

Health Check up Booking Request(bobS18522)

Mediwheel <wellness@mediwheel.in>

Tue 26-03-2024 04:17

To:Amitabh Barman <AMITABH.BARMAN@bankofbaroda.com>

Cc:customercare@mediwheel.in <customercare@mediwheel.in>

You don't often get email from wellness@mediwheel.in. [Learn why this is important](#)

डोमेन के बाहर से आया है. अगर आप प्रेषक को नहीं जानते तो मेल में दी गयी लिंक पर क्लिक ना करें
MAIL IS ORIGINATED FROM OUTSIDE OF THE BANK'S DOMAIN. DO NOT CLICK ON L

011-41195959

Dear Amitabh Barman,

We have received your booking request for the following health checkup, please upload your approval letter as soon as possible to enable us to confirm your booking.

[Upload HRM Letter](#)

User Package Name : Mediwheel Full Body Health Checkup Female Below 40

Name of Diagnostic/Hospital : Shree Ram multispeciality Hospital

Address of Diagnostic/Hospital : Gate No.1, Basant Vihar, near Railway Under Bridge, Gondwara Chowk, Gudhiyari, Raipur, Chhattisgarh- 492001

Appointment Date : 29-03-2024

Preferred Time : 8:00am

Member Information		
Booked Member Name	Age	Gender
ASHMITA DAS BARMAN	29 year	Female

Tests included in this Package

- Bmi Check
- Pap Smear
- Ent Consultation
- Dietician Consultation
- Gynae Consultation
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen



भारतीय विशिष्ट पहचान प्राधिकरण
भारत सरकार
 Unique Identification Authority of India
 Government of India

Enrolment No.: 0648/04222/63190.

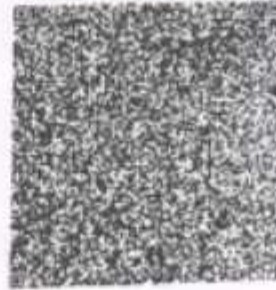
Download Date: 10/08/2019

To
 Ashmita Das Barman
 NIRANJAN NAGAR
 BOSEBAGAN
 Garulia
 Garulia
 North 24 Parganas West Bengal - 743133
 7605855688

Generation Date: 20/11/2014

Signature valid

DATE: 20/11/2014
 TIME: 13:03:17
 AUTHORITY: UIDAI



UIDAI Logo with watermark

आपका आधार क्रमांक / Your Aadhaar No. :

6654 3819 1654

VID : 9105 1408 8423 4903

मेरा आधार, मेरी पहचान

Ashmita Das Barman

9748241975



भारत सरकार
 Government of India



Ashmita Das Barman
 Date of Birth/DOB: 24/04/1994
 Female/ FEMALE

6654 3819 1654

VID : 9105 1408 8423 4903

मेरा आधार, मेरी पहचान





Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

OPD - ID : 020240000748
UH-ID : SRMH-2403227B

PT. TYPE : NEW REGISTRATION
PRINT DATE : 29-03-2024 / 09:57:42AM
TOKEN NO. : 2

PATIENT NAME	: ASHMITA DAS BARMAN	DEPARTMENT	: OBS & GYNE
AGE / SEX	: 29-Y 11-M 6-D / FEMALE	CONSULTANT	: DR. ARPITA NAMDEV YADAV
DOB	: 24-04-1994	CONSULT-DATE	: 29-Mar-2024 - 09:53 AM
MOB-NO	: 9748291975	COMPANY NAME	: MEDIWHEEL FULL BODY HEALTH ANNUAL
GUARDIAN NAME	: W/o AMITABH BARMA	OPD PAID FEE	: 0.00
ADDRESS	: NIRANJAN NAGAR BOSE BAGAN GARULIA, RAIPUR, CG		

Weight : 59 kg Temp : 97.6 Kg B.P. : 130/80 Pulse : 75 b/m SPO2 : 97%



No Complaint

*P.4 →
P.4 → M/A/H/R
Non lactating*

Pain → keto colonies & H-

Family → NIL

Bitahand breast

PA → eye no discharge

*Imp → 20/10
MH → 3-4
28-200*

Flow

*NO active intervention
needed*



FOLLOW-UP DATE :

ADVICE FOR ADMISSION

YES NO

● Near Railway Under Bridge, Basant Vihar Gate No. 1, Gondwara Chowk, Gudhiyari, Raipur (Chhattisgarh)

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Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu

EXAMINATION OF EYES:- (BY OPHTHALMOLOGIST)

Patient Name Ms. Ashwita Das Borman

Date 29/03/24

Sex/ Age 24 Y/F

UHID.....

