



# 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.38, 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: MA24010000305

DATE:27/01/2024

## MEDICAL FITNESS CERTIFICATE

This is to certify that I have examined Ms. SUPRIYA ACHARYA (33/F)

Who is found to be Medically **FIT**.

She is not found to be suffering from any contagious Disease or Ailment.

She is **FIT** to perform her duty.

Dietary Counseling was provided from our end.

  
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: MA24010000305

Name : Ms. SUPRIYA ACHARYA (33/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	:	100/70mmHg
Pulse	:	70/min
Respiration Rate	:	16/min
Waist (cm)	:	85Cms
Height	:	157Cms
Weight	:	65.9Kgs
BMI	:	26.7 kg/m <sup>2</sup>

*Deeksha*

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**Name: Ms. SUPRIYA ACHARYA**

**Date: 27/01/2024**

**Reg. No : MA24010000305**

**Reference: Apollo Health and Lifestyle Limited**

## OPHTHALMIC REPORT

	RIGHT	LEFT
Distant:	6/6	6/6
Near:	N/5	N/5
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 : MA24010000305

NAME : Ms. SUPRIYA ACHARYA

AGE : 33YRS SEX : FEMALE

REF BY : Apollo Health and Lifestyle Limited

### COMPLETE BLOOD COUNT (CBC)

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
ERYTHROCYTE (RBC) COUNT	4.4	mill/cu.mm	4.7-6.0
HAEMOGLOBIN (Hb)	14.5	gm/dl	13.5-18
PCV (PACKED CELL VOLUME)	43.5	%	42-52
MCV (MEAN CORPUSCULAR VOLUME)	90.6	fl	78-100
MCH (MEAN CORPUSCULAR HAEMOGLOBIN)	31.0	pg	27-31
MCHC (MEAN CORPUSCULAR Hb CONC.N.)	36.0	g/dl	32-36
RDW (RED CELL DISTRIBUTION WIDTH)	13.4	%	11.5-14.0
TOTAL LEUCOCYTES (WBC) COUNT	9600	Cells /cu.mm	4000-10500
ABSOLUTE NEUTROPHILS COUNT	2900	/c.mm	2000-7000
ABSOLUTE LYMPHOCYTE COUNT	2890	/c.mm	1000-3000
ABSOLUTE MONOCYTE COUNT	460	/c.mm	200-1000
ABSOLUTE EOSINOPHIL COUNT	200	/c.mm	20-500
ABSOLUTE BASOPHIL COUNT	90	/c.mm	20-100
NEUTROPHILS	62.0	%	40-80
LYMPHOCYTES	30.0	%	20-40
MONOCYTES	5.0	%	2-10
EOSINOPHILS	2.0	%	1-6
BASOPHILS	1.0	%	0-2
PLATELET COUNT	3.6	10 <sup>3</sup> /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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 REF BY : Apollo Health and Lifestyle Limited

### ROUTINE EXAMINATION URINE

INVESTIGATION	OBSERVED VALUE	UNIT	BIOLOGICAL REFERENCE INTERVAL
<b><u>GENERAL EXAMINATION:</u></b>			
COLOUR	PALE YELLOW		PALE YELLOW
APPEARANCE	CLEAR		CLEAR
REACTION (pH)	5.0		4.5 - 8
SPECIFIC GRAVITY	1.010		1.010 - 1.030
<b><u>CHEMICAL EXAMINATION (AUTOMATED DIPSTICK METHOD):</u></b>			
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
<b><u>MICROSCOPIC EXAMINATION</u></b>			
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

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Date : 27/01/2024 Reg. No : MA24010000305  
Name : Ms. SUPRIYA ACHARYA  
Age : 33Yrs 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)	<b>20</b>	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.

