

**Metro Hospital & Heart Institute, Haridwar**  
**Health Check-up Certificate**

COMPANY..... Mediawheel.....

EMPLOYEE NO. 110741..... DEPTT. Credit mangla DATE 10-2-24

NAME Deep. Kamal Tiwari AGE/SEX 364/M DOB 04/06/87

DESIGNATION Credit officer MOBILE NO 9936093736

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

HEIGHT 172..... cm. WEIGHT 74..... Kg. BMI.....

P/R..... 91.....per mt. BP 142/101.....mmHg SIGN OF EMP Spinal.....

**EXAMINATION/INVESTIGATIONS**

No	Investigations	Room No	Result
✓	LAB INVESTIGATIONS	Path Lab	Hb <u>15.2 gm/l.</u> TLC <u>6/60</u> /DLC <u>55/35/04/06</u> F <u>95</u> /PPNR /RBS <u>HbA1c 6.1%</u>
✓	BLOOD SUGAR F/PP/RANDOM	Path Lab	
✓	BLOOD GROUP	Path Lab	<u>O+</u>
✓	URINE	Path Lab	<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>Grade I fatty Liver.</u>
✓	ECG	Health check up	<u>Normal ✓</u>
✓	ECHO	Radiology	<u>Normal study</u>
8	TMT	Radiology	
9	PFT	Health check up	
10	AUDIOMETRY	25	
11	ENT EXAM	25	
✓	DENTAL EXAMINATION	24	<u>Oral - Normal / Hygiene poor</u>
13	ACUITY OF VISION / COLOUR VISION	13	<u>VA &lt; 6/6 BIE NV</u>
✓	EXAMINATION BY PHYSICIAN	23	<u>CV: Normal</u> <u>MAA with HTN</u>
15	PSA		<u>0.56 ng/ml</u>

Observations -  
 Thyroid Normal - WNL  
 Lipid Profile WNL  
 KAC WNL  
 LFT - SGOT/SGPT N

Adv to Consult Physician for LFT dysfunction  
 HTN

**DR. NADIN KUMAR**  
 M.D.  
 Consultant General Medicine  
 Reg. No. UKAC-5845  
 Metro Hospital & Heart Institute  
 OCUL, Haridwar-249403 (U.K.)



**Subject: Health Check up Booking Confirmed Request(bobE7264),Package Code-PKG10000474, Beneficiary Code-305363**

Mediwheel <wellness@mediwheel.in>  
Sent: Thu, 1 Feb 2024 15:54:23 GMT+0530  
To: You  
Cc: customercare@mediwheel.in

MedSave

011-41195959

Hi **Metro Hospital & Heart Institute**,

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 Male Below 40

**Patient Package Name** : Mediwheel Full Body Health Checkup Male Below 40

**Package Code** : PKG10000474

**Contact Details** : 9936093736

**Email** : deep.tiwari@bankofbaroda.co.in

**Booking Date** : 01-02-2024

**Appointment Date** : 10-02-2024

**Confirmation Status**: Booking Confirmed

**Preferred Time** : 8:30am

**Member Information**

Booked Member Name	Age	Gender
MR. TIWARI DEEP KAMAL	36 year	Male

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](#).

@ 2024 - 25, Arcofemi Healthcare Pvt Limited.(Mediwheel)

प्रति,

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 जिनका विवरण निम्नानुसार है हमारे करार के अनुसार आपके द्वारा उपलब्ध कराई गई कैशलेस वार्षिक स्वास्थ्य जांच सुविधा का लाभ लेना चाहते हैं।

	कर्मचारी विवरण
नाम	MR. TIWARI DEEP KAMAL
क.कू.संख्या	110741
पदनाम	CREDIT
कार्य का स्थान	MANGLAUR
जन्म की तारीख	04-06-1987
स्वास्थ्य जांच की प्रस्तावित तारीख	10-02-2024
बुकिंग संदर्भ सं.	23M110741100086860E

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 01-02-2024 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 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।)





LETTER OF APPROVAL / RECOMMENDATION

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 employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. TIWARI DEEP KAMAL
EC NO.	110741
DESIGNATION	CREDIT
PLACE OF WORK	MANGLAUR
BIRTHDATE	04-06-1987
PROPOSED DATE OF HEALTH CHECKUP	10-02-2024
BOOKING REFERENCE NO.	23M110741100086860E

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 **01-02-2024** 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 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**

