

Metro Hospital & Heart Institute, Haridwar

Health Check-up Certificate

COMPANY Mediwheel (B013)

EMPLOYEE NO. 165226 DEPT. --- DATE 24-2-24

NAME Mr. Archna Malik AGE/SEX 50y/F DOB 5-12-1974

DESIGNATION B.W. MOBILE NO 8272868494

CHEST (INSP) 4 cm. CHEST (EXP) 4 cm. CHEST EXPANSION 4 cm

HEIGHT 165 cm. WEIGHT 75 Kg. BMI ---

P/R 70 per mt. BP 106/77 mmHg SIGN OF EMP Δ: Mark

EXAMINATION/INVESTIGATIONS

| No | Investigations | Room No | Result |
|----|--------------------------------|-----------------|---|
| ✓ | LAB INVESTIGATIONS | Path Lab | Hb <u>11.5 g/dl</u> |
| ✓ | BLOOD SUGAR F/PP/RANDOM | Path Lab | TLC <u>5210</u> / DLC <u>55/55/04/06</u> FBS <u>100</u> / PPBS <u>800</u> / RBS <u>HLA, C, S</u> ✓ |
| | BLOOD GROUP | Path Lab | |
| ✓ | URINE | Path Lab | OT: <u>Alb NIL Sugar NIL</u> |
| ✓ | STOOL | Path Lab | <u>SNR</u> |
| ✓ | X RAY CHEST PA | Radiology | <u>Normal chest</u> |
| ✓ | ULTRASONOGRAPHY (Whole Abd) | Radiology | <u>Normal</u> |
| ✓ | ECG | Health check up | <u>WNL</u> |
| ✓ | ECHO | Radiology | <u>Normal</u> |
| 8 | TMT | Radiology | |
| 9 | PFT | Health check up | |
| 10 | AUDIOMETRY | 25 | |
| 11 | ENT EXAM | 25 | |
| 12 | DENTAL EXAMINATION | 24 | |
| ✓ | ACUITY OF VISION/COLOUR VISION | 13 | <u>DVT 6/6</u> <u>NERV 11/6</u> <u>CPG CV-WAY</u> |
| ✓ | EXAMINATION BY PHYSICIAN | 23 | <u>NAD</u> |
| 15 | <u>PAP Smear</u> | | |

Observations - THYROID Profile 2 - WNL

T3 - 2.13 nmol/L
 T4 - 7.75 Mg/dl
 TSH - 1.51 mIU/L
 Lipid Profile - WNL
 LFT - WNL RFT - WNL

DR. NITIN KUMAR
 MBBS, MD

Consultant General Medicine

Reg. No. 1000550915

Metro Hospital & Heart Institute
 SIDCUL, Haridwar-249403 (U.K.)

प्रति,

Mob No - 8272868494

समन्वयक,

Mediwheel (Arcofemi Healthcare Limited)

हेल्पलाइन नंबर: 011-41195959

महोदय/ महोदया,

विषय: बैंक ऑफ़ बड़ौदा के कर्मचारियों के लिए वार्षिक स्वास्थ्य जांच।

हम आपको सूचित करना चाहते हैं कि हमारे कर्मचारी की पत्नी/पति जिनके विवरण निम्नानुसार हैं हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

| स्वास्थ्य जांच लाभार्थी के विवरण | |
|---|-----------------------|
| नाम | ARCHNA MALIK |
| जन्म की तारीख | 05-12-1974 |
| कर्मचारी की पत्नी/पति के स्वास्थ्य जांच की प्रस्तावित तारीख | 26-08-2023 |
| बुकिंग संदर्भ सं. | 23S165226100067340S |
| पत्नी/पति के विवरण | |
| कर्मचारी का नाम | MR. MALIK VIPIN KUMAR |
| कर्मचारी की क.कू.संख्या | 165226 |
| कर्मचारी का पद | SPECIAL ASSISTANT |
| कर्मचारी के कार्य का स्थान | ROORKEE, RAMNAGAR |
| कर्मचारी के जन्म की तारीख | 05-09-1972 |

