- . COMPU. PATHOLOGY . ALLERGY TESTING
- DIGITAL WHOLE BODY X-RAYS
- DIGITAL 3D SONOGRAPHY
- DIGITAL WHOLE BODY COLOUR DOPPLER
- DIGITAL 2-D ECHO WITH COLOUR DOPPLER
- . E.C.G. . LUNG FUNCTION TEST

eGFR

- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY
- COMPUTERISED STRESS TEST
- DENTAL
- ADVANCED DENTISTRY
- PHYSIOTHERAPY
- AUDIOMETRY & SPEECH THERAPY
- FULL BODY HEALTH CHECK-UPS . CORPORATE HEALTH CHECKUPS





**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

29-May-2024 7:18 pm : MALE Age: 69 Years Report Date: **Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

### **BIOCHEMISTRY**

TEST RESULT **NORMAL VALUES** Blood Urea Nitrogen (BUN) 8.00 5 - 20 mg/dl **CREATININE** 1.1 mg/dl 0.7 - 1.3 mg/dl Serum Uric Acid 5.60 mg% Male 3.5 - 7.2 mg% Age of the Patient 69

eGFR calculation based on MDRD guideline 2012 More than 90 ml / min /1.73 Sqm - Normal eGFR

 $60\mbox{-}89\mbox{ ml}$  / min /  $1.73\mbox{ Sqm}$  - Mild decrease in eGFR is common in 30% healthy adults .

Suggest reapt testing in 6 to 12 months.

Exclude kidney disease in those at high risk (Diabetes & Hypertension

 $30-59 \; \text{ml} \; / \; \text{min} \; / 1.73 \; \text{Sqm} \; - \; \text{consistent with modrate chronic kidney disease if confirmed over}$ 

Consider nephrology referral if progressive deterioration of more than 20 % for Egfr or creatinine. 15 - 29 ml / min / 1.73 Sqm - Consistent with severe chronic kidney disease . Consider nephrology referral

70.54

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

ml/min

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- . CORPORATE HEALTH CHECKUPS





**Patient's Name** : MR SHIVKUMAR IYER

Referred By Dr : MEDIWHEEL

: MALE Age: 69 Years **Collected At** : GOREGAON MAIN BRANCH Lab No. : LEB6965 \*LEB6965\*

Report Date :

Reg. Date : 29-May-2024 8:23 am

29-May-2024 6:47 pm

**Print Date** : 30-May-2024 3:51 pm

## **BLOOD GROUP**

**TEST** RESULT

'O' **Blood Group** Rh Factor Positive

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Age: 69 Years







Report Date:

**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

**Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

### **BLOOD SUGAR REPORT**

TEST RESULT UNITS NORMAL VALUES

Normal: 70-110 mg/dL **BLOOD SUGAR FASTING** 142.7 mg/dL

mg/dl

Impaired Fasting Glucose(IFG):

29-May-2024 6:24 pm

110 -125

Diabetes mellitus: >= 126 (on more than one occassion)

Normal: 70-140 mg/dL

Impaired Tolerance: 140-199 Diabetes mellitus: >= 200 (on more than one occassion)

**BLOOD SUGAR (Post** 171.3

: MALE

prandial)

URINE SUGAR (Post prandial) Absent

Method: GOD - POD Enzymatic on Erba EM 200 Random access analyser

Comment:

Blood suagr values are known to be affected by several factors like food, stress and medication. So all discrepant results should be confirmed with repeat sample collection.

