

DR. RAJENDRA PASSWALA

M.D. (General Medicine)
Consultant Physician
Specialist In Heart & Kidney Diseases
Reg No : G-11241
Mo: 9898944414

OPR NO:

Shalby MD Physician Clinic

Patient Name:- Neha S. Thaveri
Age / Sex :- A21F
Chief Complaints:-

Date: 02/04/24
Weight:- 76.1kg
Height:- 154cm

no complaints

Nutritional assessment:-

- Obese
- Well nourished
- Mild-moderate nourished
- Severely mal-nourished

Pulse:- 73b/min
BP:- 100/70mm
SpO2:- 100%

Drug / Food Allergy:-

Past History :-

NOT KNOWN

Family History:-

Systemic Examination:-

As / C
m /
A

Provisional Diagnosis:-

Dyslipidemia

SHALBY HOSPITAL, SURAT

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CIN: L85110GJ2004PLC044667

Investigation :-

Treatment and further advices:-
(Write in Capital Letters)

Rx

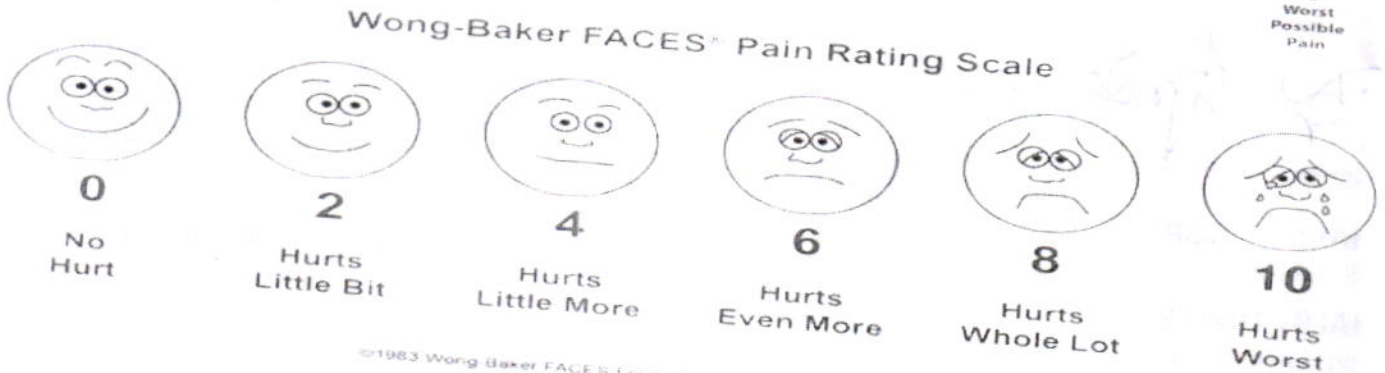
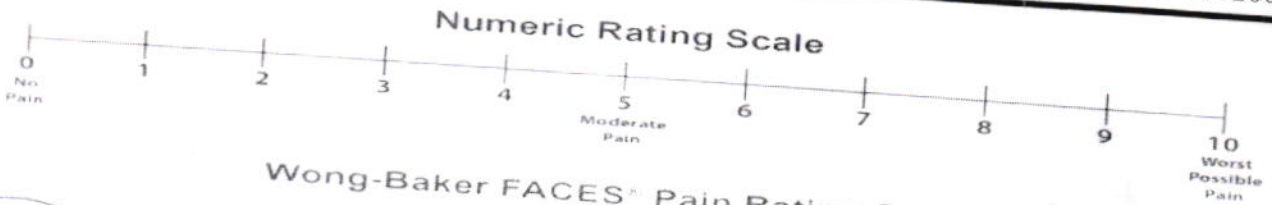
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Follow Up:

अधी दवाओ डोक्टरने बतावीने लेवी.

