-)
LA/Ao	1.22	(<1.3)	LAESVInd MOD A4C (ml/m ²)	18.29	(16-34)

RIGHT ATRIUM

Measurement	Value	Reference
RAAs A4C (cm ²)	11.57	(<=18)
RALs A4C (cm)	4.19	(-)

AORTIC VALVE & AORTA

Measurement	Value	Reference
AV Outflow		
AV Vmax (m/s)	0.91	(<2.6)
AV maxPG (mmHg)	3.31	(<30)
LVOT/ Aorta		
Ao Diam (cm)	3.00	(<3.7)
Ao/LA	0.84	(-)

PULMONARY VALVE AND PULMONARY ARTERY

Measurement	Value	Reference
Pulmonary Outflow		
PV Vmax (m/s)	0.98	(-)
PV maxPG (mmHg)	3.84	(<36)

OBSERVATIONS :

Left Ventricle	Size - Left ventricle normal in size LV geometry - Normal LV geometry Systolic function - LV systolic function - normal Regional wall motion - No regional wall motion abnormality Diastolic function - LV diastolic function - impaired relaxation EPSS - Normal EPSS
Left Atrium	Size - Normal left atrium size
Right Atrium	Size - Normal right atrium size
Right Ventricle	Size - Normal right ventricular size Systolic function - Right ventricular systolic function - normal
Aortic Valve	Regurgitation - No aortic regurgitation
Mitral Valve	Regurgitation - Trivial mitral regurgitation
Tricuspid Valve	Regurgitation - Trivial tricuspid regurgitation
Pulmonic Valve	Regurgitation - No pulmonic regurgitation
Pericardium	Effusion - Trace pericardial effusion seen anterior to right ventricle
Inter Ventricular Septum	IVS - Intact interventricular septum
Inter Atrial Septum	IAS - Intact, thinned at fossa ovalis
Pulmonary Hypertension	Probability - Low probability of pulmonary hypertension
Heart Failure	HF Category - No evidence of heart failure with preserved ejection fraction

Disclaimer: This report is generated based on the review of Echocardiography images transmitted and does not consider the patient's current symptoms or medical history. The quality or accuracy of the report is dependent on the quality and accuracy of the Echo images transmitted. The report is not meant or valid for any medico legal purposes



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