यह अनुमोदन/ संस्तुति पत्र तभी वैध माना जाएगा जब इसे बैंक ऑफ़ बड़ौदा के कर्मचारी आईडी कार्ड की प्रति के साथ प्रस्तुत किया जाएगा। यह अनुमोदन पत्र दिनांक 23-08-2023 से 31-03-2024 तक मान्य है। इस पत्र के साथ किए जाने वाले चिकित्सा जांच की सूची अनुलग्नक के रूप में दी गई है। कृपया नोट करें कि उक्त स्वास्थ्य जांच हमारी टाई-अप व्यवस्था के अनुसार कैशलेस सुविधा है। हम अनुरोध करते हैं कि आप हमारे कर्मचारी के पत्नी/पति की स्वास्थ्य जांच संबंधी आवश्यकताओं पर उचित कार्रवाई करें तथा इस संबंध में अपनी सर्वोच्च प्राथमिकता तथा सर्वोत्तम संसाधन उपलब्ध कराएं। उपर्युक्त सारणी में दी गई कर्मचारी कूट संख्या एवं बुकिंग संदर्भ संख्या का उल्लेख अनिवार्य रूप से इनवॉइस में किया जाना चाहिए।

हम इस संबंध में आपके सहयोग की अपेक्षा करते हैं।

भवदीय,

हस्ता/-

(मुख्य महाप्रबंधक)

मानव संसाधन प्रबंधन विभाग

बैंक ऑफ़ बड़ौदा

(नोट: यह कंप्यूटर द्वारा जनरेट किया गया पत्र है। हस्ताक्षर की आवश्यकता नहीं है। कृपया किसी भी स्पष्टीकरण के लिए Mediwheel (Arcofemi Healthcare Limited) से संपर्क करें।)



To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following spouse of our employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

| PARTICULARS OF HEALTH CHECK UP BENEFICIARY | |
|---|-----------------------|
| NAME | ARCHNA MALIK |
| DATE OF BIRTH | 05-12-1974 |
| PROPOSED DATE OF HEALTH CHECKUP FOR EMPLOYEE SPOUSE | 26-08-2023 |
| BOOKING REFERENCE NO. | 23S165226100067340S |
| SPOUSE DETAILS | |
| EMPLOYEE NAME | MR. MALIK VIPIN KUMAR |
| EMPLOYEE EC NO. | 165226 |
| EMPLOYEE DESIGNATION | SPECIAL ASSISTANT |
| EMPLOYEE PLACE OF WORK | ROORKEE,RAMNAGAR |
| EMPLOYEE BIRTHDATE | 05-09-1972 |

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **23-08-2023** till **31-03-2024**.The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee's spouse and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

**Chief General Manager
HRM Department
Bank of Baroda**

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))



SUGGESTIVE LIST OF MEDICAL TESTS

| FOR MALE | FOR FEMALE |
|-------------------------------------|---|
| CBC | CBC |
| ESR | ESR |
| Blood Group & RH Factor | Blood Group & RH Factor |
| Blood and Urine Sugar Fasting | Blood and Urine Sugar Fasting |
| Blood and Urine Sugar PP | Blood and Urine Sugar PP |
| Stool Routine | Stool Routine |
| Lipid Profile | Lipid Profile |
| Total Cholesterol | Total Cholesterol |
| HDL | HDL |
| LDL | LDL |
| VLDL | VLDL |
| Triglycerides | Triglycerides |
| HDL / LDL ratio | HDL / LDL ratio |
| Liver Profile | Liver Profile |
| AST | AST |
| ALT | ALT |
| GGT | GGT |
| Bilirubin (total, direct, indirect) | Bilirubin (total, direct, indirect) |
| ALP | ALP |
| Proteins (T, Albumin, Globulin) | Proteins (T, Albumin, Globulin) |
| Kidney Profile | Kidney Profile |
| Serum creatinine | Serum creatinine |
| Blood Urea Nitrogen | Blood Urea Nitrogen |
| Uric Acid | Uric Acid |
| HBA1C | HBA1C |
| Routine urine analysis | Routine urine analysis |
| USG Whole Abdomen | USG Whole Abdomen |
| General Tests | General Tests |
| X Ray Chest | X Ray Chest |
| ECG | ECG |
| 2D/3D ECHO / TMT | 2D/3D ECHO / TMT |
| Stress Test | Thyroid Profile (T3, T4, TSH) |
| PSA Male (above 40 years) | Mammography (above 40 years) and Pap Smear (above 30 years). |
| Thyroid Profile (T3, T4, TSH) | Dental Check-up consultation |
| Dental Check-up consultation | Physician Consultation |
| Physician Consultation | Eye Check-up consultation |
| Eye Check-up consultation | Skin/ENT consultation |
| Skin/ENT consultation | Gynaec Consultation |