Date: _____

Incase of emergency please report to Emergency Department of Hospital OR Call:- 0261-7190000 / 9512660096





Certificate No.: MC-5200

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PID : SUR00000262514 OP-001

REPORT STATUS : Interim



Patient Name : Mrs. Neha S Jhaveri	/	Registered On : 01-Apr-2024 09:18 AM
Lab ID : 404900021		Collected On : 01-Apr-2024 08:40 AM
Gender/Age : Female / 42 Years	DOB : 23-Oct-1981	Received On : 01-Apr-2024 09:23 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : EDTA Whole Blood

Parameter	Result	Unit	Biological Ref. Interval
BLOOD COUNT AND INDICIES			
HAEMOGLOBIN <i>Colorimetric Non Cyanide</i>	12.8	g/dL	12.0 - 15.0
RBC COUNT <i>Electrical Impedance</i>	4.62	mill/cmm	3.8 - 4.8
HCT <i>Calculated</i>	38.8	%	36 - 46
MCV <i>Calculated based on the RBC histogram</i>	83.9	fL	83 - 101
MCH <i>Calculated</i>	27.7	pg	27 - 32
MCHC <i>Calculated</i>	33.0	g/dL	31.5 - 34.5
RDW <i>Calculated</i>	13.0	%	11.6 - 14.0
TOTAL LEUCOCYTE COUNT			
Total WBC Count <i>Electrical Impedance</i>	6650	cells/cmm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT (Manual by Microscopy)			
NEUTROPHILS <i>Flow Cytometry</i>	64	%	40 - 80
LYMPHOCYTES <i>Flow Cytometry</i>	28	%	20 - 40
EOSINOPHILS <i>Flow Cytometry</i>	3	%	1 - 6
MONOCYTES <i>Flow Cytometry</i>	5	%	2 - 10
BASOPHIL <i>Flow Cytometry</i>	0	%	0 - 2
PLATELET INDICES			
PLATELET COUNT <i>Electrical Impedance</i>	360000	/cmm	150000 - 410000
MPV <i>Calculated based on PLT Histogram</i>	9.2	fL	7.5 - 12.0
PERIPHERAL SMEAR EXAMINATION			
RBCs	Normochromic and Normocytic.		
WBCs	Total and differential leucocyte counts are within normal limit		
PLATELETs	Adequate in number and normal in morphology.		
MALARIAL PARASITE	Malarial parasites are not seen on smear examination.		

EDTA Whole Blood - Tests done on Automated Five Part Cell Counter. (WBC, RBC, MCV & Platelet count by classical impedance method, Hb by cyanide-free colorimetric method, WBC differential by Chemical dye, Flowcytometry, Semi-conductive Laser scatter Method, independent Basophil channel & other parameters calculated). All Haemograms are reviewed & confirmed microscopically.

Reference Interval: Dacie and Lewis practical haematology 11th edition.

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Pankaj Agrawal
Dr Pankaj Agrawal

M.B., D.C.P
Consulting Pathologist

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Parameter	Result	Unit	Biological Ref. Interval
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BLOOD GROUP

(Tube agglutination: Forward & reverse)

ABO Type	"A"
RH Type	POSITIVE

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Parameter	Result	Unit	Biological Ref. Interval
ESR 1st hour * <i>Modified Westergren Method</i>	1	mm in 1 hour	0 - 20
HBA1C			
HbA1c - Glycated Haemoglobin * <i>Boronate Affinity Assay</i>	5.1	%	Non-diabetic: <= 5.6 Pre-diabetic: 5.7-6.4 Diabetic: >= 6.5 Therapeutic goals for glycemic control Age > 19 years Goal of therapy: < 7.0 Action suggested: > 8.0 Age < 19 years Goal of therapy: <7.5

Estimated Average Glucose (eAG) (mg/dL) * 100 mg/dL
Calculated

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Certificate No. : MC-5200

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 Ref. By : Dr. Health Check Up . Shalby Sample Type : Fluoride F, Urine (PP),
 Fluoride PP, Urine (F)

Parameter	Result	Unit	Biological Ref. Interval
PLASMA GLUCOSE LEVEL			
FASTING PLASMA GLUCOSE			
Plasma Glucose (F) <i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>	84	mg/dL	74 - 106
Urine Sugar (F) <i>Glucose-oxidase/oxidase reaction</i>	ABSENT	mg/dL	Absent
POST PRANDIAL PLASMA GLUCOSE			
Plasma Glucose (PP) <i>GOD/POD (Glucose Oxidase/Peroxidase), Colorimetric</i>	92	mg/dL	Normal: 100-140 Impaired: 140 -199 Diabetic :=>200
Urine Sugar (PP) <i>Glucose-oxidase/oxidase reaction</i>	ABSENT	mg/dL	Absent