EXTERNAL EXAMINATION				
SQUINT				
NYSTAGMUS				
COLOUR VISION				
FUNDUS : (RE):-				
INDIVIDUAL COLOUR IDENTIFICATION				
DISTANT VISION:(RE):-				
NEAR VISION:(RE):-				
NIGHT BLINDNESS				
	SPH	CYL	AXIS	ADD
RIGHT				
LEFT				
REMARKS:-				

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L o k a h S a m a s t a S u k h i n o B h a v a n t u

OPD - ID : 020240000748 PT. TYPE : NEW REGISTRATION
 UH-ID : SRMH-24032278 PRINT DATE : 29-03-2024 / 10:19:19 TOKEN NO. : 2

PATIENT NAME	: ASHMITA DAS BARMAN	DEPARTMENT	: ENT
AGE / SEX	: 29-Y 11-M 6-D / FEMALE	CONSULT-DATE	: 29-Mar-2024 - 09:53 AM
DOB	: 24-04-1994	COMPANY NAME	: MEDIWHEEL FULL BODY HEALTH ANNUAL PLUS
MOB-NO	: 9748291975	OPD PAID FEE	: 0.00
GUARDIAN NAME	: W/o AMITABH BARMA		
ADDRESS	: NIRANJAN NAGAR BOSE BAGAN GARULIA, RAIPUR, CG		

Weight : Temp : B.P. : Pulse : SPO2 :

Please indicate whether you are presently suffering from anyone of the following symptoms:

	Yes	No
Ears, Nose, Mouth, Throat		
Ear pain	0	0
Ear itch	0	0
Ear drainage	0	0
Dizziness/ Loss of balance	0	0
Loss of Hearing	0	0
Popping Noise	0	0
Tinnitus	0	0
Nosebleeds	0	0
Post-nasal Drip	0	0
Sinus pain	0	0
Sinus pressure	0	0
Nasal congestion	0	0
Loss of smell/taste	0	0
Hoarseness	0	0
Sore Throat	0	0
Throat tickle	0	0
Dry Mouth / Throat	0	0
Throat clearing	0	0
Snoring	0	0

Present chief complaints:-

*At present No Active intervention Required
 No fresh complaints*

Dr. Signature

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Lokah Samasta Sukhino Bhavantu

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UH-ID : SRMH-24032278 PRINT DATE : 29-03-2024 / 10:19:19 TOKEN NO. : 2

PATIENT NAME	: ASHMITA DAS BARMAN	DEPARTMENT	: DENTAL
AGE / SEX	: 29-Y 11-M 6-D / FEMALE		
DOB	: 24-04-1994	CONSULT-DATE	: 29-Mar-2024 - 09:53 AM
MOB-NO	: 9748291975	COMPANY NAME	: MEDIWHEEL FULL BODY HEALTH ANNUAL PLUS
GUARDIAN NAME	: W/o AMITABH BARMA	OPD PAID FEE	: 0.00
ADDRESS	: NIRANJAN NAGAR BOSE BAGAN GARULIA, RAIPUR, CG		
Weight :	Temp :	B.P. :	Pulse :
			SPO2 :

Please indicate whether you are presently suffering from anyone of the following symptoms:

Oral Health Status:

- Yes No Dental Sealants Present on Permanent Molars
- Yes No Caries Experience / Restoration History : A filling (Temporary / Permanent) OR a Tooth that is missing because it was extracted as a result of caries .
- Yes No Untreated Caries/ Open Treatment Plan
- Yes No Urgent Treatment: abscess, Nerve Exposure, Advanced Disease State, Signs of Symptoms that include pain/ infection / swelling