<b>FOR MALE</b>	<b>FOR FEMALE</b>
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
<b>Lipid Profile</b>	<b>Lipid Profile</b>
Total Cholesterol	Total Cholesterol
HDL	HDL
LDL	LDL
VLDL	VLDL
Triglycerides	Triglycerides
HDL / LDL ratio	HDL / LDL ratio
<b>Liver Profile</b>	<b>Liver Profile</b>
AST	AST
ALT	ALT
GGT	GGT
Bilirubin (total, direct, indirect)	Bilirubin (total, direct, indirect)
ALP	ALP
Proteins (T, Albumin, Globulin)	Proteins (T, Albumin, Globulin)
<b>Kidney Profile</b>	<b>Kidney Profile</b>
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
<b>General Tests</b>	<b>General Tests</b>
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





# METRO HOSPITAL & HEART INSTITUTE

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

Patient Name... Deepkamal Triwan Age/Sex... 36y/M Reg. No. MNH/10/20240-01539  
Doctor... Dr. Naman Aggarwal  
Date... 6/2/24

Time... 11:11

H/o tobacco chewing  
3-4 times/day  
since 4 yrs

## DENTAL EXAMINATION

### ➤ TEETH STATUS

= Normal

• MISSING -

N/A

• DECAYED -

N/A

### ➤ ORAL HYGIENE STATUS

= Poor oral hygiene

• STAINS -

++

• CALCULUS -

++

Adv. oral prophylaxis

DR NAMAN AGGARWAL  
B.D.S  
SENIOR DENTAL CONSULTANT  
Reg. No. UK 201  
Metro Hospital & Heart Institute  
Sidcul Harrow, UK, Pin No. - 249413

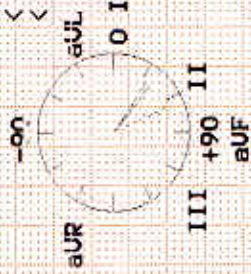


Dr. P. K. Tiwari  
36YM

Measurement Results:

QRS : 92 ms  
 QT/QTcB : 334 / 418 ms  
 PR : 136 ms  
 P : 106 ms  
 RR/PP : 640 / 640 ms  
 P/ORS/T : 65 / 40 / 35 degrees  
 QTd/QTcBD : 38 / 48 ms  
 Sokolow : 2.4 mV  
 NK : 11

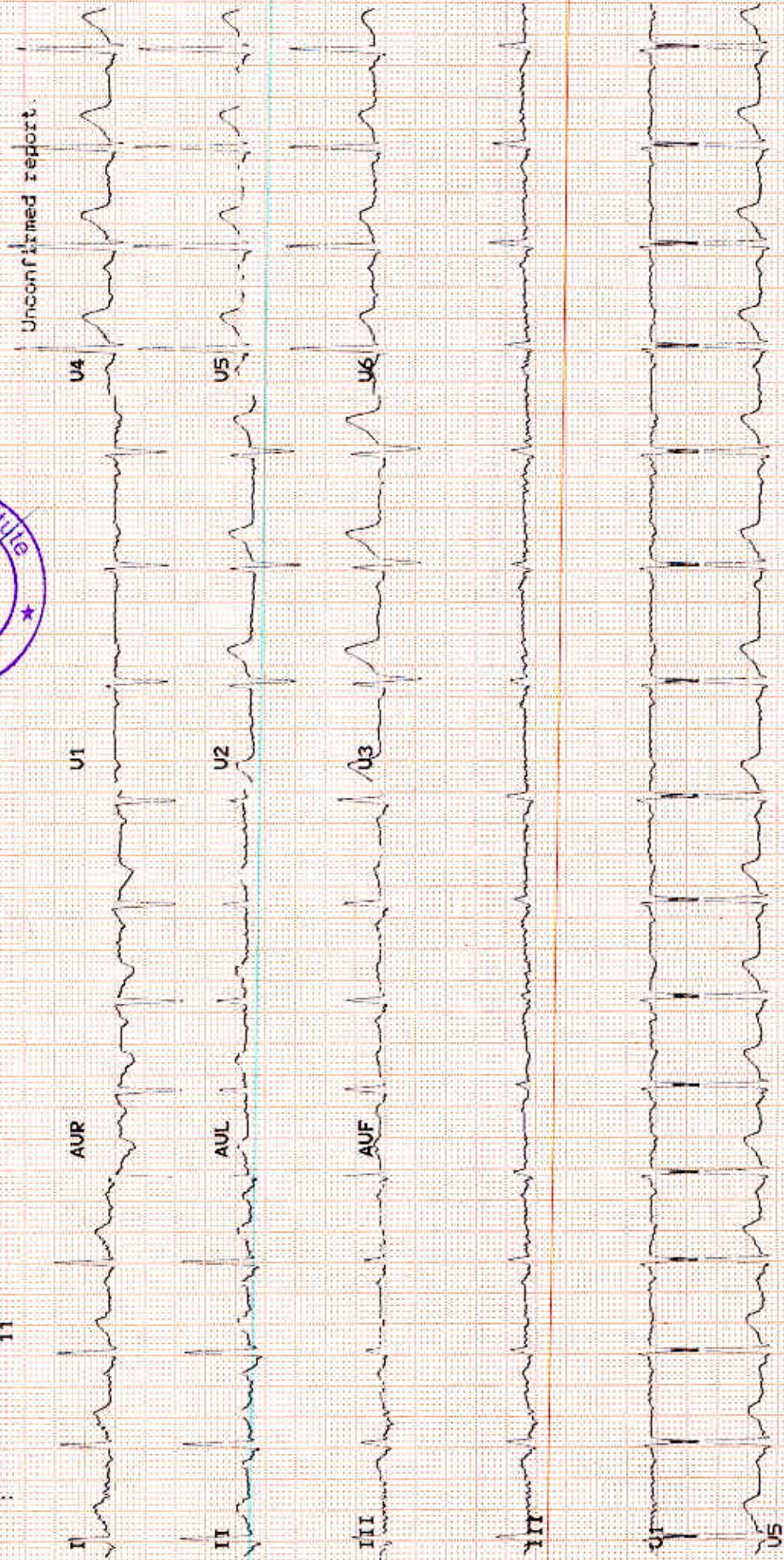
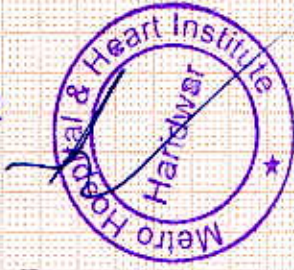
< P  
< T  
< QRS