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
LIPID PROFILE			
LIPID PROFILE			
Cholesterol <i>Cholesterol Esterase, Oxidase, Peroxidase</i>	190	mg/dL	Desirable: <200 Borderline High: 200 - 239 High >=240
SERUM TRIGLYCERIDE <i>Lipase/GK/GPO/POD</i>	135	mg/dL	Normal : <150 Borderline High : 150-199 High : 200-499 Very High : > 500
HDL CHOLESTEROL DIRECT * <i>Phosphotungstic Acid/Mgcl2 - Enzymatic</i>	45	mg/dL	Major risk factor for heart disease : < 40 Negative risk factor for heart disease : >= 60
Non HDL Cholesterol <i>Calculated</i>	145	mg/dL	Optimal : <130 Desirable : 130-159 Borderline high : 159-189 High : 189-220 Very High : >=220
LDL Cholesterol <i>Calculated</i>	118	mg/dL	Optimal: <100 Near to above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 190
VLDL <i>Calculated</i>	27	mg/dL	6 - 38
LDL/dHDL * <i>Calculated</i>	2.6		2.5 - 3.5
Chol/dHDL * <i>Calculated</i>	4.2	Ratio	3.5 - 5.0

Note: Reference interval as per National Cholesterol Education Programme (NCEP) Adult Treatment Panel III Report. VLDL, CHOL/dHDL RATIO, LDL/dHDL RATIO, LDL Cholesterol, Non HDL Cholesterol are calculated parameters. Estimation of LDL by direct method is recommended when TG>400 mg/dL.

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
THYROID PROFILE (TFT)			
Total T3 * <i>Chemiluminescence immunoassay (CLIA)</i>	107	ng/dL	87 - 178
Total T4 * <i>Chemiluminescence immunoassay (CLIA)</i>	10.65	µg/dL	99% Reference Interval (µg/dL) 4.82 - 15.65
TSH * <i>Chemiluminescence immunoassay (CLIA)</i>	1.765	µIU/mL	Non Pregnant Females: 0.38-5.33 µIU/mL Pregnant Females (1st trimester): 0.05-3.70 µIU/mL Pregnant Females (2nd trimester): 0.31-4.35 µIU/mL Pregnant Females (3rd trimester): 0.41-5.18 µIU/mL

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Gender/Age : Female / 42 Years	DOB : 23-Oct-1981	Received On : 01-Apr-2024 09:23 AM
Ref. By : Dr. Health Check Up . Shalby		Sample Type : Urine

URINE EXAMINATION

Parameter	Result	Unit	Biological Ref. Interval
Physical Examination			
Colour *	Pale Yellow		Pale yellow
Transparency	Clear		Clear
Chemical Examination			
Glucose	Glucose-oxidase/oxidase reaction	Negative	Negative
Bilirubin	Azo coupling Reaction with diazonium	Negative	Negative
Ketone	Sodium Nitroprusside reaction	Negative	Negative
Specific Gravity	Refractometric Method - Bromthymol blue	<=1.005	S.G. value 1.001 - 1.035
Blood	Peroxidase like activity of hemoglobin	NIL	Negative
pH	Double Indicator principle	5.5	PH value 4.6 - 8.0
Protein	Protein Error of Indicator Principle	Negative	Negative
Urobilinogen *	Modified Ehrlich reaction	0.2	EU/dL Upto 1.0 mg/dL (EU/dL)
Nitrite *	Diazotization reaction of nitrite with an aromatic amine	Negative	Negative
Leucocyte	Leucocyte Esterase Test	Negative	Negative
Microscopic Examination			
Pus cells	5-6/hpf	/hpf	0-5/hpf
Red blood cells	Nil	/hpf	NIL/hpf
Epithelial cells	0-2/hpf	/hpf	NA
Crystals	Nil		Nil
Cast *	Nil		Nil
Bacteria	Nil		Nil
Amorphous	Nil		Nil
Yeast	Nil		Nil
Others	Nil		Nil

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Ref. By : Dr. Health Check Up . Shalby		Sample Type : Serum