Treatment Needs: *No Active dental intervention required in this case.*

- Restorative Care- Fillings, crowns, etc.
- Preventative Care-prophylaxis, sealants, fluoride Treatment
- Sedation / Surgery Needs to Complete Treatment

Present chief complaints:-

Dr. Signature

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PT. NAME : ASHMITA DAS BARMAN
MOBILE NO : 9748291975
DOCTOR : DR. ARPITA NAMDEV YADAV
REFERED BY : SELF

AGE / SEX : 29/FEMALE
UH ID NO. : SRMH-24032278
COLLECTION : 29-03-2024
REPORTING : 29-Mar-2024

TEST NO
432

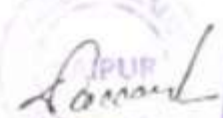
HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
CBC (COMPLETE BLOOD COUNT)			
HAEMOGLOBIN (Hb)	9.9	gm/dL	13.5 - 17.5
TOTAL RBC COUNT	3.70	Million/cumm	4.5 - 5.9
HAEMATOCRIT (PCV)	29.7	%	41.5 - 50.4
RBC INDICES			
MCV	83.5	f l	78 - 96
MCH	26.7	pg	27 - 32
MCHC	31.9	%	33 - 37
RDW	14.5	%	11 - 16
TOTAL WBC COUNT (TLC)	9800	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
Neutrophils	67	%	40 - 70
Lymphocytes	25	%	22 - 48
Eosinophils	03	%	0 - 6
Monocytes	05	%	0 - 8
Basophils	00	%	00 -
PLATELET COUNT	3.17	/μL	1.50 - 4.50
PCT	0.34	%	0.10 - 0.28
MPV(MEAN PLATELET VOLUME)	10.7	fL	8 - 11
PDW	13.9	%	11 - 18

-- End Of Report --

LAB TECHNICIAN

Note : This Report is not for medicolegal purpose


 Dr. Durannjay Prasad
 (MD.PATHOLOGY)

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Lokah Samasta Sukhino Bhavantu

PT. NAME : **ASHMITA DAS BARMAN**
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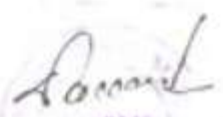
HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
ESR (ERYTHROCYTE SEDIMENTATION RATE)			
ESR	45	mm after 1 hrr	0 - 20

-- End Of Report --

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HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"B"	-	-
RH FACTOR	POSITIVE	-	-

-- End Of Report --

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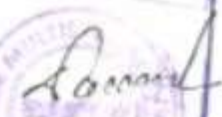
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD SUGAR - FASTING AND PP			
BLOOD SUGAR FASTING	75.3	mg/dL	60 - 120
BLOOD SUGAR PP	130.1	mg/dL	80 - 140

-- End Of Report --

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TEST NO
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CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE SUGAR FASTING AND PP			
URINE SUGAR - FASTING	Absent		Absent -
URINE SUGAR - PP	Absent		Absent -

-- End Of Report --

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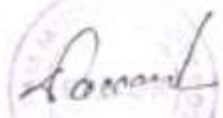
BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIPID PROFILE			
CHOLESTEROL	196.4	mg / dl	150 - 220
SERUM TRIGLYCERIDE	117.3	mg / dl	60 - 165
HDL	38.2	mg / dl	35 - 80
LDL	134.74	mg/dL	90 - 160
VLDL	23.46	mg/dl	20 - 50
CHOLESTEROL / HDL RATIO	5.14	mg/dl	3.5 - 5.5
LDL/HDL Ratio	3.53	mg/dl	2.5 - 3.5
TRIGLYCERIDES/HDL RATIO	3.07	mg/dl	2.0 - 4.0

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TEST NO : 432

BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
HbA1c (GLYCOSYLATED HEAMOGLOBIN)			
HbA1c	4.54	%	Normal Range : <6% - Good Control : 6 - 7% - Fair Control : 7 - 8% - Unsatisfactory Control : 8-10% - Poor Control : >10% -
Estimated average plasma glucose	84.324	mg/dl	80 - 120

Interpretation: As per American Diabetes Association(ADA)

Non diabetic adults >= 18 years	<5.7
At risk (prediabetes)	5.7 - 6.4
Diagnosing Diabetes	>= 6.5
Therapeutic goals for glycaemic control	Good of Therapy > 19 years - <7.0 <19 years - <7.5

NOTE:

- HbA1c reflects long term fluctuations in the blood glucose concentration
- A diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled.