Welcome, VIPIN!

Employee Self Service

Reimbursement

New Window | Personalize Page

- Reimbursement Application
- Expense for Injury On Duty
- Expense for Passport & Visa
- Hindi Exam Incentive
- Overseas Perquisites
- Prior Permission For Speed
- SPEED Reimbursement
- CBS Transaction Details
- Reimbursement History
- Leased Accommodation Request
- Conveyance Declaration
- Consent Form for GTLI
- Award Staff LFC Block Option
- COVID Salary Advance
- Contract Employee Benefit
- Contractual Reimbursement-NEW
- Pending Reimbursement Claims

Reimbursement Application

Name of the benefit Mandatory Health Check-up
 Application Number 165226230105
 Status Submitted

Personal Information

ECNO 165226
 Grade CL
 Account # 85440400000005

CLAIMS NEED TO BE APPLIED WITHIN THE STI

Financial Year 2023 For
 F.Y. 2023-2024
 Claim Type Cashless
 Service Provider Mediwheel (Arcofemi Hea
 Booking Reference Number 23S165226100067342E

Entered by ID: VM165226

- Return to Search
- Previous in List
- Next in List



METRO
HOSPITAL & HEART INSTITUTE
(A unit of Sunhill Hospitals Private Limited)
(NABH & ISO 9001: 2008 Certified)



we treat...HE CURES

Metro Hospital & Heart Institute

(A unit of Sunhill Hospital Private Limited)

OPD CONSULTATION

Patient Name Mrs. Archana Malik Age/Sex 50y/F Reg. No. _____

Doctor's Name Dr. Sushil Kumar

Date 24/2/2021 Time _____

OPHTHALMIC EXAMINATION

VISION

DISTANCE VISION-

Rt

6/6

Lt

6/9P

NEAR VISION-

Rt

N/6

Lt

N/6

COLOUR VISION

Normal

EYE EXAMINATION

Cornea

Ant Chamber

Pupil

Fundus Examination

ADVICE-

Dr. Sushil Kumar, MBBS (Ophtho)
Consultant
Metro Hospital & Heart Institute
Sidcul, Haridwar, Reg. No.-2672 (UK)

Signature

Plot No. F-1, Sector-6A, SIDCUL, Haridwar - 249 403

Emergency : +91 8191902600, Phone : 01334 - 239040 / 42 / 43, Fax : 01334 - 239043

E-mail : metroharidwar@metrohospitals.com, Website: www.metrohospitals.com

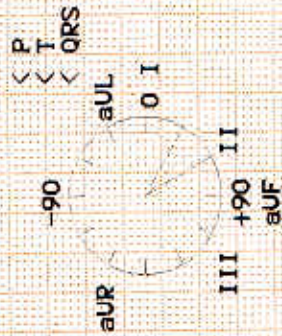
Regd. Office : 21, Community Center, Preet Vihar, New Delhi-110092

CIN No.: U33201DL2006PTC156918

MHHI/CL/0115/Rev. No. 01

Measurement Results:

QRS : 86 ms
 QT/QTcB : 390 / 438 ms
 PR : 128 ms
 P : 74 ms
 RR/PP : 792 / 790 ms
 P/QRS/T : 45 / 60 / 30 degrees
 QTd/QTcBD : 40 / 45 ms
 Sokolow : mV
 NK : 7