Parameter	Result	Unit	Biological Ref. Interval
Liver Function Test			
Liver Function Test			
SGPT (ALTV) <i>Multi Point Rate with P-5-P</i>	20	U/L	9 - 52
SGOT (AST) <i>Multi Point Rate with P-5-P</i>	24	U/L	14 - 36
Alkaline Phosphatase <i>PNPP, AMP Buffer</i>	58	U/L	20-50 yrs.: 42 - 98 4-19 yr : 54 - 369 >=51 yr : 56 - 119
GGT * <i>L-gamma-glutamyl-4-nitroanalide/glycylglycine Kinetic</i>	11	U/L	12 - 43
S. PROTEIN <i>Biuret (Alkaline cupric sulfate), End Point</i>	7.4	g/dL	6.3 - 8.2
Albumin <i>Bromocresol Green (BCG), Colorimetric</i>	4.4	g/dL	3.5 - 5.0
S. GLOBULIN <i>Calculated</i>	3.0	g/dL	2.3 - 3.6
A/G Ratio <i>Calculated</i>	1.5	Ratio	1.0 - 2.3
Bilirubin Total <i>Azobilirubin/Dyphylline/Diazonium Salt</i>	0.6	mg/dL	0-1 day (premature) 1.0 - 8.0 0-1 day (full term) : 2.0 - 6.0 1-2 day (premature) : 6.0 - 12.0 1-2 day (full term) : 6.0 - 10.0 3-5 day (premature) : 10.0 - 14.0 3-5 day (full term) : 4.0 - 8.0 Adult : 0.2 - 1.3
Bilirubin Unconjugated <i>End-point Colorimetric (Dual wavelength spectrophotometric)</i>	0.5	mg/dL	Unconjugated bilirubin Adults: 0.0-1.1 Neonates: 0.6-10.5
Bilirubin Direct <i>Calculated</i>	0.1	mg/dL	Conjugated bilirubin and Delta bilirubin (Bilirubin covalently bound to albumin) 0.0-0.4

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Parameter	Result	Unit	Biological Ref. Interval
RENAL FUNCTION TEST			
RENAL FUNCTION TEST			
Urea Nitrogen (BUN) <i>Urease, colorimetric</i>	9	mg/dL	7 - 17
UREA <i>Calculated</i>	19	mg/dL	15 - 36
Creatinine <i>Enzymatic - Creatinine amidohydrolase</i>	0.64	mg/dL	0.52 - 1.04
S. URIC ACID <i>Uricase/Peroxidase, Colorimetric</i>	4.8	mg/dL	2.5 - 6.2
Calcium <i>Arsenazo III dye</i>	9.9	mg/dL	8.4 - 10.2
Phosphorus * <i>Phosphomolybdate reduction (PMA Phenol)</i>	3.9	mg/dL	2.5 - 4.5
Sodium <i>Direct Ion Selective Electrode</i>	139	mmol/L	137 - 145
S. POTASSIUM <i>Direct Ion Selective Electrode</i>	4.66	mmol/L	3.5 - 5.1
Chloride <i>Direct Ion Selective Electrode</i>	102	mmol/L	98 - 107

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

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Consulting Pathologist

Patient ID:	SUR0000262514	Patient Name:	NEHA S JHAVERI
Age:	42 Years	Sex:	F
Accession Number:	3646 MHC	Modality:	DX
Referring Physician:	DR.SHALBY	Study:	CHEST PA
Study Date:	1-Apr-2024		

CHEST X-RAY (PA)

Both lung fields appear normal.

No evidence of consolidation or cavitation is seen.

Both costo-phrenic angles appear clear.

Cardiac size is within normal limits.

Both domes of diaphragm appear normal.

Bony thoracic cage and soft tissue shadow appear normal.

IMPRESSION:

- No significant abnormality seen. ✓

Thanks for referral.