Interpretation:

normal ECG

16-2-29



Unconfirmed report.



**METRO**

HOSPITAL &amp; HEART INSTITUTE

(A unit of Sunhill Hospitals Private Limited)

(NABH &amp; ISO 9001: 2008 Certified)

**Radiology Investigation Report**

**Name** : Mr. Deep Kamal Tiwari  
**Ref. By** : Dr. NITIN KUMAR  
**IP/OP** : OP/202314949  
**Date** : 10/02/2024

**Age/Sex** : 36 Y/M  
**UHID NO** : 2024001539  
**Request No** : 70248003

**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. FRAKASH 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/CI/0115/Rev. No. 01



19

## Pathology Report



# METRO

HOSPITAL &amp; HEART INSTITUTE

(A unit of Sunhill Hospitals Private Limited)

Age/Sex : 46 M (NABH &amp; ISO 9001:2008 Certified)

UHID : 2024001539

Request No. : 10390919

Sample Time : 13:42

Reporting Time : 21:48

Name : Mr. Deep Kamal Tiwari  
 Ref. By : Dr. NITIN KUMAR  
 IP/OP : OP/202314949  
 Sample Date : 10/02/2024  
 Reporting Date: 10/02/2024

Test	Result	Unit	Bio. Ref.	Inter. Test Method
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### Hematology

CBC (COMPLETE BLOOD COUNT/HAEMOGRAM)

HB	15.2	gm/dl	M - 13-18	
TLC	6160	/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	4.60	million	3.5-5.5	
PCV	49.3	%	36-52	
MCV	107.2	fL	80-100	
MCH	33.2	PG	27-32	
MCHC	30.8	gm/dl	31-37	
PLATELET COUNT	2.61	lakh/cumm	1.5-4.5	
RDW	13.4	%	11.5-15	

\*\*\* End of Reports \*\*\*

Dr. Vishal Arora  
 MBBS, DCP  
 (Consultant Pathologist)



Checked By

**Note:**

1. These reports are mere estimation of values at that particular time and are liable to vary/change in different conditions in different laboratories.
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).