Significance of Test:

HbA1c provides an index of average blood glucose levels over the past 8-12 weeks and is a much better indicator of long term glycaemic control as compared to blood and urinary glucose determinations.

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	0.52	mg/dL	0.2 - 1
BILIRUBIN DIRECT	0.25	mg / dl	0.1 - 0.6
BILIRUBIN INDIRECT	0.27	mg / dl	0.1 - 0.4
SGOT	25.4	U / L	10 - 55
SGPT	20.5	U / L	0 - 40
ALKALINE PHOSPHATASE	178.3	U / L	0 - 270
TOTAL PROTEIN	6.27	g / dl	6 - 8
ALBUMIN	3.61	g/dl	3.5 - 5.0
GLOBULIN	2.66	g / dl	2 - 3.5
A/G RATIO	0.95	g/dl	1 - 2.5

Clinical Significance:

Alanine transaminase (ALT)

ALT is an enzyme found in the liver that helps your body metabolize protein. When the liver is damaged, ALT is released into the bloodstream and levels increase.

Aspartate transaminase (AST)

AST is an enzyme that helps metabolize alanine, an amino acid. Like ALT, AST is normally present in blood at low levels. An increase in AST levels may indicate liver damage or disease or muscle damage.

Alkaline phosphatase (ALP)

ALP is an enzyme in the liver, bile ducts and bone. Higher-than-normal levels of ALP may indicate liver damage or disease, such as a blocked bile duct, or certain bone diseases.

Albumin and total protein

Albumin is one of several proteins made in the liver. Your body needs these proteins to fight infections and to perform other functions. Lower-than-normal levels of albumin and total protein might indicate liver damage or disease.


Bilirubin

Bilirubin is a substance produced during the normal breakdown of red blood cells. Bilirubin passes through the liver and is excreted in stool. Elevated levels of bilirubin (jaundice) might indicate liver damage or disease or certain types of anemia.

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
	CREATININE		
CREATININE	0.71	mg / dl	0.6 - 1.2

-- End Of Report --

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
	URIC ACID		
URIC ACID	4.91	mg/dL	3.6 - 7.7

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MRS. ASHMITA DAS BARMAN Sample Collected At : Registered : 29 Mar,24 11:51 AM
Age: 29 Years Ref By : **DR. ARPITA NAMDEV** Collected : 29 Mar,24 11:56 AM
Sex: Female Reported : 30 Mar,24 5:50 PM

GAMAMA GLUTAMYL TRANSFERASE (GGT)

INVESTIGATION	RESULT	REFERENCE VALUE	UNIT
GAMMA – GLUTAMYL TRANSFERASE	17.10	12.00-18.00	U/L

(GGT) , SERUM

GENDER	-	NORMAL RANGE(U/L)
MALE	-	12.00-18.00
FEMALE	-	6.00-29.00

COMMENTS:-

Gamma – Glutamyl Transferase (Ggt) is An Enzyme That is Found in Many Organs Throughtout The Body , With The Highest Concentrations Found In The Liver .Ggt is Elevated In The Blood in Most Diseases That Cause Damage To The Liver Or Bile Ducts ,This Test Measures The Level Of Ggt In A Blood Samle.