DR. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)

G-14916

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CIN: L85110GJ2004PLC044667



Pre - op

Post- op

Health Check-up

Date : 01/04/2024

Patient Reg. No. : _____

Patient Name : Meha Thaverji

Age / Sex : 42 / F

Address : _____

Complaints : NAD

Pain : _____

Bleeding gums : _____

Swelling : _____

Sensitivity : _____

Pus Discharge : _____

Medical History : NAD

Hypertension : _____ DM _____ Acidity _____ Pregnancy : _____

Bleeding Disorders : _____ Asthma : _____ Allergy : _____

Past Surgical Intervention : _____

Any Medication : _____

On Examination : NAD

Abscess : _____ Food lodgement : _____

Periodontitis : _____ Gingivitis : _____

Missing Teeth : _____ Mobility : _____

Treatment Advised :

Scaling : Sittings 1 2 3 Deep

Perio Surgery : _____

Restoration : 18

Class V Fillings : _____

RCT : _____

Extraction : _____

Dentures : _____

Partial Denture : _____

Implants : _____

Crown & Bridge

Present : _____

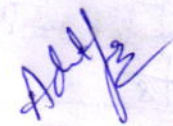
Crown / Bridge Replacement :

Advised Crown / Bridge :

Advised X - Ray / O.P.G. :

Some Golden Rules :

1. Brush your teeth twice a day.
2. Floss your teeth daily.
3. Gargle forcefully after each meal.
4. Visit your dentist twice a year.
5. Any dental treatment should be performed in a well maintained, hygienic setup using "autoclaved" instruments & "sterilized pouch" facility.
After knee replacement any treatment should be done under "Antibiotic Coverage"



Dr. Darshini V. S
(Consultant Dental Su

DR. RUJUTA SHELAT

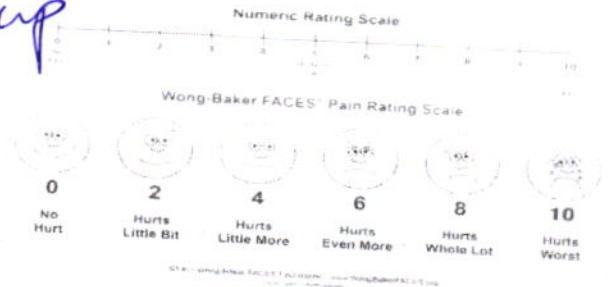
Consultant Ophthalmologist

Reg. No.:- G-48712

Name :- *Neha Shishir Thaveri*

Date:- *01/4/2024*

Chief Complaints:- *Routine eye check up*



Pain Assessment:-

Past History:-

Family History:-

Allergy:- *No drug Allergy.*

Personal History:- Habits:- Alcohol:- Y/N Tobacco: Y/N Smoking: Y/N Regular Exercise: Y/N

General Examination:-

BP:- Pulse:- Temp:-

Systemic Examination:-

Visual Acuity:- *6/18*
6/24

PCAR 6/6 1 MB
6/6 1 MB

HT:- WT:-

PH Vision:- *6/6*
6/6

NCT *18*
18

SR -1.00 D 46
-2.00 M 6/6 *Add +1.00 D 78*

ON Examination

Ant. Segment

Both Eye

Wm

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CIN: L85110GJ2004PLC044667

AME PR 02 2023 12:08

R>	SPH	CYL	AX
-	1.00	-0.25	172
-	1.00	-0.25	159
-	1.25	-0.25	150
-	1.00	-0.25	159

Anterior Chamber

L>	SPH	CYL	AX
-	2.00	0.00	
-	2.00	0.00	
-	2.00	-0.25	145
-	2.00	0.00	

Rt. EYE

Lt. EYE

D= 69

randSeiko.com
R-3300K S/N:76BB0963

Investigation:-

Blood Vessel:-

Background:-

Macula:-

Diagnosis:-

Pt will come later on

Simple myopic presby.

Treatment:-

Glasses

Nutritional Assessment:-

Preventive Care & Counsellings:-

Follow Up ON:-

2 months/see

Signature of the Consultant



DR. HIMANI THAKER (VYAS)

M.S (Gynec)
Consultant Obstetrician & Gynecologist
Laparoscopic Surgeon
Infertility Specialist
Email-ID:- thaker.himani@gmail.com
Register No. G-31062

Shalby Women's Health Clinic

Name:- Nehe
Chief Complaints:-

Date: 01/4/24
Weight:-
Height:-
OPR NO:-

- Nutritional Assessment:-
- Obese
 - Well Nourished
 - Mild-Moderate Nourished
 - Severely Mal-Nourished