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

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Age: 69 Years





29-May-2024 4:55 pm

DR. BHAVINI KAMDAR

Report Date :

**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

: GOREGAON MAIN BRANCH **Collected At Print Date** : 30-May-2024 3:51 pm

### COMPLETE BLOOD COUNT

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
Haemoglobin	13.7	gm %	Male : 13 - 17.0 gm%
Erythrocytes ( Total RBCs)	4.95	mill. / cmm	Male: 4.2 - 5.8mill. / cmm
PCV	43.7	%	Male : 37 - 51 %
MCV	88.30	fl	80- 96 fl
MCH	27.70	pg	27 - 32 pg
MCHC	31.40	gm%	32 - 37 gm%
RDW	14.6	%	12 - 14.5
TOTAL WBC COUNT			
TOTAL WBC COUNT	5310	/ cumm	4,000 - 11,000
DIFFERENTIAL COUNT			
Neutrophils	54	%	40 - 75
Lymphocytes	33	%	20 - 40
Eosinophils	05	%	0 - 6
Monocytes	08	%	2 - 8
Platelet count	231000	Lacs/cmm	150000-450000
PERIPHERAL SMEAR			
RBC Morphology	Normocytic Normochromic		
WBC Morphology	Normal		
Platelets Morphology	Adequate		
ESR (westergren's method)	15	mm/hr	Male: 0 - 10 mm Female: 0 - 20 mm

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Age: 69 Years

164.25





DR. BHAVINI KAMDAR

Report Date :

**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

29-May-2024 6:59 pm **Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

# **GLYCOSYLATED HAEMOGLOBIN (HbA1c)**

TEST RESULT UNITS **NORMAL VALUES** 

7.35 HBA1C % 4 - 5.7 %

**ESTIMATED AVERAGE** 

**GLUCOSE** 

METHOD: NEPHELOMETRY

DIAGNOSTIC CRITERIA FOR DIABETES:

: MALE

Normal: Less than 5.7%

Impaired glucose tolerance: 5.8% to 6.4%

Diabetes: 6.5% or more

CONTROL CRITERIA IN DIABETICS:

Optimal control: 7.0% or less Fair control: 7.0% to 8.0% Poor control: More than 8.0%

#### Comment:

HbA1c values should not used in diagnosis of Diabetes Mellitus and are marker of glycaemic control in known cases of Diabetes Mellitus.

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

\* RECHECKED & CONFIRMED

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Age: 69 Years





29-May-2024 7:19 pm

DR. BHAVINI KAMDAR

Report Date :

**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

**Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

### LIPID PROFILE

<u>TEST</u>	RESULT	<u>UNITS</u>	NORMAL VALUES
SR. CHOLESTEROL	134	mg / dl	Desirable: < 200 mg/dl Borderline High: 200-239 mg/dl High: >= 240 mg/dl
SR. TRIGLYCERIDES	102.1	mg / dl	Normal: < 150 mg/dl Borderline High: 150-199 mg/dl High: 200-499 mg/dl Very High: >= 500 mg/dl
HDL CHOLESTEROL	41.2	mg / dl	 35.3 - 79.5 mg / dl 
VLDL	20.42	mg / dl	 6 - 38 mg / dl 
LDL CHOLESTEROL	72.38	mg / dl	Optimal: < 100 mg/dl Near Optimal: 100-129 mg/dl Borderline high: 130-159 mg/dl High: 160-189 mg/dl Very High: >= 190 mg/dl
CHOLESTEROL / HDL	3.25		  < 5
LDL / HDL	1.76	NCEP\	< 3.5

NOTE: Reference Interval as per National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report. Lower HDL values are associated with increased risk of atherosclerosis. Cholesterol/HDL Ratio below 5.1 is statistically associated with decreased incidence of heart disease.

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

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Age: 69 Years







DR. BHAVINI KAMDAR

Report Date :

**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

29-May-2024 7:19 pm : GOREGAON MAIN BRANCH : 30-May-2024 3:51 pm **Collected At Print Date** 

### LIVER FUNCTION TEST

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
Bilirubin Total	0.83	mg / dl	0 - 1.0 mg / dl
Bilirubin Direct	0.4	mg / dl	0 - 0.4 mg / dl
Bilirubin Indirect	0.43	mg/dl	UPTO 0.8 mg / dl
S.G.P.T.	12.0	U/L	Up to 45 U/L
S.G.O.T.	20.30	U/L	Up to 46 U/L
Alkaline Phosphatase	71.00	U/I	1 - 12 Years: 54 - 369 U/I
·			20 - 59 Years: 53 - 128 U/I
			> 60 Years: 56 - 119 U/I
Total Proteins	7	gm / dl	6.4 - 8.3 gm / dl
Albumin	3.94	gm / dl	3.5 - 5.2 gm / dl
Globulin	3.06	mg/dl	2 - 3.5 mg / dl
A / G Ratio	1.29	9	1.0- 2.3
GGT	25.4	IU/L	55 IU/L