DR. DHANJAY PRASAD
(Signature)
(MD Pathology)



MRS. ASHMITA DAS BARMAN

Age: 29 Years

Sex: Female

Sample Collected At:

Ref. By: **DR. ARPITA NAMDEV**

Registered: 29 Mar, 24 12:22 PM

Collected: 29 Mar, 24 12:30 PM

Reported: 30 Mar, 24 09:40 AM

BUN / Creatinine Ratio PANAL

Investigation	Observed Value	Unit	Biological Reference Interval
BUN			
BUN	10.18	mg/dL	7.00 - 20.00
Serum Creatinine	0.71	mg/dL	0.55 - 1.20
BUN / Creatinine Ratio	14.33		10:1 - 20:1

Blood urea nitrogen (BUN) is a waste product produced when the liver breaks down protein. The kidneys then filter it out of the blood and eliminate it through urine. Creatinine is a waste product created by the breakdown of phosphocreatine, a molecule stored in muscle tissue. The kidneys filter creatinine from the blood, and its levels in the body reflect the efficiency of the kidney's excretory function. therefore, BUN and creatinine are useful markers in assessing kidney health because they help doctors evaluate the kidney's filtration rate.



Dr. D. Prasad
M.D. (Pathologist)

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Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

MRS. ASHMITA DAS BARMAN

Age: 29 Years

Sex: Female

Sample Collected At:

Ref. By: **DR. ARPITA NAMDEV**

Registered: 29 Mar, 24 11:25 PM

Collected: 29 Mar, 24 11:234 PM

Reported: 29 Mar, 24 06:00 PM

TFT

Thyroid Function Test (TFT)

Investigation	Observed Value	Unit	Biological Reference Interval
THYROID SERUM HORMONS			
Serum Triiodothyronine (T3)	1.01	ng/mL	0.89 - 1.87
Serum thyroxine (T4)	12.52	ug/dL	5.1 - 14.28
Thyroid Stimulating Hormone (TSH)	0.88	µIU/mL	0.66 - 5.67

Comments:-

- (i) Ethnicity, iodine intake, gender, age, body mass index and Exercise influences the reference range of Thyroid hormones and serum TSH concentrations.
- (ii) Changes in Thyroid Hormones (especially T3) and TSH may be seen as early as 24 hours after the onset of non-thyroidal illness. (Poor nutrition/starvation, sepsis, burns, malignancy, myocardial infarction, post-surgery, and with chronic liver and renal disease)
- (iii) Serum total T4 and T3 concentrations increase to approximately 150% of non-pregnant values – this occurs during the first half of pregnancy and is maintained thereafter until parturition. Free T4 concentrations also change during pregnancy: in the first trimester a transient rise is often observed.
- (iv) Measurement of FT4 and FT3 is best avoided in patients receiving heparin therapy. (When indicated, blood sample should be taken 10 hours after the last injection of heparin, and analyzing it without delay, can reduce the risk of artifactual hyperthyroxinaemia.)
- (v) Phenytoin, carbamazepine and furosemide cause artifactual increase in free T4 (FT4) and decrease in total T4.


Dr. D. Prasad
 M.D. (Pathologist)

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Name : **MRS. ASHMITA DAS BARMAN**
Age/Gender : 29 years / Female
Sample Type : Lbc Medium
Ref. Doctor : Arpita Namdev

Collected : 29/03/2024, 02:50 PM
Received : 29/03/2024, 03:00 PM
Reported : 30/03/2024, 07:40 PM

HISTOPATHOLOGY

INVESTIGATION

RESULT

Liquid based cervico-vaginal cytology

(Method: Bethesda System for reporting Cervical cytology 2014)

Specimen identification	(LBC/1027/2024)
Clinical Details / History	Not provided.
Sample Type	LBC smears.
Collection site of Specimen	Cervix.
Number of Smears Received /made	2
Adequacy of Specimen	Satisfactory for evaluation.
General Categorization	Negative for intraepithelial lesion or malignancy.
Interpretation / Result	Negative for intraepithelial lesion or malignancy.
Organisms	Nil.
Other Non-neoplastic changes	Includes typical repair- mild
Epithelial cell abnormalities	Nil
Other malignant neoplasms	Nil.
Remarks	Correlate clinically.