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

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### BIOCHEMISTRY

<u>Investigation</u>	<u>Observed value</u>	<u>unit</u>	<u>biological reference interval</u>
HbA1c-Glycated Haemoglobin (HPLC)	4.6	%	non-diabetic: <= 5.6 pre-diabetic: 5.7-6.4 Diabetic : > = 6.5
Estimated Average glucose (eAG)	85.32	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 heamogloblinopathies 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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Age : 33yrs Sex : Female

Reference : APOLLO HEALTH AND LIFESTYLE LIMITED

Test Name	Result	Units	Ref.Interval
<b>LIPID SCREEN, SERUM (Spectrophotometry)</b>			
Cholesterol	194.00	mg/dL	(<200.00)
Triglycerides	142.00	mg/dL	(<150.00)
HDL Cholesterol	38.0	mg/dL	(<40.00)
LDL Cholesterol, Calculated	98.1	mg/dL	(<100.00)
VLDL Cholesterol, Calculated	28.4	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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Age : 33yrs Sex : Female

Reference : Apollo Health and Lifestyle Limited

### LIVER FUNCTION TEST

TEST	PATIENT'S	UNITS	NORMAL RANGE	
	VALUES		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 : MA24010000305  
Name : Ms. SUPRIYA ACHARYA  
Age : 33Yrs Sex : Female  
Reference : Apollo Health and Lifestyle Limited

<u>Tests</u>	<u>Value/Results</u>	<u>Units</u>	<u>Reference Interval</u>
<b><u>BIO-CHEMISTRY</u></b>			
Blood Sugar (F)	: 94	mg/dl	70-110
Blood Sugar (PPBS)	: 123	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

Name : Ms. SUPRIYA ACHARYA (33/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>
-------------	----------------------	--------------	---------------------------

## RENAL FUNCTION TEST

Urea	:	19	mg/dL	15-40
Creatinine	:	0.7	mg/dL	0.2-1.2
BUN	:	08	mg/dL	6-21
Blood Uric Acid	:	4.9	mg/dL	4.7-6.1

  
Dr. DEEKSHA. V. SHETTY  
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## LABORATORY REPORT

Reg. No : MA24010000305 Date: 27/01/2024  
Name : Ms. SUPRIYA ACHARYA  
Age : 33Yrs Sex: Female  
Reference : Apollo Health and Lifestyle Limited

### HAEMATOLOGY

Blood Group & Rh Type : "A" POSITIVE

  
Dr. DEEKSHA. V. SHETTY  
Reg.No. 32158  
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## LABORATORY REPORT

Reg No : MA24010000305

Name : Ms. SUPRIYA ACHARYA Date :27/01/2024

Age : 33yrs 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*  
DR. DEEKSHA. V. SHETTY  
Reg.No. 32150  
DGS Approval No. 1009/2023

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## LABORATORY REPORT

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

Name : Ms. SUPRIYA ACHARYA

Age : 33yrs Sex : Female

Ref By : Apollo Health and Lifestyle Limited

Test Name	Result	Units	Ref.Range
<b>THYROID PROFILE,TOTAL,SERUM (CLIA)</b>			
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
<b>Pregnancy</b>	
1 <sup>st</sup> Trimester	0.30-4.50
2 <sup>nd</sup> Trimester	0.50-4.60
3 <sup>rd</sup> Trimester	0.80-5.20

**Note:**1 TSH levels are subject to circadian variation, reaching peak levels between 2-4.a.m. and at 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*

**Dr. DEEKSHA. V. SHETTY**  
Reg.No. 32158  
DGS Approval No. KAMG/08/2023

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## DENTAL CERTIFICATE

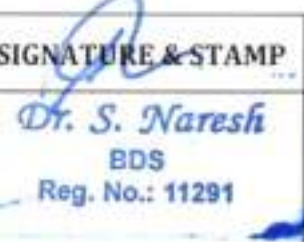
LAST NAME	FIRST NAME	DATE OF BIRTH	CDC NO./PP. NO
	Ms. SUPRIYA ACHARYA	16/06/1990	990319740973

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	 Dr. S. Naresh BDS Reg. No.: 11291	27/01/2024

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## DIGITAL RADIOGRAPH – CHEST PA- VIEW

Date : 27/01/2024 Reg. No : MA24010000305  
Name : Ms. SUPRIYA ACHARYA  
Age : 33 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.