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DR. BHAVINI KAMDAR

**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

29-May-2024 6:46 pm : MALE Age: 69 Years Report Date: **Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

**PSA** 

**RESULT** UNITS **NORMAL VALUES** 

Prostate Specific Antigen 2.430 ng/ml < = 4.03 ng/ml

Method CLIA

Interpretation:

PSA exists in serum mainly in two forms, complexed to alpha- 1 -anti-chymotrypsin and unbound (free PSA). Increases in prostatic glandular size and tisssue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations.

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

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- PHYSIOTHERAPY
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- FULL BODY HEALTH CHECK-UPS . CORPORATE HEALTH CHECKUPS

Age: 69 Years





Reg. Date

Report Date:

: LEB6965 \*LEB6965\*

: 29-May-2024 8:23 am

29-May-2024 6:25 pm

DR. BHAVINI KAMDAR

**Patient's Name** : MR SHIVKUMAR IYER

: MALE

Lab No.

Referred By Dr : MEDIWHEEL

**Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

## STOOL ROUTINE & MICROSCOPY

TEST RESULT

PHYSICAL EXAMINATION

Colour Brown Form (Consistency) Semisolid Absent Mucus Blood (Frank) Absent **Parasites** Absent

CHEMICAL EXAMINATION

Reaction Acidic Occult Blood Absent Reducing Substance Absent

MICROSCOPIC EXAMINATION

Red Blood Cells Not seen **Epithelial Cells** Not seen Pus Cells 1-2 / hpf Macrophages Not seen Cyst/Ova/Trophozoites Not seen Fat globules Absent

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

Printed By: RIYA

Checked By

JAY MD (PATH) MUM

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- FULL BODY HEALTH CHECK-UPS CORPORATE HEALTH CHECKUPS





**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Referred By Dr : MEDIWHEEL Reg. Date : 29-May-2024 8:23 am

29-May-2024 7:11 pm : MALE Age: 69 Years Report Date: **Collected At** : GOREGAON MAIN BRANCH **Print Date** : 30-May-2024 3:51 pm

#### **T3 T4 TSH**

TEST	RESULT	<u>UNITS</u>	NORMAL VALUES
T3 [ Tri - iodothyronine ] T4 [ Thyroxine ]	135.989	ng/dl	91.14 - 237.61 ng/dl
	6.211	ug/dl	4.71 - 13.20 ug/dl

HYPOTHYROID: Less than

4.71 µg/dl

TSH [Thyroid Stimulating uIU/mL 0.3 - 4.3 uIU/ml 1.293

Hormone1 Hypothyroid > 15.0

Hyperthyroid: < 0.3 First Trimester: 0.1 - 2.5 Second Trimester: 0.2 - 3.0 Third Trimester: 0.3 - 3.0

METHOD: CLIA Interpretation:

- 1. TSH results between 4.5 to 15 show considerable physiologic & seasonal variation, suggest clinical correlation or repeat testing with fresh sample
- 2. TSH values may be transiently altered because of non thyroidal illness like severe infections, liver disease, renal and heart failure, severe bums, trauma and surgery etc.
- 3. Drugs that decrease TSH values e.g.L dropa, Glucocorticoid Drugs that increase TSH values e.g lodine, Lithium, Amiodarone.
- 4.Total T3 & T4 Values may also be altered in other conditions due to changes in serum proteins or binding sites Pregnancy. Drugs (Androgens, Estrogens. O C Pills, Phenytoin). Nephrosis etc. In such cases Free T3 and Free T4 give corrected values.