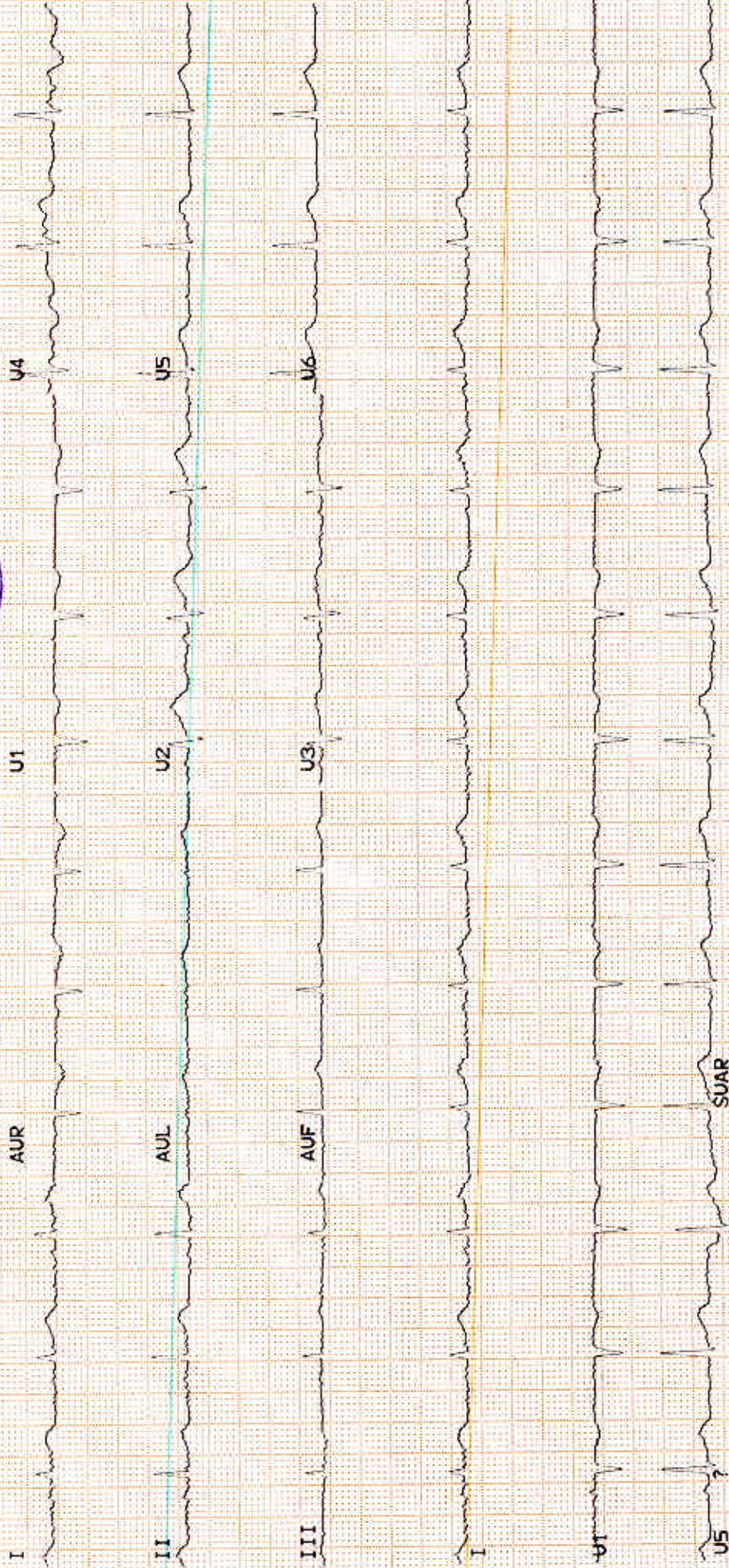


Interpretation:

low QRS amplitudes
probably abnormal ECG



unconfirmed report.



**METRO****HOSPITAL & HEART INSTITUTE**

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(NABH & ISO 9001: 2008 Certified)

Radiology Investigation Report

Name : Mrs. Archana Malik
Ref. By : Dr. NITIN KUMAR
IP/OP : OP/202315344
Date : 24/02/2024

Age/Sex : 50 Y/F
UHID NO : 2024002313
Request No : 70248836

X-RAY CHEST PA View

Cardiac contour & size are normal.
Trachea is central.
Lung fields are clear.
Hilar shadows are normal.
Costophrenic angles are clear.
Bony rib cage is normal.