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

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

192.168.7.100/hismetrohandwar/modules/laboratory/print\_path\_lab\_result.php?sid=f99dfb6f6a75f3013364284ebdd2c0ff&amp;lang=en&amp;local\_user=ck\_lab\_... 1/1

E-mail : metronharidwar@metronhospitals.com, Website: www.metrohospitals.com

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## Pathology Report

**HOSPITAL & HEART INSTITUTE**
**(A unit of Sunhill Hospitals Private Limited)**
**Age/Sex** : 36 Y/M (NABH & ISO 9001: 2008 Certified)

**UHID** : 2024001539

**Request No.** : 10390919

**Sample Time** : 13:42

**Reporting Time** : 21:48

**Name** : Mr. Deep Kamal Tiwari  
**Ref. By** : Dr. NITIN KUMAR  
**IP/OP** : OP/202314949  
**Sample Date** : 10/02/2024  
**Reporting Date** : 10/02/2024

Test	Result	Unit	Bio. Ref. Inter.	Test Method
<b>Biochemistry</b>				
HBIAC	6.1	%	4.5-6.3	
BLOOD SUGAR -FASTING	95.0	mg/dl	70.0-110.0	
<b>Hematology</b>				
<b>BLOOD GROUP</b>				
ABO	O		-	
Rh	POSITIVE		-	
ESR	17	mm/hr	20	
<b>Serology &amp; Immunology</b>				
<b>THYROID PROFILE</b>				
T3	2.54	nmol/L	1.70-3.10	
T4	9.06	µg/dl	5.95-15.4	
TSH	2.34	µIU/L	0.46-4.68	
PSA TOTAL	0.56	ng/mL	0.0-4.0	

\*\*\* End of Reports \*\*\*

**Dr. Vishal Arora**  
**MBBS, DCP**  
**(Consultant Pathologist)**


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192.168.7.100/hismetroharidwar/modules/laboratory/print\_path\_lab\_result.php?id=199d8b66a7b13912364284ebd02e0ff&amp;lang=en&amp;local\_user=ck\_lab... 1/1

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## Pathology Report

Name : Mr. Deep Kamal Tiwari  
 Ref. By : Dr. NITIN KUMAR  
 IP/OP : OP/202314949  
 Sample Date : 10/02/2024  
 Reporting Date: 10/02/2024

Test	Result	Unit	Bio. Ref. Inter.	Test Method
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### Biochemistry

#### LIPID PROFILE

TOTAL CHOLESTEROL	214.0	mg/dl	00-250.0	
HDL-CHOLESTEROL	50.0	mg/dl	00-50.0	
LDL	138.4	mg/dl	00-150.0	
TRIGLYCERIDES	127.0	md/dl	30-150	
VLDL	25.4	mg/dl	0-50	
CHOL/HDL Ratio	4.2		<4.5	

#### LFT (LIVER FUNCTION TEST)

BILIRUBIN INDIRECT	0.40	mg/dl	0.2-0.8	
SGOT	84.0	U/L	10-42	
SGPT	117.0	U/L	10-42	
BIILIRUBIN TOTAL	0.90	mg/dl	0.2-1.0	
ALKALINE PHOSPHATASE	88.0	IU/L	28-111	
BILIRUBIN DIRECT	0.50	mg/dl	0.1-0.4	
TOTAL PROTEIN	7.5	gm/dl	6.4-8.2	
ALBUMIN	4.0	g/dl	3.5-5.0	
GLOBULIN	3.5	gm/dl	2.0-4.0	
AG RATIO	1.1		-	

#### KFT (KIDNEY FUNCTION TEST)

UREA	23.4	mg/dl	15-45	
SODIUM	150.0	mmol/L	135-155	
CREATININE	0.97	mg/dl	0.6-1.3	
URIC ACID	6.9	mg/dl	3.0-7.6	
BUN	11.1	mg/dl	05-20	
POTTASSIUM	5.1	mmol/L	3.5-5.5	
CALCIUM	10.0	mg/dl	8.5-10.5	

\*\*\* End of Reports \*\*\*

Dr. Vishal Arora  
 MBBS, DCP  
 (Consultant Pathologist)



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## Pathology Report



# METRO

HOSPITAL &amp; HEART INSTITUTE

(A Unit of Sunhill Hospitals Private Limited)

Age/Sex : 30 Y/M (NABH &amp; ISO 9001-2008 Certified)

UHID : 2024001539

Request No. : 10390919

Sample Time : 13:42

Reporting Time : 21:48

Name : Mr. Deep Kamal Tiwari  
 Ref. By : Dr. NITIN KUMAR  
 IP/OP : OP/202314949  
 Sample Date : 10/02/2024  
 Reporting Date: 10/02/2024

Test	Result	Unit	Bio. Ref. Inter.	Test Method
<b>Urine Examination</b>				
URINE SUGAR	NIL			
URINE ROUTINE ANALYSIS				
PHYSICAL EXAMINATION				
COLOUR	STRAW	-	-	-
TRANSPARENCY	CLEAR	-	-	-
S. GRAVITY	1.010	-	-	-
CHEMICAL EXAMINATION				
ALBUMIN	NIL	-	-	-
SUGAR	NIL	-	-	-
pH	6.0	-	-	-
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**  
 MBBS, DCP  
 (Consultant Pathologist)