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

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> Website: www.healthcarediag.com • E-mail: healthcare.medicals@gmail.com "Home Visit Facility Call On 76667 66307"

DR. BHAVINI KAMDAR

MD (PATH) MUM

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**Patient's Name** : MR SHIVKUMAR IYER Lab No. : LEB6965 \*LEB6965\*

Reg. Date Referred By Dr : MEDIWHEEL : 29-May-2024 8:23 am

: MALE Age: 69 Years Report Date: 29-May-2024 6:24 pm

: GOREGAON MAIN BRANCH : 30-May-2024 3:51 pm **Collected At Print Date** 

### **URINE ROUTINE & MICROSCOPY**

TEST RESULT

PHYSICAL EXAMINATION

15 ml Quantity Colour Pale yellow Appearance clear Deposit Absent рΗ Acidic (5.0) Specific Gravity 1.010

CHEMICAL EXAMINATION

Absent **Proteins** Sugar Absent Ketone Absent Occult Blood Absent Bile Pigment Absent Absent Bile Salts Urobilinogen Normal

MICROSCOPIC EXAMINATION OF CENTRIFUGED DEPOSIT

Red Blood Cells Absent

Pus Cells 1-2/ hpf /hpf **Epithelial Cells** 1-2/ hpf /hpf

Casts Not seen Crystals Not seen

Yeast Not seen Bacteria Absent

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

/hpf

Printed By: RIYA

Checked By

JAY

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# Health Check up Booking Confirmed Request(39E1032), Package Code-PKG10000476, Beneficiary Code-315934

2 messages

Mediwheel <wellness@mediwheel.in>

To: healthcare.medicals@gmail.com Cc: customercare@mediwheel.in

Mon, May 27, 2024 at 4:20 PM



011-41195959

### Hi Healthcare Medical Centre and Diagnostic,

The following booking has been confirmed. It is requested to honor the said booking & provide priority services to our client

Hospital Package : Mediwheel Full Body Health Checkup Male Above 40

**Patient Package** 

Name

: Mediwheel Annual Health checkup Male

Hospital Address: 10,76 Unnat Nagar CCI COL, M.G. Road, Nr. Jain Mandir, Goregaon (W),

**Contact Details** 

: 9870371422

Appointment Date: 29-05-2024

Confirmation

Status

: Booking Confirmed

Preferred Time

: 8:30am

Membe	r Information	
Booked Member Name	Age	Gender
SHIVKUMAR SUBRAMANIAM IYER	68 year	Male

We request you to facilitate the employee on priority.

Thanks. Mediwheel Team

Please Download Mediwheel App





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# भारत सरकार Unique Identification Authority of India Government of India

नोंदविण्याचा क्रमांक / Enrollment No 1207/35933/00321

शिवकुमार सुब्रमणियम अयर Shivkumar Subramaniam Iyer S/O: Subramaniam Iyer galaxy classique co,op, Society, B/202 off M G road near rajiv gandhi gardan mitha nagar Goregaon (West) Motilal Nagar Mumbai Mumbai Maharashtra 400104 9870371422

Ref: 223 / 08L / 337601 / 338286 / P



SH636368558FT

Dr. NUPUR RAI MBBS, DIPLOMA CARDIOLOGY (PGDCC)

Reg. No.: 2018115643

आपला आधार क्रमांक / Your Aadhaar No. :

9527 9269 6200

आधार - सामान्य माणसाचा अधिकार



Government of India



शिवकुमार सुब्रमणियम अयर Shivkumar Subramaniam Iyer जन्म तारीख / DOB : 01/09/1955

पुरुष / Male



9527 9269 6200

आधार - सामान्य माणसाचा अधिकार

HEALTHCARE MEDICAL CENTRE & DIAGNOSTICS UNNAT NAGAR, M. G. ROAD, GOREGAON (W), MUMBAI - 62. 65153030 / 65155050 8369137826

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- MAMMOGRAPHY & BONE MINERAL DENSITOMETRY
   CORPORATE HEALTH CHECKUPS