IMPRESSION: NORMAL CHEST.


DR. PRAKASH CHANDRA PANDEY
MBBS, DMRD
CONSULTANT RADIOLOGIST

Note:

- (1) Not Valid for medical-legal purposes.
- (2) This is a professional opinion based on imaging finding and not the diagnosis.
- (3) In case of any discrepancy due to machine error or typing error, please get it rectified immediately.

Plot No. F-1, Sector-6A, SIDCUL, Haridwar - 249 403

Emergency : +91 8191902600, Phone : 01334 - 239040 / 42 / 43, Fax : 01334 - 239043

E-mail : metroharidwar@metrohospitals.com, Website: www.metrohospitals.com

Regd. Office : 21, Community Center, Preet Vihar, New Delhi-110092

CIN No.: U33201DL2006PTC156918

MHHI/CL/0115/Rev. No. 01



Name : Mrs. Archana Malik
 Ref. By : Dr. NITIN KUMAR
 IP/OP : OP/202315344
 Sample Date : 24/02/2024
 Reporting Date: 24/02/2024

Age/Sex : 50 Y/F
 UHID : 2024002313
 Request No. : 10392465
 Sample Time : 09:56
 Reporting Time : 20:27

| Test | Result | Unit | Bio. Ref. | Inter. Test Method |
|------|--------|------|-----------|--------------------|
|------|--------|------|-----------|--------------------|

Hematology

CBC (COMPLETE BLOOD COUNT/HAEMOGRAM)

| | | | | |
|-------------------------------|----------|-----------|-------------|--|
| HB | 11.5 | gm/dl | F - 11.5-15 | |
| TLC | 5210 | /cumm | 4000-11000 | |
| DLC (WBC DIFFERENTIAL) | | | | |
| NEUTROPHILS | 55 | % | 45-75 | |
| LYMPHOCYTES | 35 | % | 25-45 | |
| EOSINOPHILS | 04 | % | 1-6 | |
| MONOCYTES | 06 | % | 2-8 | |
| BASOPHILS | 00 | % | --<2 | |
| RBC | 3.92 | million | 3.5-5.5 | |
| PCV | 37.8 | % | 36-52 | |
| MCV | 96.4 | fL | 80-100 | |
| MCH | 29.3 | PG | 27-32 | |
| MCHC | 30.4 | gm/dl | 31-37 | |
| PLATELET COUNT | 1.24 | lakh/cumm | 1.5-4.5 | |
| RDW | 13.0 | % | 11.5-15 | |
| BLOOD GROUP | | | | |
| ABO | O | | - | |
| Rh | POSITIVE | | - | |
| ESR | 20.0 | mm/hr | 20 | |

Serology & Immunology

THYROID PROFILE

| | | | |
|-----|------|--------|-----------|
| T3 | 2.13 | nmol/L | 1.70-3.10 |
| T4 | 7.75 | µg/dl | 5.95-15.4 |
| TSH | 1.51 | µIU/L | 0.46-4.68 |

*** End of Reports ***

Dr. Vishal Arora
 MBBS, DCP
 (Consultant Pathologist)



Note:

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2. The values are to be collaborated with clinical findings by qualified doctor and any alarming and unexpected results should be reported to Lab urgently for recheck and manual typing errors.
3. These reports are not valid for medicolegal purposes and all doctor unsigned reports should be considered provisional only.
4. All card based tests are screening test therefore need confirmation by other alternative test like (PCR, ELISA).



Pathology Report

METRO

HOSPITAL & HEART INSTITUTE

(A unit of Sunhill Hospitals Private Limited)

Age/Sex : 50/F (NABH & ISO 9001:2008 Certified)

UHID : 2024002313

Request No. : 10392465

Sample Time : 09:56

Reporting Time : 20:27

Name : Mrs. Archana Malik
 Ref. By : Dr. NITIN KUMAR
 IP/OP : OP/202315344
 Sample Date : 24/02/2024
 Reporting Date: 24/02/2024

| Test | Result | Unit | Bio. Ref. Inter. | Test Method |
|-----------------------------------|--------------|--------|------------------|-------------|
| Biochemistry | | | | |
| HBIAC | 5.7 | % | 4.5-6.3 | |
| BLOOD SUGAR -PP | 88.0 | mg/dl | 70.0-140.0 | |
| BLOOD SUGAR -FASTING | 92.0 | mg/dl | 70.0-110.0 | |
| LIPID PROFILE | | | | |
| TOTAL CHOLESTEROL | 185.0 | mg/dl | 00-250.0 | |
| HDL-CHOLESTEROL | 46.0 | mg/dl | 00-50.0 | |
| LDL | 111.0 | mg/dl | 00-150.0 | |
| TRIGLYCERIDES | 137.0 | md/dl | 30-150 | |
| VLDL | 27.0 | mg/dl | 0-50 | |
| CHOL/HDL Ratio | 4.0 | | <4.5 | |
| LFT (LIVER FUNCTION TEST) | | | | |
| BILIRUBIN INDIRECT | 0.30 | mg/dl | 0.2-0.8 | |
| SGOT | 28.0 | U/L | 10-42 | |
| SGPT | 25.0 | U/L | 10-42 | |
| BIILIRUBIN TOTAL | 0.60 | mg/dl | 0.2-1.0 | |
| ALKALINE PHOSPHATASE | 114.0 | IU/L | 28-111 | |
| BILIRUBIN DIRECT | 0.30 | mg/dl | 0.1-0.4 | |
| TOTAL PROTEIN | 7.0 | gm/dl | 6.4-8.2 | |
| ALBUMIN | 4.0 | g/dl | 3.5-5.0 | |
| GLOBULIN | 3.0 | gm/dl | 2.0-4.0 | |
| AG RATIO | 1.3 | | - | |
| KFT (KIDNEY FUNCTION TEST) | | | | |
| UREA | 23.6 | mg/dl | 15-45 | |
| SODIUM | 138.0 | mmol/L | 135-155 | |
| CREATININE | 0.60 | mg/dl | 0.6-1.3 | |
| URIC ACID | 3.6 | mg/dl | 3.0-7.6 | |
| BUN | 11.2 | mg/dl | 05-20 | |
| POTTASSIUM | 4.3 | mmol/L | 3.5-5.5 | |
| CALCIUM | 9.5 | mg/dl | 8.5-10.5 | |

*** End of Reports ***

Dr. Vishal Arora
 MBBS, DCP
 (Consultant Pathologist)

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192.168.7.100/hismetroharidwar/modules/lab/20240220/pathology_results.php?srsltid=AfmBOoq11057421471801d1301f1d1cb007005e8235041b=en&local_user=ck_la... 1/1

E-mail : metroharidwar@metrohospitals.com, Website: www.metrohospitals.com

Regd. Office : 21, Community Center, Preet Vihar, New Delhi-110092

CIN No.: U33201DL2006PTC156918

MHHI/CL/0115/Rev. No. 01



Name : Mrs. Archana Malik
 Ref. By : Dr. NITIN KUMAR
 IP/OP : OP/202315344
 Sample Date : 24/02/2024
 Reporting Date: 24/02/2024

| Test | Result | Unit | Bio. Ref. Inter. | Test Method |
|--------------------------|-------------|------|------------------|-------------|
| Urine Examination | | | | |
| URINE SUGAR | NIL | | | |
| URINE ROUTINE ANALYSIS | | | | |
| PHYSICAL EXAMINATION | | | | |
| COLOUR | PALE YELLOW | | | |
| TRANSPARENCY | CLEAR | | | |
| S. GRAVITY | 1.030 | | | |
| CHEMICAL EXAMINATION | | | | |
| ALBUMIN | NIL | | | |
| SUGAR | NIL | | | |
| pH | 6.5 | | | |
| BLOOD | NIL | | | |
| KETONE | NIL | | | |
| MICROSCOPIC EXAMINATION | | | | |
| PUS CELLS | 2-3 | | | |
| EPITHELIAL CELLS | 1-2 | | | |
| RBC | NIL | | | |
| CRYSTALS | NIL | | | |
| CAST | NIL | | | |
| BACTERIA | NIL | | | |
| AMORPHOUS PHOSPHATE | NIL | | | |
| AMORPHOUS URATES | NIL | | | |

*** End of Reports ***

Dr. Vishal Arora
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 (Consultant Pathologist)



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METRO

HOSPITAL & HEART INSTITUTE

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Radiology Investigation Report

Name : Mrs. Archana Malik
Ref. By : Dr. NITIN KUMAR
IP/OP : OP/202315344
Date : 24/02/2024

Age/Sex : 50 Y/F
UHID NO : 2024002313
Request No : 70248836

USG WHOLE ABDOMEN

The diaphragm is normal in contour & respiratory excursion. There is no ascitis or lymph node mass.

Liver is normal in shape, outline & echotexture. No focal lesion of abnormal ecogenecity is seen. Intrahepat biliary radicles are not dilated. Portal vein & portal venous radicles are normal.


Gall bladder is well distended, its outlines are smooth & its wall are not thick. No calculus /mass lesion is see in its lumen. Common bile duct is normal in course & caliber. No calculus is seen in its lumen.

Spleen & pancreas appears normal in shape, size, outline & echotexture.

Both the kidneys are normal in shape, size, outline & echotexture. Renal parenchymal thickness is norma Corticomedullary junction is defined & is normal. There is no hydronephrosis. No echogenic renal calculus seen.

Urinary bladder is empty. Uterus can not be commented due to UB empty.

IMPRESSION : NORMAL STUDY


DR. PRAKASH CHANDRA PANDEY
MBBS, DMRD
CONSULTANT RADIOLOGIST

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Regd. Office : 21, Community Center, Preet Vihar, New Delhi-110092

CIN No.: U33201DL2006PTC156918

MHHI/CL/0115/Rev. No. 01

2D ECHOCARDIOGRAPHY

| | | | |
|---------------------|--------------------|-----------------|------------|
| Name: | Mrs. Archana Malik | UHID No: | 2024002313 |
| Age/Sex: | 50Y/F | Ward: | OPD |
| Referred by: | Dr. Nitin Kumar | Date: | 24.02.2024 |

ACOUSTIC WINDOW: Normal

MEASUREMENTS AND CALCULATIONS

| Measurements | Observed Value | Reference Value |
|----------------------|----------------|--|
| IVS (ED) | 1.0 | (0.6 – 1.1 cm) |
| LVPW (ED) | 0.9 | (0.6 – 1.1 cm) |
| LVID (ED) | 4.1 | Male (3.7 – 5.5 cm) Female (3.7 – 5.2 cm) |
| Aortic root diameter | 2.2 | (2.0 – 3.7 cm) |
| LA dimension | 2.6 | Male (1.9 – 4.0 cm) Female (1.7 – 3.8 cm) |
| LV EF | 60% | (55 – 75%) |

MORPHOLOGICAL DATA

| | | | |
|-----------------|--------|-----------------|--------|
| Mitral valve | Normal | Right Atrium | Normal |
| Aortic valve | Normal | Right Ventricle | Normal |
| Tricuspid valve | Normal | PA | Normal |
| Pulmonary valve | Normal | IVS | Intact |
| | | IAS | Intact |

DOPPLER STUDY



| Valve | Regurges | Velocities (cm/s) | Gradients (mmHg) |
|-----------|----------|-------------------------|------------------|
| Mitral | Mild | E – 90, A – 53, E/A > 1 | |
| Aortic | Nil | Vel – 120 | |
| Tricuspid | Mild | Vel – 264 | PASP – 32 |
| Pulmonary | Nil | Vel – 108 | |

FINAL IMPRESSION

- Normal Acoustic Window
- Normal Chambers Dimensions
- No RWMA
- LVEF~60%
- No LVDD
- Mild MR, Mild TR, PASP 32 mmHg
- No pericardial effusion
- No Intracardiac clot

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(Note: This document is not for medico-legal purpose)