*Deeksha*

Dr. DEEKSHA. V. SHETTY

Reg.No. 32158

DGS Approval No. KAMG/09/2023

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## ECG REPORT

Date : 27/01/2024 Reg. No : MA24010000305  
Name : Ms. SUPRIYA ACHARYA  
Age : 33yrs  
Sex : Female  
Ref By : Apollo Health and Lifestyle Limited  
Impression : Normal Sinus Rhythm.

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

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**NAME** : Ms. SUPRIYA ACHARYA

**AGE/SEX** : 33YRS /FEMALE

**STUDY DATE** : 27/01/2024

**PATIENT ID** : MA24010000305

**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

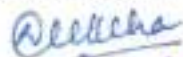
Cortex and collecting system of both kidneys appeared normal. No calculi seen.  
Right Kidney measured 9.4x4.3cms.  
Left Kidney measured 9.8x4.5cms.  
Both Ureters appeared normal. No dilatation seen.  
Bladder appeared normal.

## Pelvis

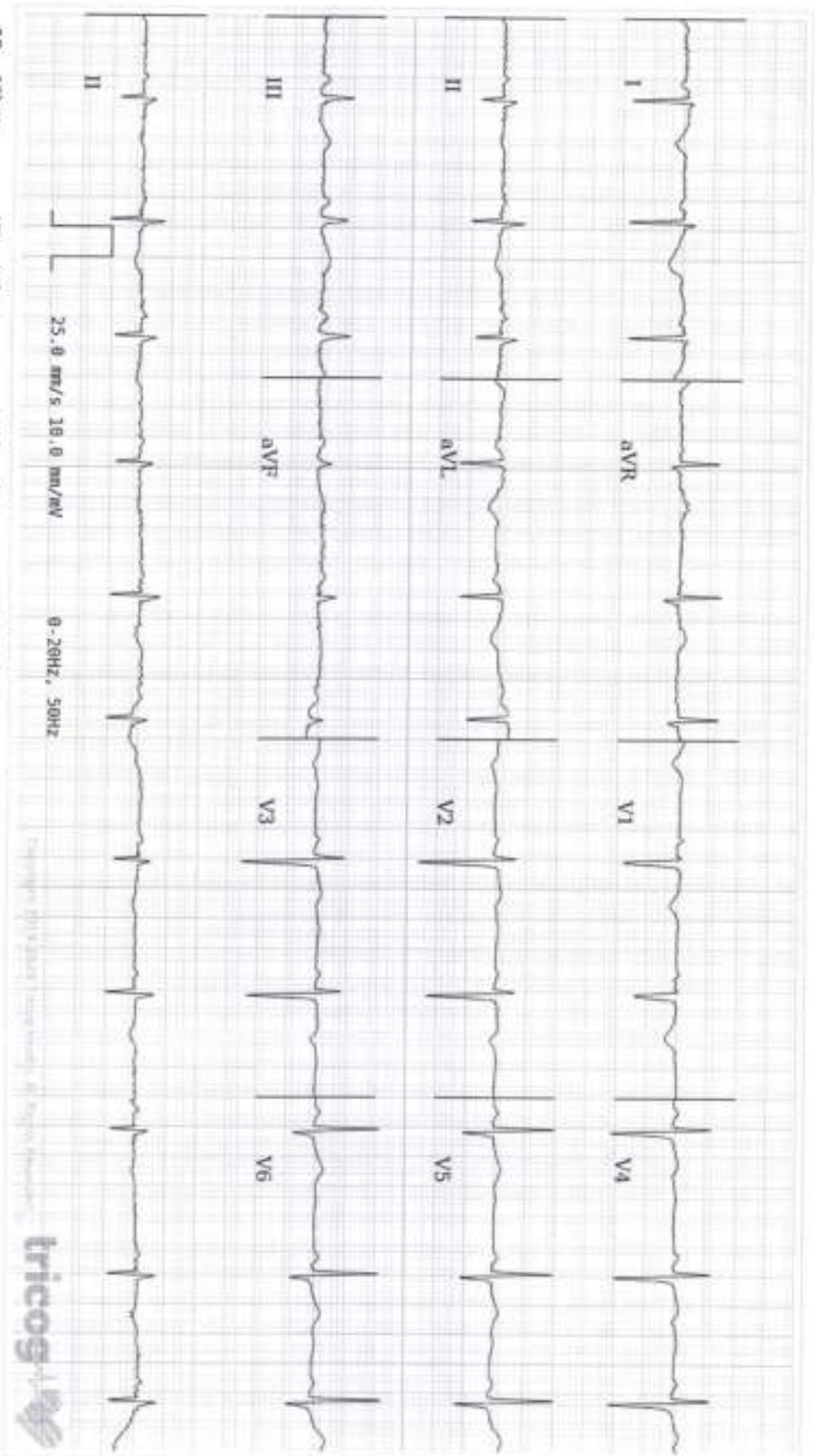
Normal appearing uterus with homogenous myometrial echoes. Cavity echo appeared normal.  
Right Ovary appeared normal. Left Ovary appeared normal. Both adnexae appeared normal.