NAME

- COMPUTERISED STRESS TEST
- DENTAL
- ADVANCED DENTISTRY
- PHYSIOTHERAPY

MR SHIVKUMAR IYER

- AUDIOMETRY & SPEECH THERAPY





DATE



29/05/2024

NAME . MR SHIVKO	MARTIER	DATE	29/03/2024	
HEIGHT:- 170 CMS	WEIGHT: 88 KGS	AGE	69 YRS	
REFERRED BY ME	DIWHEEL	SEX	MALE	
PRESENT COMPLAINT:	NILof od exotofionarie	Tobo-els		7
	Sylpometries moves	BEAU SOLD		7
CURRENT MEDICATION	N:- NIL	Sternahypid		
PAST HISTORY :- CATA BACK	RACT OPERATION OF BOTH	HEYES 1 AND	HALF YEARS	
ALLERGY: NIL APPETITE: GOOD		BOWEL:- SLEEP: 1	NAD	-
HABITS: NIL		BLADDE	R:-NAD	
FAMILY HISTORY : NIL	- W - W	interest	mail oblique (c.t) em il oblique co to	_
GENERAL EXAMINATIO	ON: ADVICE	Δ.	-330	1
	4 /98 mm/Hg	The state of the s	0 11+	- 41
PALLOR: NO ICTE	CRUS: NO	, C 100	emplyom	
OEDEMA: NO CNS:	NAD · T	Tyciphor	46 500	Total M
PA: SOFT, NON TENDER	0.1		X.3	mnin .
- T	Reduce	Sugar	intelle	C.
	cals arterior	Salt 1	Malle	] .
RS : CLEAR, NAD	fif- [	rologist		
OTHERS: NAD	lepeal H	bAIC d	BSL FAP	alle 3 mm
INVESTIGATION:	(a) Arther of Dr	NUPUR RA	Al	
	MBBS DIPLO	OMA CARDIOLOG	SY (PGDCC)	
HEALTHCARE N	EDICAL REGS	OKES BONGEHT	984-[M.D.]	1
CENTRE & DIAG	NOSTICS Kup	Elevo	1 & B.P.	51
UNNAT NAGAR, M. GOREGAON (W), M	G. ROAD,		,	
65452020 / 654	FEORO			

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# **DENTAL CHECK UP**

NAME	M	- Shiv Kumal	. Type	DATE	29	05/2	24
REFERRED		mediwheel	AGE –	69 YRS	SEX	M	,

Frontal bolly
CHIEF COMPLATINT: Paro in the light upper molar
Exponential major Color
Platysma Stemoclaridomashoid
PAST DENTAL HISTORY: Implant of Right lower molar
touth do b
- (UCO) acse
HABITS: No branchi
Harvara Andrews
ORAL EXAMINATION: OF OSally hygiene fail
- Slight Hellowich adecides the
teeth -
All I
Carliest over lift & Right cepper
l lower molar teath
TREATMENT: NO mouth ulcels
TREATMENT.
Quadroccu temoris — Vadus laterate — Vactus medicia
Vastus intermedus
AND AND
Fautaris longue
Toule aritimo
Extensor digiturum longus ————————————————————————————————————
Extensiv fallucia long ra

HEALTHCARE MEDICAL CENTRE & DIO GNOSTICS UNNAT NAGAD VM. G. ROAD, GOREGAON (W), MUMBAI - 62. 65153030 / 65155050 8369137826

DR SIGNATURE

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# EYE CHECK UP & COLOUR VISION

NAME-MS. Shivkumar. Iyer REF- Mediwheel DATE- 29/05/24	AGE: 69 SEX: M
Brachardalla  Brachardalla  Pasor cerp judialis  Palmaria longue	Rectus abdominis  Transversus ebdominis  trisera oblique (Cut)  External oblique (Cut)

Qualdricega fem	RIGHT EYE	LEFT EYE
CORNEA	NORMAL	NORMAL
PUPIL	NORMAL	NORMAL
SCLERA	NORMAL	NORMAL
EYE MOVEMENTS	NORMAL	NORMAL
REFRACTIVE ERROR	+1.50	+1-25
COLOUR VISION	NORMAL (a) Anterior view	NORMAL

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NAME	MR SHIVKUMAR IYER	DATE	29.05.2024
*		AGE	69 YRS
REF. BY DR.	WEDIMHEEL	SEX	MALE

# X-RAY CHEST (PAVIEW).

The lungs on either side show equal transluceny

The cardiac size is normal.