****END OF REPORT****


Dr SWATHI VADDEPALLY
MD PATHOLOGIST



Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

PT. NAME : ASHMITA DAS BARMAN
MOBILE NO : 9748291975
DOCTOR : DR. ARPITA NAMDEV YADAV
REFERRED BY : SELF

AGE / SEX : 29/FEMALE
UH ID NO. : SRMH-24032278
COLLECTION : 29-03-2024
REPORTING : 29-Mar-2024

TEST NO
432


CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE ROUTINE AND MICROSCOPY			
PHYSICAL EXAMINATION			
QUANTITY	20	ml	-
COLOUR	Pale Yellow		Pale Yellow -
APPEARANCE	S.Turbid		Clear -
REACTION	Acitic		Acitic -
CHEMICAL EXAMINATION			
ALBUMIN	Absent		Absent -
SUGAR	Absent		Absent -
KETONE	Absent		Absent -
BILE SALT	Absent		Absent -
BILE PIGMENT	Absent		Absent -
MICROSCOPIC EXAMINATION			
PUS CELLS	3-4	/hpf	2 - 5
EPITHELIAL CELLS	5-6	/hpf	1 - 5
RBC	Nil	/hpf	0 - 3
CAST	Nil	/lpf	Nil -
YEAST	Nil		Nil -
CRYSTAL	Nil	/lpf	Nil -
Bacteria	Nil		Nil -
OTHERS	-		-

-- End Of Report --

LAB TECHNICIAN

Note : This Report is not for medicolegal purpose


 Dr. Dhananjay Prasad
 (MD PATHOLOGY)

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DR ANAND BANSAL

MBBS MD DNB(Radiodiagnosis)
(IMS BHU) (Gold Medalist)
Ex Senior Resident (AIIMS Raipur)
Ex Assistant Professor (Pt JNMC Raipur)
Reg. No. - CGMC 6359/2015

5D SONOGRAPHY -16 SLICE CT SCAN - DIGITAL X RAY - PATHOLOGY - BIOPSY

PATIENT NAME: ASHMITA DAS BARMAN	DATE: 29/03/2024
REF PHY: SHRIRAM MULTISPECIALITY HOSPITAL GUDHIYARI (SRMS), PATIENT ID: 46720	AGE/SEX: 24 Years / FEMALE

USG WHOLE ABDOMEN

Liver: Liver is normal in size (15.0 cm), smooth in outline & echotexture.

Billiry system: IHBR's are not dilated. CBD is not dilated.

Liver vessels: Portal vein and hepatic veins are normal.

Gall bladder: Distended with anechoic lumen and normal wall thickness.

Pancreas & Paraaortic Region: Normal. Pancreatic duct not dilated.

Spleen: Is normal in size measures (11.7 cm) with normal echotexture.

Kidneys	RIGHT	LEFT
SIZE	10.3 x 4.5 cm	10.4 x 4.9 cm
CORTICAL ECHOGENICITY	Normal	Normal
CORTICOMEDULLARY DIFFERENTIATION	Maintained	Maintained
PELVICALYCEAL SYSTEM	Not dilated	Not dilated
URETER	Not dilated	Not dilated
CALCULUS	No	No

Urinary bladder: The urinary bladder shows physiological distention. It shows normal wall thickness.

Uterus is normal in size (7.9 x 4.9 x 3.8 cm, Vol. - 76 cc) and echotexture.

Endometrial thickness 11.7 mm.



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REF PHY: SHRIRAM MULTISPECIALITY HOSPITAL GUDHIYARI (SRMS), PATIENT ID: 46720	AGE/SEX: 24 Years / FEMALE

Ovaries	Right	Left
Size	2.6 x 2.1 cm	2.4 x 2.4 cm
Shape	Normal	Normal
Echotexture	Normal	Normal
Any other remarks	Nil	Nil

Bowel loops are grossly normal.

IMPRESSION:

- MINIMAL FREE FLUID NOTED IN ABDOMEN.

Advised clinical correlation/further evaluation if clinically indicated.