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 Email: 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



**METRO**

HOSPITAL &amp; HEART INSTITUTE

(A unit of Sunhill Hospitals Private Limited)

(NABH &amp; ISO 9001: 2008 Certified)

**Radiology Investigation Report**

**Name** : Mr. Deep Kamal Tiwari  
**Ref. By** : Dr. NITIN KUMAR  
**IP/OP** : OP/202314949  
**Date** : 10/02/2024

**Age/Sex** : 36 Y/M  
**UHID NO** : 2024001539  
**Request No** : 70248003

**USG WHOLE ABDOMEN**

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

Liver is normal in size, shape, outline & **raised echotexture**. No focal area of abnormal echogenecity is seen in liver. Intrahepatic biliary radicles are not dilated. Portal vein & portal venous radicles are normal.

Gall bladder is normal in shape & size. Gall bladder wall is not thick. No mass lesion / calculus is seen in gall bladder. 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 normal. Corticomedullary junction is defined & is normal. There is no hydronephrosis. No echogenic renal calculus is seen.

Urinary bladder is normal in contour & capacity. Bladder wall is not thick. No pathological filling defect / vesical calculus is seen in bladder. Uterovesical junctions appear normal.

Prostate is normal in shape, outline & echotexture. Prostatic capsule & periprostatic facial planes appear normal.

**IMPRESSION : Grade I fatty liver.**

  
**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.





### Pathology Report

Name : Mr. Deep Kamal Tiwari  
 Ref. By : Dr. NITIN KUMAR  
 IP/OP : OP/202314949  
 Sample Date : 10/02/2024  
 Reporting Date: 10/02/2024

Age/Sex :  
 UHID : 2024001539  
 Request No. : 10390919  
 Sample Time : 13:42  
 Reporting Time : 21:49

Test	Result	Unit	Bio. Ref. Inter.	Test Method
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#### Serology & Immunology

PSA TOTAL	0.56	ng/mL	0.0-4.0	
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\*\*\* End of Reports \*\*\*

**Dr. Vishal Arora**  
 MBBS, DCP  
 (Consultant Pathologist)



**Note:**

1. These reports are mere estimation of values at that particular time and are liable to vary/change in different conditions in different laboratories.
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).

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

Emergency : +91 8191902600, Phone : 01324-235043, Fax : 01324-235043

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

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we treat...HE CURES

**Metro Hospital  
 & Heart Institute**  
 (A unit of Sunhill Hospital Private Limited)

OPD CONSULTATION

Patient Name Mr. Deep kamal Age/Sex 36 / m Reg. No. ....  
 Doctor's Name Dr. Sushil Kumar  
 Date ..... Time .....

OPHTHALMIC EXAMINATION

VISION

DISTANCE VISION-

Rt 6/6  
 Lt 6/6

NEAR VISION-

Rt N6  
 Lt N6

COLOUR VISION

Normal BE

EYE EXAMINATION

- Cornea
- Ant Chamber
- Pupil
- Fundus Examination

ADVICE-

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





## 2D ECHOCARDIOGRAPHY

Name:	Mr. Deep Kamal Tiwari	UHID No:	2024001539
Age/Sex:	36Y/M	Ward:	OPD
Referred by:	Dr. Nitin Kumar	Date:	10.02.2024

ACOUSTIC WINDOW: Normal

### MEASUREMENTS AND CALCULATIONS

Measurements	Observed Value	Reference Value
IVS (ED)	1.1	(0.6 – 1.1 cm)
LVPW (ED)	1.0	(0.6 – 1.1 cm)
LVID (ED)	3.9	Male (3.7 – 5.5 cm) Female (3.7 – 5.2 cm)
Aortic root diameter	2.5	(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	Trace	E – 82, A – 71, E/A>1	
Aortic	Nil	Vel – 117	
Tricuspid	Trace	Vel – 204	PASP – 21
Pulmonary	Nil	Vel – 111	

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### FINAL IMPRESSION

- Normal Acoustic Window
- Normal Chambers Dimensions
- No RWMA
- LVEF~60%
- No LVDD
- Trace MR, Trace TR, PASP 21 mmHg
- No pericardial effusion
- No Intracardiac clot

**Dr. Krishna CK**

MD, DNB (Medicine), DNB (Cardiology)  
Consultant Interventional Cardiology  
UKMC Reg. No: 12883



**Dr. Ajit Kumar**

MBBS, PGDCC  
Associate Consultant, Cardiology  
UKMC Reg. No: 7569

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

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