The pleural spaces are normal.

The domes of the diaphragms are normal in position, and show smooth outline.

Ribs appear normal.

# **IMPRESSION:**

NO EVIDENCE OF PULMONARY, PLEURAL OR CARDIAC PATHOLOGY IS NOTED.

DR. ANIL SAXENA

(Consultant Radiologist)

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NAME: MR. SHIVKUMAR IYER

DATE: 29/05/2024.

**REF BY: MEDI WHEEL** 

AGE: 69 / MALE.

### **2D ECHOCARDIOGRAPHY**

# M Mode measurements: (mm)

Management of the Control of the Con		CONTRACTOR OF THE PROPERTY OF THE PARTY OF T	
LA	38	IVSd	13
AORTA	25	IVSs	12
LVIDd	40	PWd	14
LVIDs	26	PWs*	13

FS	32 %			
LVEF	60 %			

### 2D Echo findings:

**RWMA** None Aortic Valve Normal Mitral Valve Normal Tricuspid valve Trivial TR

PV/RVOT Normal IAS/IVS Intact Clot / vegetation Absent

Pericardium Normal: No effusion.

Doppler findings

: Mitral valve E vel 76 cm/s, A vel 98cm/s; E<A.

Type I LV Diastolic Dysfunction.

AV PG 3.7 mm HG.

No Pulmonary arterial hypertension (PASP by TR jet is 16 mmhg)

### **CONCLUSION:**

Mild concentric LVH.

Normal size cardiac chambers.

No regional wall motion abnormality at rest.

Type I LV diastolic dysfunction.

No Pulmonary arterial hypertension.

LVEF = 60 %, RVEF=50%.

DR. VISHWANATH S. YADAV DNB (MEDICINE), DNB(CARDIOLOGY), MNAMS, AFESC. INTERVENTIONAL CARDIOLOGIST

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NAME	MR SHIVKUMAR IYER	DATE	29.05.2024	
		AGE	69 YRS	
REF. BY	MEDIWHEEL	SEX	MALE	

## REAL TIME ABDOMINAL SONOGRAPHY SHOWS,

LIVER: Liver is normal in size showing bright parenchymal echotexture. There is no evidence of solid or cystic mass. The portal and the hepatic venous system appears normal.

Gall bladder: The Gall bladder is contracted.

**PANCREAS**: Pancreas is normal in size with smooth margin and homogenous paranchymal echotexture. No focal lesion seen.

**KIDNEYS**: Both kidneys are normal in size and shows homogenous cortical echotexture. Central calyceal echoes appears normal.

Two calculi measuring 5.9 mm & 6.3 mm are seen in the upper and lower pole of the right kidney. Few tiny calculi are also seen in the right kidney.

Two calculi measuring 4.4 mm & 3.3 mm are seen in the mid and lower pole of the left kidney. Few tiny calculi are also seen in the left kidney.

Multiple tiny parenchymal calcification is also seen in both the kidneys.

Few cortical cysts are seen in both the kidneys, largest measuring  $3.5 \times 3.2$  cm in the right kidney and  $3.0 \times 1.9$  cm in the left kidney.

- (a) Right kidney measures: 11.5 x 4.8 cms
- (b) Left kidney measures: 11.0 x 4.6 cms.

**SPLEEN**: The spleen is normal in size with homogenous paranchymal echotexture. No focal lesion are seen.

**URINARY BLADDER**: Urinary bladder is well distended. No evidance of calculus or intraluminal mass seen in the bladder.

Prevoid volume = 164 cc, Postvoid residue = nil.