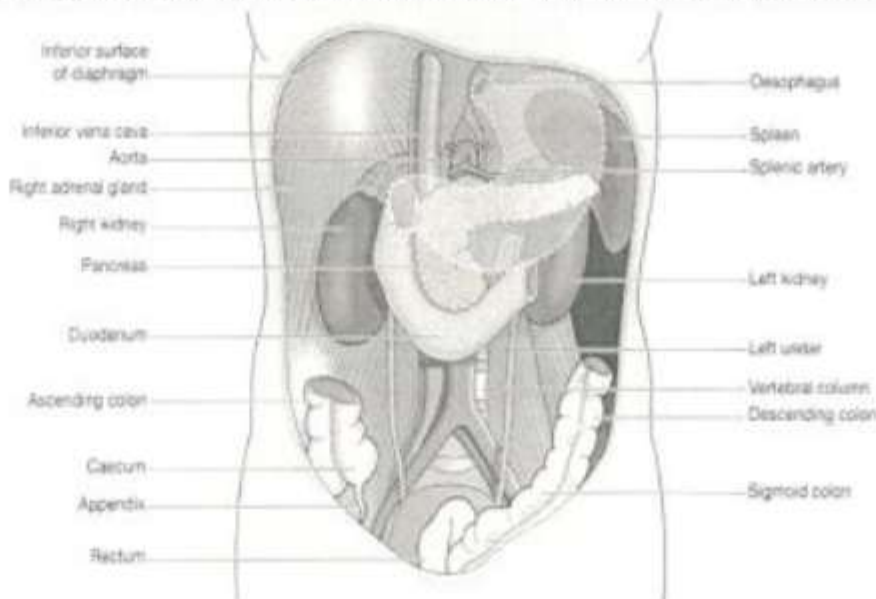


Anand

DR ANAND BANSAL
MD DNB RADIODIAGNOSIS
CONSULTANT RADIOLOGIST
CGMC 2015/6359

Typist: LAXMINARAYAN YADAV

This report is for perusal of the doctor only not the definitive diagnosis; findings have to be clinically correlated. Ultrasound has its limitations in obese patients and in retroperitoneal organs. All congenital abnormalities cannot be detected on ultrasound. This report is not for medico-legal purposes.



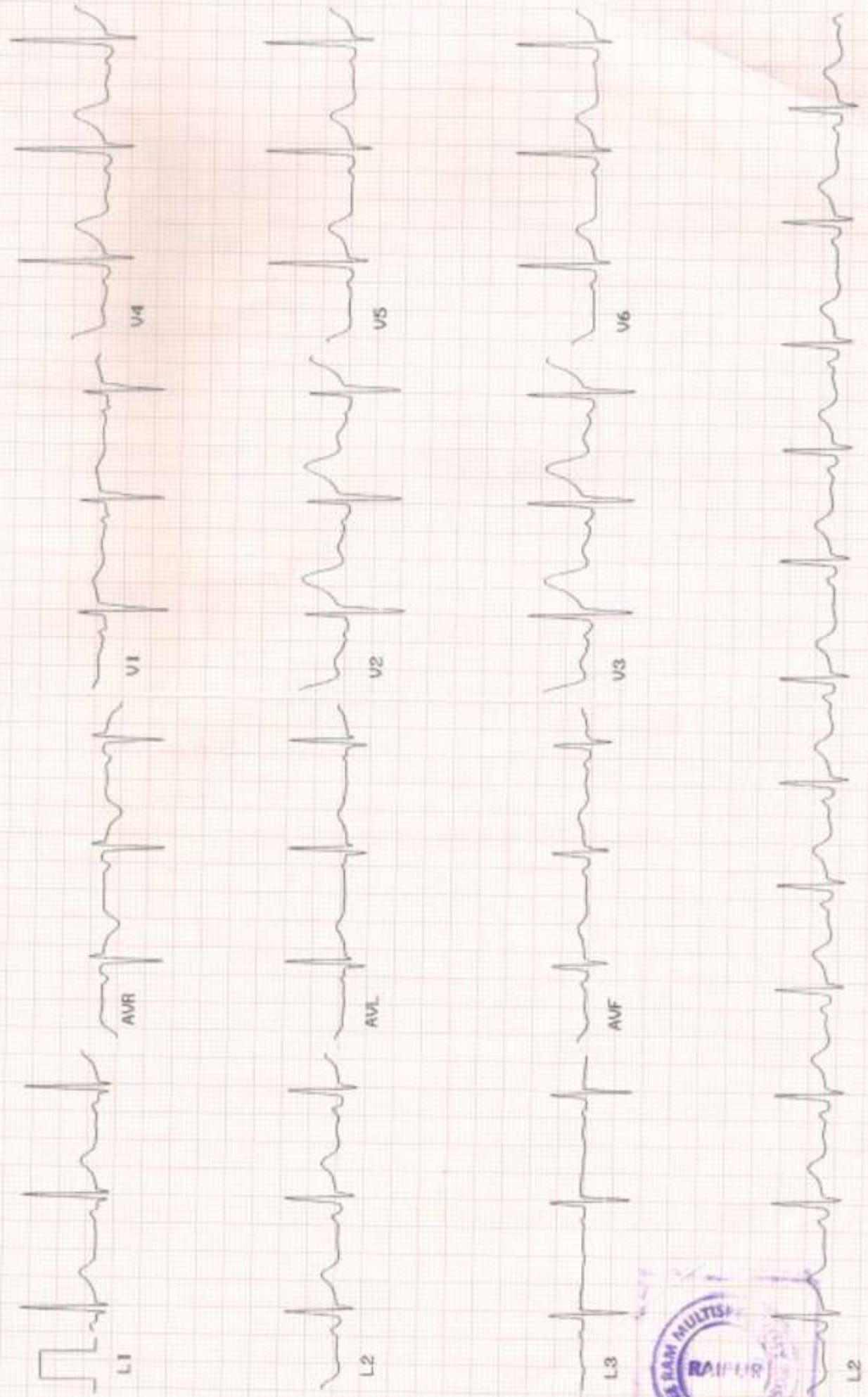
MRS ashmita das
 F 29Y 059Kg
 01:08 PM
 29/03/2024
 AUTO 12LS BLC-Y