## Impression

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

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

**“HEALTHIER MARINERS TOWARDS A WEALTHIER NATION”**



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

Disclaimer: Analysis in this report is based on ECG's done and should only be used as an adjunct to clinical history, symptoms and results of other investigative and non-invasive tests and must be interpreted by a qualified physician.

REPORTED BY

Dr. Senthil Kumar George





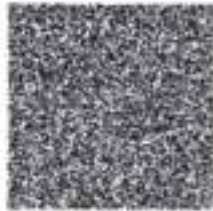
ಭಾರತ ಸರ್ಕಾರ  
Government of India

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Unique Identification Authority of India

ಸೋಂಪದ ಸಂಖ್ಯೆ Enrolment No.: 0804/16453/59943

To  
ಫ್ರಿಯಾ ಅಚಾರ್ಯ  
Supriya Acharya  
3-25 SARASWATHI NILAYA  
PAKSHKERE  
Kemral  
Dakshina Kannada Karnataka - 574146  
8494840654

Signature valid



ನಿಮ್ಮ ಅಧಾರ್ ಸಂಖ್ಯೆ / Your Aadhaar No. :

**9903 1974 0973**

VID : 9124 0178 6753 1325

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ಭಾರತ ಸರ್ಕಾರ  
Government of India



ಫ್ರಿಯಾ ಅಚಾರ್ಯ  
Supriya Acharya  
ಜನನ ದಿನಾಂಕ(DOB): 16/06/1990  
♀/FEMALE

**9903 1974 0973**

VID : 9124 0178 6753 1325

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Barcode  
0804/16453/59943



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# Balaji Medical Centre Mangalore

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## Echocardiography Report

<b>PATIENT NAME</b> ACHARYA SUPRIYA	<b>AGE</b> 33 yrs	<b>HEIGHT</b> 157 cm	<b>WEIGHT</b> 66 kg	<b>BSA</b> 1.67 m <sup>2</sup>	<b>DATE   TIME</b> 2024/01/27   15:16
<b>PATIENT ID</b> MA24010000305	<b>GENDER</b> Female	<b>REFERRING PHYSICIAN</b> DR.DEEKSHA.V.SHETTY	<b>REPORTED BY</b> DR. JEEVARATHINAM. N		

### PROCEDURE

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

### SUMMARY

Normal chamber size and shape  
Normal Left Ventricular systolic function, Ejection Fraction=55-60% [eyeball assessment]  
No regional wall motion abnormality  
Normal Left Ventricular diastolic function  
Normal valves  
No intracardiac clot/vegetation/pericardial effusion

### LEFT VENTRICLE

Measurement	Value	Reference	Measurement	Value	Reference
<b>Systolic Function</b>			<b>Dimensions</b>		
EF(Teich) (%)	58.20	( 74-54 )	LVIDd (cm)	4.30	( 3.8-5.2 )
SV(Teich) (ml)	48.35	( 57-117 )	LVIDd Index (cm/m <sup>2</sup> )	2.57	( 2.3-3.1 )
SI(Teich) (ml/m <sup>2</sup> )	28.95	( 38-66 )	LVIDs (cm)	2.99	( 2.2-3.5 )
EDV(Teich) (ml)	83.07	( 46-106 )	LVIDs Index (cm/m <sup>2</sup> )	1.79	( 1.3-2.1 )
ESV(Teich) (ml)	34.72	( 14-42 )	IVSd (cm)	0.83	( 0.6-0.9 )
<b>Diastolic Function</b>			LVPWd (cm)	0.83	( 0.6-0.9 )
MV E Vel (m/s)	0.63	( 0.6-0.8 )	LVd Mass (g)	110.59	( 67-162 )
MV A Vel (m/s)	0.32	( 0.2-0.35 )	LVd Mass Index (g/m <sup>2</sup> )	66.22	( 43-95 )
MV E/A Ratio	1.97	( >=0.8 )	RWT	0.39	( 0.22-0.42 )

### LEFT ATRIUM

Measurement	Value	Reference
LA Diam (cm)	2.61	( 2.7-3.8 )
LA/Ao	1.08	( <1.3 )

### RIGHT ATRIUM

Measurement	Value	Reference
<b>IVC (M-Mode)</b>		
IVC Collaps Index (%)	52.94	( >50% )
IVC Diam Ins (cm)	0.48	( - )
IVC Diam Exp (cm)	1.02	( <2 )
RAP(MM) (mmHg)	3.00	( 0-5 )

### AORTIC VALVE & AORTA

Measurement	Value	Reference
<b>AV Outflow</b>		

AV Vmax (m/s)	0.71	(<2.6)
AV maxPG (mmHg)	2.02	(<30)
<b>LVOT/ Aorta</b>		
Ao Diam (cm)	2.42	(<3.7)
Ao/LA	0.70	(-)

### TRICUSPID VALVE

Measurement	Value	Reference
TR Vmax (m/s)	1.20	(<2.8)
TR maxPG (mmHg)	5.76	(<35)
RVSP (mmHg)	8.76	(<36)

### PULMONARY VALVE AND PULMONARY ARTERY

Measurement	Value	Reference
<b>Pulmonary Outflow</b>		
PV Vmax (m/s)	0.77	(-)
PV maxPG (mmHg)	2.37	(<36)

### OBSERVATIONS :

<b>ECG</b>	Rhythm - Sinus rhythm
<b>Left Ventricle</b>	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 - normal
<b>Left Atrium</b>	Size - Normal left atrium size
<b>Right Atrium</b>	Size - Normal right atrium size
<b>Right Ventricle</b>	Size - Normal right ventricular size
<b>Aortic Valve</b>	Structure and function - Normal trileaflet aortic valve Regurgitation - No aortic regurgitation
<b>Mitral Valve</b>	Structure and function - Normal mitral valve Regurgitation - Trivial mitral regurgitation
<b>Tricuspid Valve</b>	Structure and function - Normal tricuspid valve Regurgitation - Trivial tricuspid regurgitation
<b>Pulmonic Valve</b>	Structure and function - Normal pulmonic valve Regurgitation - Trivial pulmonic regurgitation
<b>Pericardium</b>	Effusion - No pericardial effusion
<b>Inferior Vena Cava</b>	Size - Normal IVC size
<b>Inter Ventricular Septum</b>	IVS - Intact interventricular septum
<b>Inter Atrial Septum</b>	IAS - Intact, thinned at fossa ovalis
<b>Pulmonary Hypertension</b>	Probability - Low probability of pulmonary hypertension

**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



**Reported By:**  
DR. JEEVARATHINAM. N  
Clinical Cardiologist

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