M/H:- clonit
paup - 34 days from
30

LMP:- D6

O/H:- o/h - P14

Arus) ♀ / 13yo / 4

P/H:-
F/H
Examination:-

Provisional Diagnosis:-

pla soft
Pls - Co healthy
min bld figed discharge (+)
(D6)
PAP taken

of

- CANDID powder - ①

Patient Name: NEHA JHAVERI		UHID:	
Age / Sex: 42 Yrs. / Female		Study:	USG Abdomen + Pelvis
Referred By:	Dr. at shalby hospital	Date: 01/04/2024	

ULTRASOUND OF ABDOMEN AND PELVIS (TAS)

Liver is normal in size shows grade I fatty changes. No focal lesion seen. The Hepatic veins appear normal. No evidence of dilated I.H.B.R. **Portal vein** appears normal.

Gall bladder is well distended and appears normal. No evidence of calculi seen. Wall appears normal. No pericholecystic fluid seen. **CBD** appears normal.

Pancreas appears normal in size and echotexture.

Spleen appears normal in size and appearance. No focal lesion seen.

Right kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Left kidney it shows normal echotexture and corticomedullary differentiation. There is no evidence of scarring, hydronephrosis or calculi.

Urinary bladder well-distended and appears normal. No evidence of any intraluminal mass or calculi.

Uterus Retroverted appears normal in size 59 x 35 x 38 mm, Et: 7 mm. The uterine myometrial echotexture is homogenous. No focal lesion is seen. There is no evidence of any ovarian or adnexal mass lesion.

No ascites is seen. No abnormal bowel wall thickening and dilatation seen.

IMPRESSION:

- Grade I fatty liver.
- No other significant abnormality detected.

Thanks for referrals.



DR. ASHUTOSH GANDHI

DMRD (Radiodiagnosis)
G-14916

SHALBY HOSPITAL, SURAT

Near Navyug College, Rander Road, Adajan, Surat. Gujarat, India. | Ph.: 0261-7190000 | Email : info.surat@shalby.org

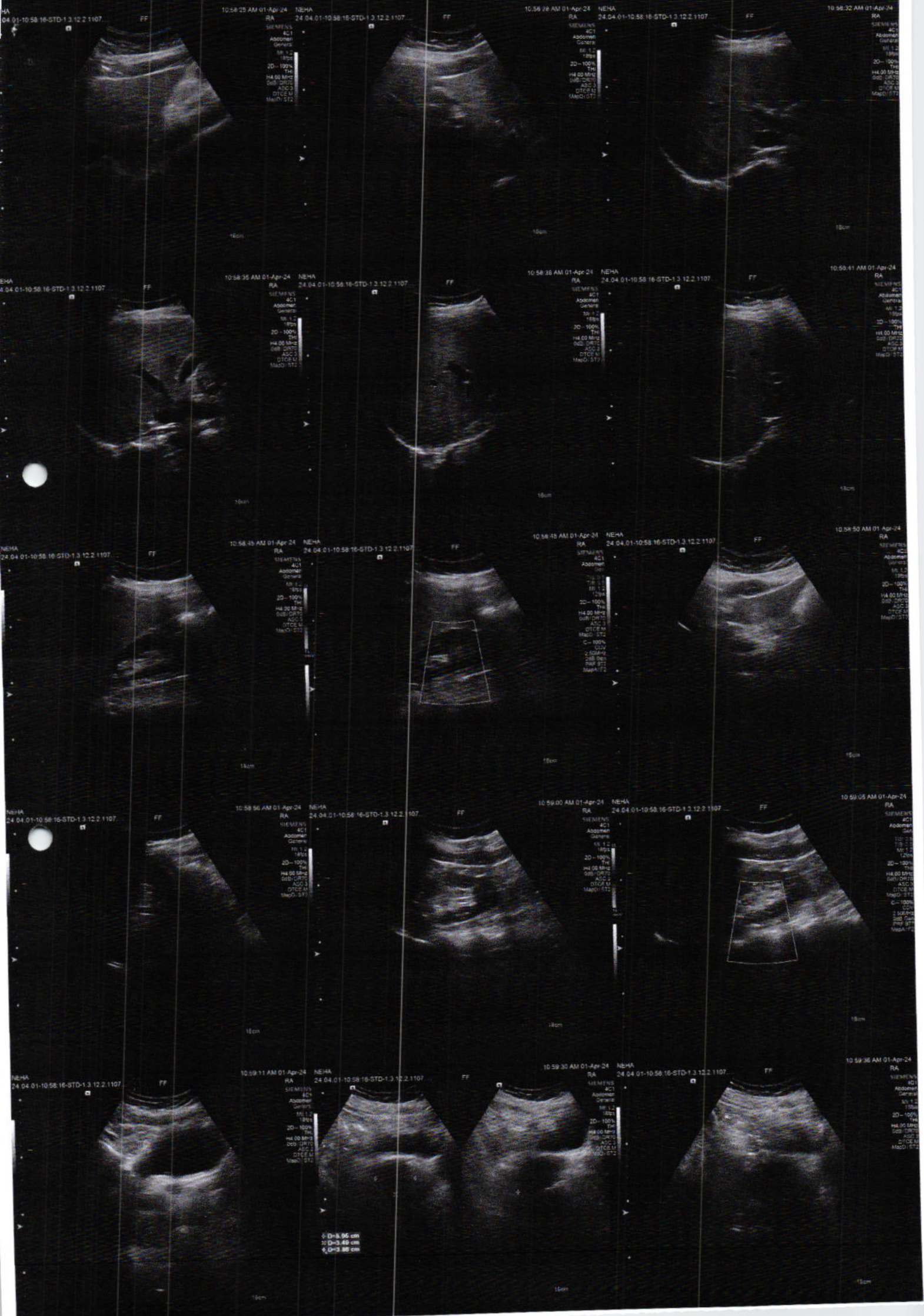
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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org

CIN: L85110GJ2004PLC044667



10:58:25 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:28 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:32 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:35 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:38 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:41 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:45 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:48 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:50 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:58:56 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:59:00 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:59:05 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:59:11 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:59:30 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

10:59:36 AM 01-Apr-24 NEHA
RA 24.04.01-10.58.16-STD-1.3.12.2.1107
SIEMENS AC1
Abdomen General
M 1.2
18Hz
2D-100%
TH
H4.00 MHz
G08 DPT0
ASC 3
DTCE M
Map0: ST2

D=8.95 cm
D=3.49 cm
D=3.89 cm

Patient's Name: Neha Jhaveri

Age: 42 yrs / Female

Date: 01 / 04 / 2024

ECHOCARDIOGRAPHY REPORT

Valves:-

Mitral valve :Normal, No MR

Aortic valve :Normal, No AR

Tricuspid valve :Normal, No TR

Pulmonary valve:Normal, No PR

Chambers:-

Left Atrium:Normal

Right Atrium:Normal

Right Ventricle:Normal size cavity, Good RV systolic function With TAPSE:20

Left Ventricle: Normal size cardiac chambers, No Regional wall Motion abnormality.
Normal LV systolic function
with Ejection Fraction 60 %.
Normal Diastolic Flow Pattern.

Septae:-

IVS: Intact. No residual VSD.

IAS :Intact.

Pericardium:Normal.

IVC:14 mm with more than 50% collapsibility.

OTHER FINDINGS :- Bilateral lung angle clear

CONCLUSION:-

- Normal LV Systolic function
- No RWMA
- EF 60 %



DR.SUSHIL YADAV

Consultant Clinical cardiologist

Note : Normal echo study does not rule out underlying Coronary artery disease

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Tel: 079 40203000 | Fax: 079 40203109 | info.sg@shalby.org | www.shalby.org
CIN: L85110GJ2004PLC044667

ID:

Name:

Sex: M

cm

kg

Birth date:

/

mmHg

years

1100 Sinus rhythm

9110 ** normal ECG **

Medication:

Symptoms:

History:

Heart rate

74

bpm

PR interval

122

ms

QRS duration

82

ms

QT/QTc (E) interval

368/ 396

ms

PR/QRST axis

22/ 28/ 18

°

V5/SV1 amplitude

1.62/ 0.88

mV

V5+SV1 amplitude

2.51

mV

Neha Javali

Unconfirmed Report

Reviewed by:

10 mm/mV 25 mm/s Filter: H50 d 100 Hz

10 mm/mV