25 mm/s
 10mm/mV
 0.1 - 35Hz
 50Hz Rej-Y
 BLC-Y

P = 80 ms
 QRS = 110 ms
 PR = 117 ms
 QT = 400 ms
 QTc = 441 ms

QT/QTc = 90%
 QT/RR = 48%
 QRS axis = 17°
 P axis = 45°
 T axis = 33°

To be clinically correlated:
 HR = 73bpm
 Sinus Rhythm
 Normal ECG





ECHOCARDIOGRAPHY REPORT

Name	Mrs. Asmita Das Barman	Age / Sex	29 years / Female
Date	29-03-2024	UHID no	24032278

PULMOANRY VELOCITY : 0.76 m/s

AORTIC VELOCITY : 0.75 m/s

TRICUSPID VELOCITY : 1.69 m/s

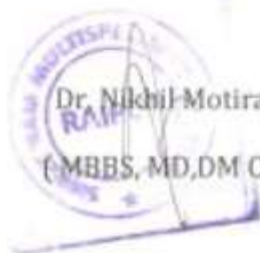
PASP : 17 mmHg + RAP

M-Measurement Value

Aorta	2.4	LVEDD	3.8
LA	2.8	IVSD	0.9
LVEF	>60%	LVPWD	0.9

FINAL IMPRESSION

- Normal Cardiac Chambers & Dimension
- NO RWMA
- Normal LV Systolic Function
- LVEF >60%
- Trace TR, PASP 17 mmHg + RAP
- No Clot/PE / Vegetation



Dr. Nikhil Motiramani
(MBBS, MD, DM Card)

Dr. Raghvesh Ojha

(MBBS, PGDCC clinical cardiology)





Shree Ram Multispeciality Hospital (SRMH)

L o k a h S a m a s t a S u k h i n o B h a v a n t u

Department of Radiology

NAME :-	MRS.ASHMITA DAS BARMAN	AGE -	29YEAR /FEMALE
REF.BY :-	SHREE RAM MULTI SPECIALITY HOSPITAL	DATE -	29/03/2024

X – RAY CHEST PA VIEW.

FINDINGS:

- Bilateral lung parenchyma is clear.
- Both apices free.
- Trachea in mid line.
- C T ratio within normal limits.
- Both hila are normal.
- Both costo & cardiophrenic angles are clear.
- Bony cage normal.
- Soft tissue appears normal.

IMPRESSION : No significant abnormality detected.



DR ANAND BANSAL

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CONSULTANT RADIOLOGIST

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