PROSTATE: Prostate is mildly enlarged in size and volume is 27.9 cc.

#### IMPRESSION:

Grade I fatty liver.

Bilateral renal calculi and cysts. Multiple tiny parenchymal calcification is also seen in both the kidneys.

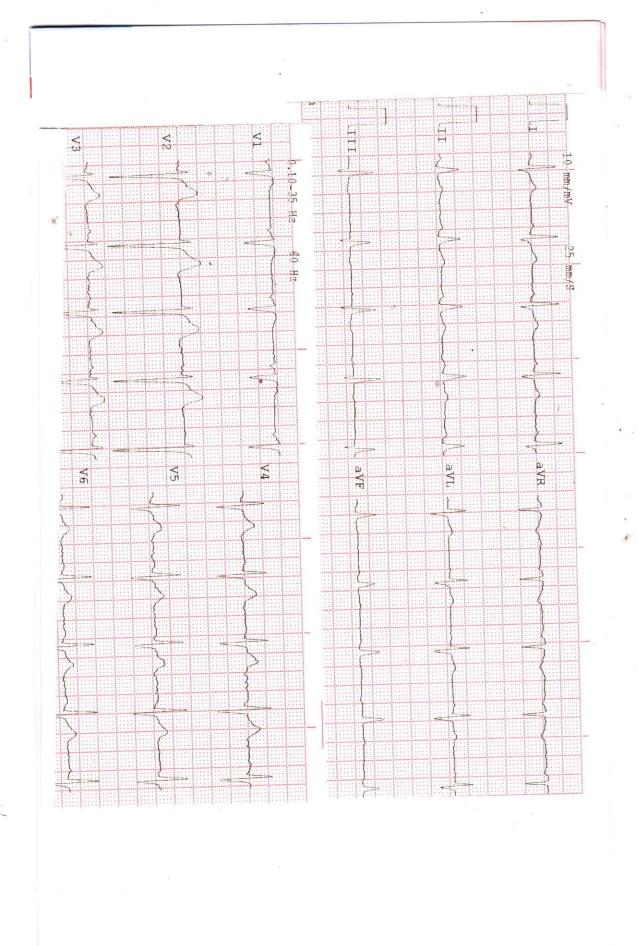
Mild prostatomegaly.



# DR. SHRIKANT BODKE. CONS.RADIOLOGIST.

Note: Investigations have their limitations. Solitary radiological investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Further / Follow-up imaging may be needed for confirmation of findings. Patient has been explained in detail about the USG findings measurements and limitations. In case of any typographical error in the report patient is requested to immediately contact the center for rectification, post which the center will not be responsible for any rectofication. Please interpret accordingly.

CENTRE & DIAGNOSTICS NT NAGAR. M. G. ROAD, BAON (W), MUMBAI - 62. ■ DIGITAL X-RAY COMPU. PATHOLOGY PATIENT No Shurkumas MAMMOGRAPHY & BONE MINERAL DENSITOMETRY (BMD) 2D ECHO CARDIOGRAPHY ■ DIGITAL COLOR DOPPLER DIGITAL SONOGRAPHY REF. BY DR. / 05155050 INTERPRETATION: ELECTROCARDIOGRAM (ECG) ... ■ HEALTH CHECK-UP PHYSIOTHERAPHY ■ ECG ■ PFT DENTAL COMPU. TREADMILL TEST Mediuhed THE AGE 69 SEX M DIPLOMA CARDIOLOGY (PGDCC)
Reg. No.: 2018115643 DATE 29/05/2024 MEDICAL CENTRE O NIAR IYER ELEB6965 29-May-2024



REMARKS & CONCLUSIONS:	Voltage:	Mechanism :	Rhythm:	Ventricular Rate:	Auricular Rate :	Standard:	Drugs:	B.P.	History:
LAM	Extra Systoles :	QT Internal :	T. Waves:	ST Sigment :	QRS Interval:	Q. Waves:	PR Interval :	P. Waves :	Axis: