



NARAYAN MEMORIAL HOSPITAL

(A Unit of Narayan Health Services Pvt.Ltd.)

601 Diamond Harbour Road, Kolkata: 700034. Phone: +91 33 6640 0000,
Email: contact@nmh.org.in | Website: www.narayanmemorialhospital.com

☎ 62921 95051

Duplicate Credit Tax Invoice

Name : NMHK.2307113
Name : Mrs. AKRITI NUTAN
Age : 33 Year(s) / Female
Company : ArcoFemi Healthcare Ltd.
Address : EDEN CITY-TOWER-C5, FLAT-1301 ,MAHESHTA
LA, SOUTH 24 PARGANAS, West Bengal,
700137

Bill Date : 22/01/2024 08:55AM
Bill No : OPCR10692
Receipt No :
Referred By : NMH
GSTNo : 19AACCN1707E1ZS
Mobile No : 8420906944

Sl No	Services	Qty	Price (Rs.)	Dis Amt(Rs.)	Amount(Rs.)
1	HEALTH CHECKUPS Mediwheel Full Body Health Checkup Female Below 40	1	2300	0	2300

Bill Amount : 2300.00
To be paid by company : 2300.00

of Rs. 2300.00
to be paid by ArcoFemi Healthcare Ltd.


Cashier
PEALI POLLEY / PEALI.P

Gmail

Health Check Up NMH <healthcheckup.nmh@gmail.com>

Health Check up Booking Confirmed Request(bobS6061),Package Code-10000475, Beneficiary Code-301743

Mediwheel <wellness@mediwheel.in>
healthcheckup.nmh@gmail.com
customer@mediwheel.in

20 January 2024 at 17:37

* Collect Adhar Card.



Mediwheel
...Your wellness partner

Insurance :- Arcofemi Healthcare

2300/-

011-41195959

PKH :- Mediwheel full body female below 40

Hi Narayan Memorial Hospital,

We have received the confirmation for the following booking. Please provide your confirmation by clicking on the yes and no button.

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

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

Package Code : PKG10000475

Contact Details : 9903411334

Email : rakesh.sinha4@bankofbaroda.co.in

Booking Date : 20-01-2024

Appointment Date : 22-01-2024

Confirmation Status : Booking Confirmed

Preferred Time : 8:00am

Member Information		
Booked Member Name	Age	Gender
Akriti Nutan	33 year	Female

We request you to facilitate the employee on priority.

Thanks,
Mediwheel Team

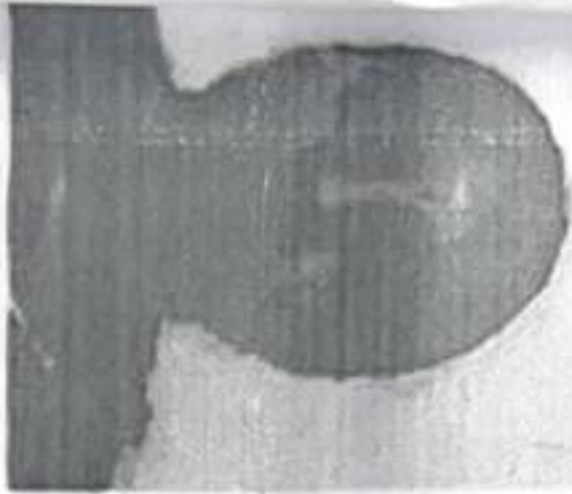
You have received this mail because your e-mail ID is registered with This is a system-generated e-mail Arcofemi Healthcare Limited, please don't reply to this message.

Please visit to our Terms & Conditions for more informaion. This email is recieved because you are register with us Click here to unsubscribe.



भारत सरकार

Government of India



आकृति नूतन

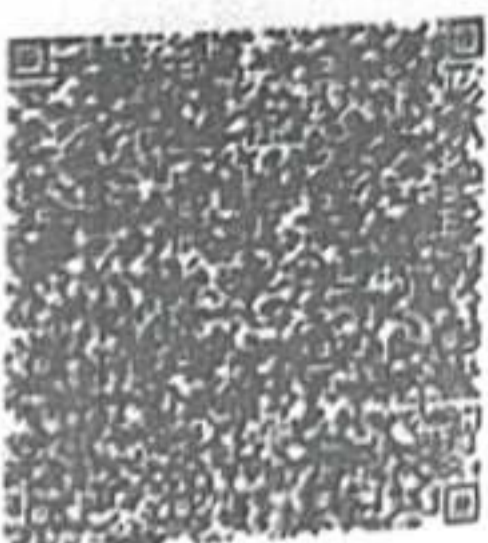
Akriti Nutan

जन्म तिथि/DOB: 07/11/1990

महिला/ FEMALE

5586 5585 5924

VID : 9137 3717 9649 9266



शेरा आखार, शेरी पहचान



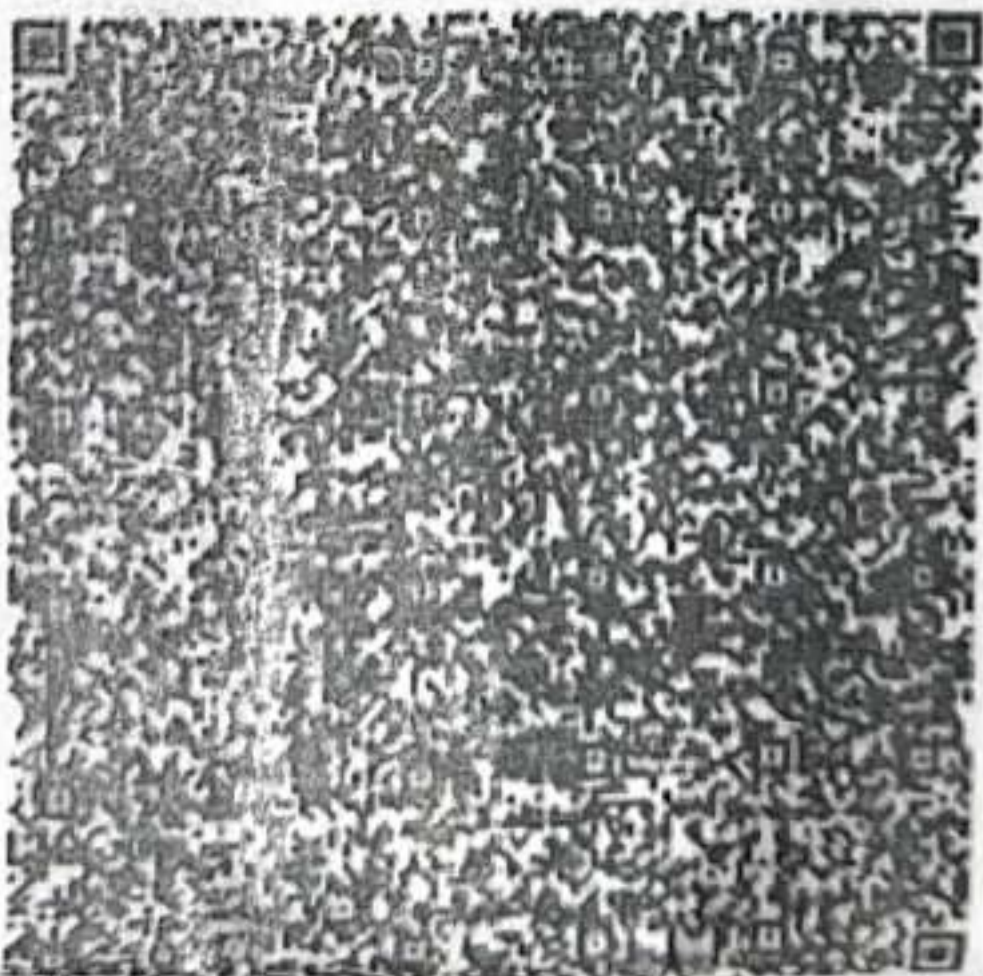
भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पत्ता: W/O राकेश कुमार सिन्हा, मोहल्ला- कागजी नजदीक देवी स्थान, पोस्ट- बिहारशरीफ, थाना- बिहारशरीफ, बिहार, नालंदा, बिहार - 803101

Address:

W/O Rakesh Kumar Sinha, Mohalla- Kagji
Near Devi Asthan, P.O- Biharsharif, P.S-
Biharsharif, Bihar, Nalanda,
Bihar - 803101



5586 5585 5924

VID : 9137 3717 9649 9266



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Narayan Memorial Hospital

(A Unit of Narayan Health Services Pvt. Ltd.)

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1ZS



DIAGNOSTICS REPORT

Patient Name	: Mrs. AKRITI NUTAN	Order Date	: 22/01/2024 08:55
Age/Sex	: 33 Year(s)/Female	Report Date	: 22/01/2024 12:28
UHID	: NMHK.2307113	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
		Mobile	: 8420906944
Address	: EDEN CITY-TOWER-C5, FLAT-1301, MAHESHTALA,SOUTH 24 PARGANAS, West Bengal, 700137		

X-RAY CHEST PA VIEW

No active lung parenchymal lesion is seen.
Both hila are normal in position, size and density.
Cardiothoracic ratio appear normal.
Trachea and mediastinum are normal in position.
Both costo-phrenic angles are clear.
Domes of diaphragm are normal in position and outlines are well delineated.
Bony thorax appears unremarkable .

Needs clinical correlation.

Dr.SUBRATA NAG , MBBS,DNB,Fellow
intervention/endovascular surgery

RegNo: 66718

Print Date Time : 22/01/2024 12:26:41

Print By : Sanhita Gupta

Registered Office :
582, Diamond Harbour Road
Behala, Kolkata - 700 034

Corporate Office :
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Diamond Harbour Road, Kolkata - 700 034

Ph : 033 6640 0000 | Mob : +91 62921 95051 | E-mail : contact@nmh.org.in

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Page 1 of 1



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. AKRITI NUTAN
UHID : NMHK.2307113
Episode : OP
Ref. Doctor : NMH
Address : EDEN CITY-TOWER-C5, FLAT-1301, MAHESHTALA, SOUTH
 24 PARGANAS, West Bengal, 700137

Age/Sex : 33 Year(s)/Female
Order Date : 22/01/2024 08:55
Mobile No : 8420906944
DOB : 07/11/1990
Facility : NARAYAN MEMORIAL HOSPITAL

INVESTIGATION : **Biochemistry**

Sample No : 07H0157862
 Collection Date : 22/01/24 09:11
 Ack Date : 22/01/2024 10:56
 Report Date : 22/01/24 14:19

TEST NAME	RESULTS	UNITS	BIOLOGICAL REF RANGE
SERUM CREATININE Sample- Serum	0.5	mg/dl	0.5 - 0.9
SAMPLE : SERUM SERUM CREATININE Jaffe Gen2 Compensated			
LIVER FUNCTION TEST (LFT) Sample- Serum			
SAMPLE : SERUM TOTAL BILIRUBIN Diazo Method	0.6	mg/dl	0 - 1.1
DIRECT BILIRUBIN Diazo Method	0.2	mg/dl	0 - 0.2
INDIRECT BILIRUBIN Calculated	0.4	mg/dl	0.2 - 0.9
SGPT (ALT) IFCC Without Pyridoxal Phosphate	11	U/L	0 - 34
SGOT (AST) IFCC Without Pyridoxal Phosphate	31	U/L	0 - 31
ALKALINE PHOSPHATASE IFCC	147 ▲	U/L	53 - 128
TOTAL PROTEIN Biuret	17 ▲	g/dl	6.4 - 8.2
ALBUMIN Bromocresol Green	4.7	gm/dl	3.5 - 5.2
GLOBULIN Calculated	2.3	g/dl	2 - 3.5
ALBUMIN:GLOBULIN Calculated	2.0	-	1.1 - 2.5
GGT Enzymatic colorimetric assay	21	U/L	5 - 36
BLOOD UREA NITROGEN Sample- Serum			
BLOOD UREA NITROGEN	7.5	mg/dl	6 - 20



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Calculated

LIPID PROFILE

Sample- Serum

SAMPLE : SERUM

TOTAL CHOLESTEROL	198	mg/dl	Desirable <200 Borderline 200-239 High >=240
CHOD-PAP HDL CHOLESTEROL	47	mg/dl	40 - 60
Homogenous Enzymatic Colorimetric LDL CHOLESTEROL	128	mg/dl	Optimal < 100 Borderline 130 - 159 High >160
Homogenous Enzymatic Colorimetric VLDL	23.2	mg/dl	0 - 30
CALCULATED CHOLESTEROL-HDL RATIO	4.21	-	
LDL-HDL RATIO	2.72	-	
TRIGLYCERIDES	116	mg/dl	Desirable <150 Borderline 150 - 200 High >200

Enzymatic Colorimetric

URIC ACID

Sample- Serum

SAMPLE : SERUM

URIC ACID	3.3	mg/dl	2.4 - 5.7
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Enzymatic Colorimetric

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

Sample- EDTA Whole Blood A

SAMPLE : EDTA BLOOD

HBA1C	4.9		
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Age/Sex : 33 Year(s)/Female
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 Facility : NARAYAN MEMORIAL HOSPITAL

Address : EDEN CITY-TOWER-C5, FLAT-1301, MAHESHTALA, SOUTH
 24 PARGANAS, West Bengal, 700137

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
- HbA1c has been endorsed by clinical groups & American Diabetes Association guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low HbA1c in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (Specially severe iron deficiency anaemia & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- Interference of Haemoglobinopathies 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 and HbC trait).
- For known diabetic patients, following values can be considered as a tool for monitoring the glycemic control :
 - Excellent Control - 6 - 7 %
 - Fair to Good Control - 7 - 8 %
 - Unsatisfactory Control - 8 - 10 %
 - Poor Control - > 10 %

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

BLOOD SUGAR(F)

Sample- Plasma

SAMPLE : PLASMA

BLOOD SUGAR FASTING

Hexokinase

BLOOD SUGAR(PP)

Sample- Plasma

SAMPLE : PLASMA

BLOOD SUGAR PP

Hexokinase

90

mg/dl

70 - 109

96

mg/dl

70.00 - 140.00

End of Report

Dr.S. Chatterjee
 MD, MBBS, FAACC
 (CONSULTANT BIOCHEMIST)



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Address : EDEN CITY-TOWER-CS, FLAT-1301, MAHESHTALA, SOUTH 24 PARGANAS, West Bengal, 700137	Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0157862	Collection Date : 22/01/24 09:11	Ack Date : 22/01/2024 09:48	Report Date : 22/01/24 11:03

BLOOD GROUPING & Rh TYPING

Sample- EDTA Whole Blood

SAMPLE : EDTA BLOOD

BLOOD GROUP

' AB '

Agglutination forward & Reverse

RH TYPE

POSITIVE

COMPLETE HAEMOGRAM (CBC)

Sample- EDTA Whole Blood

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB)

12.2

gm/dl

12 - 15

Colorimetric method (Cyn Meth)

RBC COUNT

4.6

x10⁶/ul

3.8 - 4.8

Electrical Impedance Method

TOTAL WBC COUNT

5.6

10³/cm³

4 - 10

Electrical Impedance Method

PLATELET COUNT

250

10³/cm³

150 - 410

Electrical Impedance Method

PCV

38

%

36 - 46

RBC pulse ht. detection method

MCV

83

fl

83 - 101

calculated

MCH

27

pg

27 - 32

Calculated

MCHC

32

gm/dl

31.5 - 34.5

Calculated

ESR

15 ▲

%

0 - 12

Modified Westergren Method

DIFFERENTIAL COUNT

NEUTROPHILS

63

%

40 - 80

Microscopy

LYMPHOCYTES

28

%

20 - 40

Microscopy



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Mobile No : 8420906944
DOB : 07/11/1990
Facility : NARAYAN MEMORIAL HOSPITAL

MONOCYTES

Microscopy

EOSINOPHILS

Microscopy

BASOPHILS

Microscopy

PERIPHERAL BLOOD SMEAR

RBC

WBC

PLATELET

05

04

00

%

%

%

2 - 10

1 - 6

0 - 2

Normocytic normochromic.
 Within normal limits.
 Adequate.

End of Report

Dr. MAINAK CHAKRABORTY
 MBBS, MD(PATH)
 (CONSULTANT PATHOLOGIST)

Checked By

Registered Office :
 582, Diamond Harbour Road
 Behala, Kolkata - 700 034

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Episode : OP	Mobile No : 8420906944
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Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
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Sample No : 07H0157862 Collection Date : 22/01/24 09:11 Ack Date : 22/01/2024 10:56 Report Date : 22/01/24 14:19

THYROID FUNCTION TEST

Sample-

Serum

SAMPLE : SERUM

T3	1.23	ng/ml	0.60 - 1.80
ECLIA			
T4	8.84	ug/dL	5.40 - 11.70
ECLIA			
TSH	0.87	uIU/ml	Adult Male - 0.27-5.5 0 Adult Female - 0.27- 5.50 Newborns - <25 Upto 12 years - 0.3- 5

ECLIA

Interpretations:

- For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
- The assay is unaffected by icterus (Bilirubin < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (Intralipid < 1500 mg/dL), biotin (<102 nmol/L or < 25 ng/ml), IgG < 2 g/dL and IgM < 0.5 g/dL)
- There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
- TSH values may be transiently altered because of non thyroidal illness like several infections, liver disease, renal and heart failure, several burns, trauma and surgery etc. Drugs that decrease TSH values e.g. L-dopa, Glucocorticoid drugs that increase TSH values e.g. Iodine, Lithium, Amiodarone.
- The assay is unaffected by icterus (bilirubin < 633 µmol/L or < 37 mg/dl), hemolysis (Hb < 1.4 mmol/L or < 2.3 g/dl), lipemia (triglycerides < 28.5 mmol/L or 2500 mg/dl) and biotin (< 409 nmol or < 100 ng/ml).
- The assay is unaffected by icterus (bilirubin < 599 µmol/L or < 35 mg/dl), hemolysis (Hb < 1.2 mmol/L or < 2.0 g/dl), lipemia (Intralipid < 1800 mg/dl) and biotin (< 123 nmol or < 30 ng/ml).

End of Report

Dr.S. Chatterjee
MD, MBBS, FAAC
(CONSULTANT BIOCHEMIST)



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Age/Sex : 33 Year(s)/Female

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Mobile No : 8420906944

DOB : 07/11/1990

Facility : NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0157862	Collection Date : 22/01/24 09:11	Ack Date : 22/01/2024 10:58	Report Date : 22/01/24 13:08

URINE FOR R/E

Sample- Urine

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	40	ml	
COLOUR	PALE STRAW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.010		1.010 - 1.030
REACTION(pH)	ACIDIC (pH - 6.0)		

CHEMICAL EXAMINATION

SUGAR	ABSENT	ABSENT
ALBUMIN.	ABSENT	ABSENT
BLOOD	ABSENT	ABSENT
KETONE	ABSENT	ABSENT
BILE SALT	ABSENT	ABSENT
BILE PIGMENTS	ABSENT	ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS	1-2/HPF	<5/HPF
EPITHELIAL CELLS	4-5/HPF	<20/HPF
RBC	ABSENT	
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT

Please correlate clinically.

End of Report

Dr. MAINAK CHAKRABORTY
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)



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Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0157862	Collection Date : 22/01/24 09:11	Ack Date : 22/01/2024 10:58	Report Date : 22/01/24 14:19

URINE FOR SUGAR FASTING

Sample- Urine

SAMPLE : URINE

RESULT

ABSENT

End of Report

Dr.S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

Checked By



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Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0157892	Collection Date : 22/01/24 12:38	Ack Date : 22/01/2024 16:11	Report Date : 23/01/24 10:25

URINE FOR SUGAR PP

Sample- Urine

SAMPLE : URINE

RESULT

ABSENT

End of Report

Dr.S. Chatterjee
MD, MBBS, FAAC
(CONSULTANT BIOCHEMIST)

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DIAGNOSTICS REPORT

Patient Name	: Mrs. AKRITI NUTAN	Order Date	: 22/01/2024 08:55
Age/Sex	: 33 Year(s)/Female	Report Date	: 22/01/2024 15:41
UHID	: NMHK.2307113	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
		Mobile	: 8420906944
Address	: EDEN CITY-TOWER-C5, FLAT-1301, MAHESHTALA,SOUTH 24 PARGANAS, West Bengal, 700137		

USG REPORT OF WHOLE ABDOMEN (SCREENING)

LIVER : Liver is normal in size and parenchymal echotexture. Intrahepatic biliary radicles are not dilated.No focal mass lesion is seen.

PORTA :PV : Normal. PV measures 0.8 cm.

CD : Normal . CD measures 0.2 cm.

GALL BLADDER : Gall bladder is normal in size, contour, outline and position. No calculus is seen. Wall thickness is normal.

PANCREAS :Pancreas is normal in size and parenchymal echogenicity. Pancreatic duct is not dilated.

SPLEEN :Spleen is not enlarged and parenchyma shows normal homogeneous pattern.

KIDNEYS :Both kidneys are normal in size, shape, outline, position and parenchymal echogenicity. Cortico medullary differentiation maintained.

No evidence of any calculus/ mass / hydronephrosis is seen.

Right kidney measures : 12.0 cm & Left kidney measures : 11.6 cm.

URINARY BLADDER : Urinary bladder is normal in contour, outline and distension. No vesical lesion is seen.

Print Date Time : 22/01/2024 15:39:18

Registered Office :
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Ph : 033 6640 0000 | Mob : +91 62921 95051 | E-mail :

Print By : Sanhita Gupta

Page 1 of 2



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UTERUS : Anteverted **marginally bulky**. Normal in shape, outline, position and parenchymal echogenicity. Cavity is empty. Uterus measures 9.1 cm x 4.5 cm x 3.9 cm.

OVARIES : Both ovaries are normal in size, shape and echopattern.
Right ovary : measures (2.9 x 2.1) cm. Left ovary : measures (2.3 x 1.8) cm.

PERITONEUM : :No free fluid is noted.

RETROPERITONEUM : IVC and aorta appear normal. No lymphadenopathy is seen.

IMPRESSION : Mildly bulky uterus.

Dr. MADHUSHREE RAY NASKAR, MBBS
,DMRD

Consultant Radiologist

RegNo: 57032

Print Date Time : 22/01/2024 15:39:18

Print By : Sanhita Gupta

Registered Office :
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ELECTROCARDIOGRAM REPORT (ECG)

HR	: 70 bpm
Rhythm	: Sinus
P wave	: Normal
PR Interval	: 172 msec
QRS axis	: Left
QRS duration	: 74 msec
QRS configuration	: Normal
T wave	: Non specific changes
ST segment	: Non specific changes
QTc	: 417 msec
QT	: 384 msec

IMPRESSION:

- Sinus rhythm. Left QRS axis.
 - Non specific ST-T changes.
- Clinical correlation please.

Dr. Sudip Chakraborty, MBBS, DIP (Preventative Cardiology) fellow Clinical

RegNo: 56285

Print Date Time : 23/01/2024 18:08:09

Print By : Arpita manna

Registered Office :
582, Diamond Harbour Road
Behala, Kolkata - 700 034

Corporate Office :
Behala Manton, 85, (Mail - 601)
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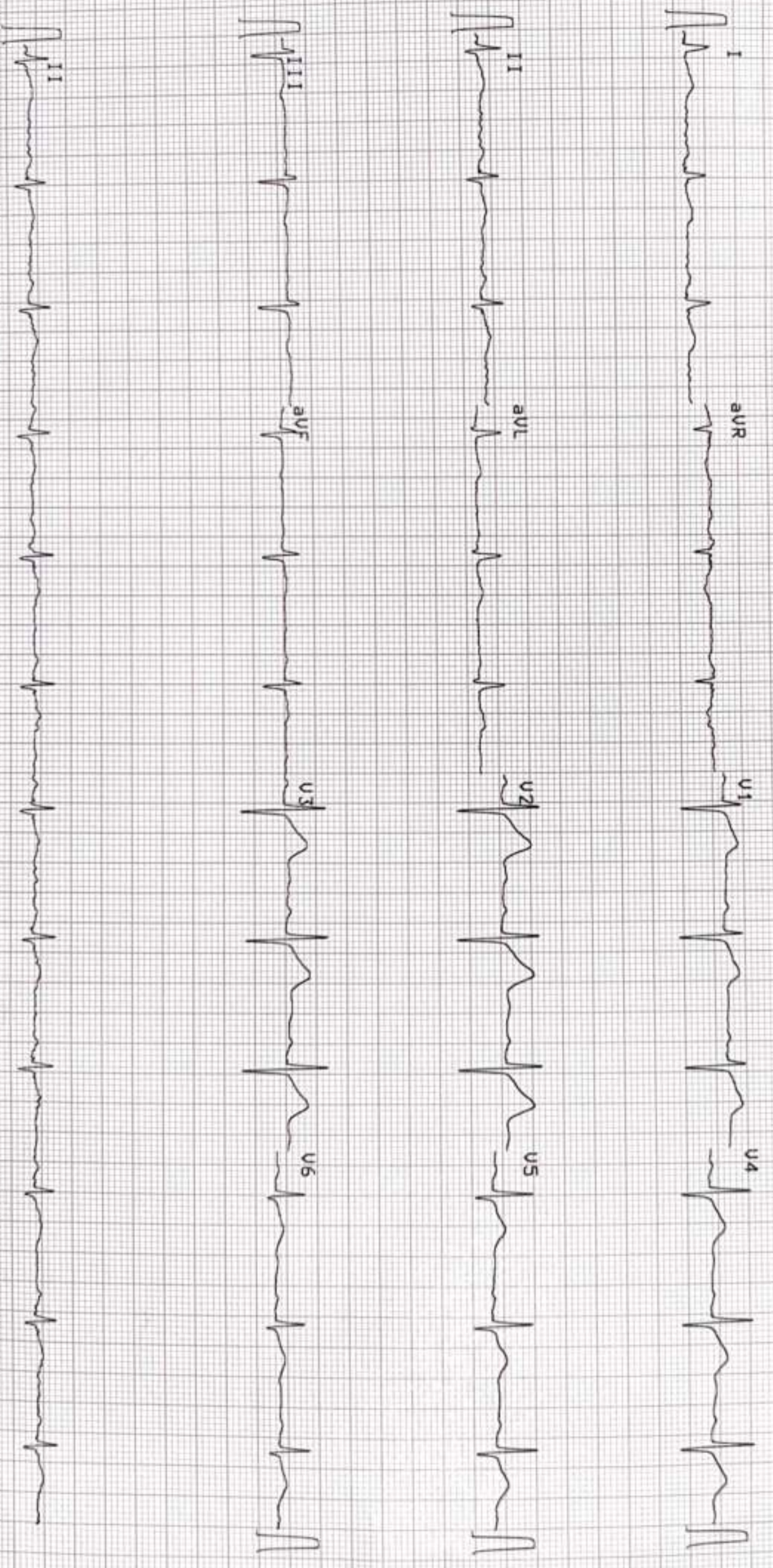
AKRITI NUTRN
 2307113
 33 years Female
 cm / kg

HR 70/min
 Intervals:
 RR 853 ms
 P 98 ms
 PR 172 ms
 QR5 74 ms
 QT 384 ms
 QTc 417 ms
 (Bazett)
 10 mm/mV

Axis:
 P 34 °
 QR5 -9 °
 T 25 °
 P (II) 0.07 mV
 S (V1) -0.86 mV
 R (V5) 0.84 mV
 Sokol. 1.87 mV

SINUS RHYTHM
 LEFTWARD AXIS
 OTHERWISE NORMAL ECG
 6.02

UNCONFIRMED REPORT



10 mm/mV
 25 mm/s

0.05-25 Hz FS0 SSF 585 22.01.2024 12:11:32

NARAYAN MEMORIAL
 HOSPITAL, BEHALA

RT

Narayan Memorial Hospital

(A Unit of Narayan Health Services Pvt. Ltd.)

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1ZS



DIAGNOSTICS REPORT

Patient Name	: Mrs. AKRITI NUTAN	Order Date	: 22/01/2024 08:55
Age/Sex	: 33 Year(s)/Female	Report Date	: 22/01/2024 17:07
UHID	: NMHK.2307113	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
		Mobile	: 8420906944
Address	: EDEN CITY-TOWER-C5, FLAT-1301, MAHESHTALA,SOUTH 24 PARGANAS, West Bengal, 700137		

ECHO SCREENING

- * No regional wall motion abnormality at rest.
- * Normal LV systolic function (LVEF = 62 %).
- * Normal RV systolic function. (TAPSE = 1.7 cm, RVS' = 0.10 m/s).
- * Slightly thickened mitral valve.Trivial MR.
- * Adequate diastolic compliance (E/e' = 9.11, E/A = 2.21).
- * No pericardial effusion.
- * Mild TR. Estimated PASP 29 mmHg.
- * IVC normal diameter & > 50 % respiratory compressibility.
- * No thrombus, mass / vegetation.

Dr.Sudip Chakraborty , MBBS,DIP (Preventative Cardiology) fellow Clinical

RegNo: 56285

Print Date Time : 23/01/2024 07:59:06

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