

Phone: 0522-4062223, 9305548277, 8400888844 9415577933, 9336154100, Tollfree No.: 8688360360

E-mail: charak1984@gmail.com

CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Mr.MOHD SHAKEEL

Age/Gender : 45 Y/M

Lab No : 10133259

Referred By : Dr.DEEPAK DEEWAN

Refer Lab/Hosp : CHARAK NA

Visit No : CHA250035963

Registration ON : 28/Feb/2025 09:43AM Sample Collected ON : 28/Feb/2025 09:43AM

Sample Received ON

Report Generated ON : 28/Feb/2025 03:08PM

## **ECG-REPORT**

\* RATE : 85 bpm.

\* RHYTHM : Normal

\* P wave : Normal

\* PR interval : Normal

\* QRS Axis : Left axis

Duration : Normal

Configuration : rs L2,L3, avF

Increased LV Voltages

\* ST-T Changes : None

\* QT interval :

\* QTc interval : Sec.

\* Other:

Transcribed By: JAVED

OPINION: LEFT VENTRICULAR HYPERTROPHY
(FINDING TO BE CORRELATED CLINICALLY)

CHARAK

[DR. PANKAJ RASTOGI, MD, DM]





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Sample Received ON Referred By : Dr.DEEPAK DEEWAN

Report Generated ON Refer Lab/Hosp : CHARAK NA : 28/Feb/2025 11:47AM

2D- ECHO & COLOR DOPPLER REPORT

1. MITRAL VALVE STUDY: MVOA - Normal (perimetry) cm2 (PHT)

**Anterior Mitral Leaflet:** 

(a) Motion: Normal **(b) Thickness** : Normal (c) **DE** : 1.5 cm.

(d) EF 37 mm/sec (e) EPSS : 06 mm (f) Vegetation: -

(g) Calcium: -

Posterior mitral leaflet: Normal

(a). Motion: Normal (b) Calcium: -(c) Vegetation: -

Valve Score : Mobility /4 Thickness /4 **SVA** /4

/4 **Total** /16 Calcium

2. AORTIC VALVE STUDY

(a) Aortic root :2.9cms (c) Closure: Central (b) Aortic Opening :1.5cms (e) Eccentricity Index: 1 (f) Vegetation: -(d) Calcium: -

(g) Valve Structure : Tricuspid,

3. PULMONARY VALVE STUDY Normal

(a) EF Slope : -(b) A Wave: + (c) MSN: -

(D) Thickness: (e) Others:

4. TRICUSPID VALVE: Normal

6. AORTIC MITRAL CONTINUITY 5. SEPTAL AORTIC CONTINUITY

**Left Atrium** : 3.4 cms Others: Clot: -Right Atrium: Normal Clot: -Others: -

Contd.....





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#### **VENTRICLES**

**RIGHT VENTRICLE:** Normal

RVD (D) RVOT

**LEFT VENTRICLE:** 

LVIVS (D) 1.4 cm (s) 1.8 cm Motion: normal

LVPW (D) 1.4cm (s) 2.0 cm Motion: Normal

LVID (D)4.7 cm (s) 2.9 cm Ejection Fraction :66%

Fractional Shortening:36 %

TOMOGRAPHIC VIEWS

Parasternal Long axis view:

CONCENTRIC LVH

GOOD LV CONTRACTILITY.

Short axis view

Aortic valve level: AOV - NORMAL

PV - NORMAL

TV - NORMAL

MV - NORMAL

Mitral valve level:

Papillary Muscle Level: NO RWMA

Apical 4 chamber View: No LV CLOT





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### **PERICARDIUM**

#### **Normal**

#### **DOPPLER STUDIES**

Velocity	Flow pattern Regurgitation		Gradient	Valve area
(m/sec)	( /4)		(mm Hg)	(cm 2)
MITRAL  e = 0.8	a > e	-	-	-
a = 1.2				

**AORTIC** 

1.5 Normal

**TRICUSPID** 0.4 **Normal** 

**PULMONARY Normal** 

### OTHER HAEMODYNAMIC DATA

### COLOUR DOPPLER

### NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

## **CONCLUSIONS**:

- CONCENTRIC LVH
- GOOD LV SYSTOLIC FUNCTION
- LVEF = 66 %
- NO RWMA
- a > e, DIASTOLIC DYSFUNCTION
- NO CLOT / VEGETATION
- NO PERICARDIAL EFFUSSION

OPINION - CONCENTRIC LVH

DR. PANKAJ RASTOGI, MD,DM





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Referred By : Dr. DEEPAK DEEWAN Sample Received ON

Refer Lab/Hosp : CHARAK NA Report Generated ON : 28/Feb/2025 04:36PM

# **ULTRASOUND STUDY OF WHOLE ABDOMEN**

Visit No

- <u>Liver</u> is mildly enlarged in size measures 151 mm and shows increased echotexture of liver parenchyma. No intrahepatic biliary radicle dilatation is seen. No space occupying lesion is seen. Hepatic veins and IVC are seen normally.
- <u>Gall bladder</u> is normal in size and shows anechoic lumen. No calculus / mass lesion is seen. GB walls are not thickened.
- **CBD** is normal at porta. No obstructive lesion is seen.
- **Portal vein** Portal vein is normal at porta.
- <u>Pancreas</u> is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- <u>Spleen</u> is **borderline enlarged in size measures 124 mm** and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- <u>Both kidneys</u> are normal in size and position. **Bilateral cortical echogenicity is increased (grade II) with partially maintained cortico-medullary differentiation**. No hydronephrosis is seen. No calculus is seen. **Simple cortical cysts are seen in both kidney, measuring approx. 15 x 13 mm at upper pole of right kidney and 20 x 17 mm at mid pole of left kidney.** Parenchymal thickness is normal. No scarring is seen. Right kidney measures 90 x 38 mm in size. Left kidney measures 96 x 43 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- <u>Urinary bladder</u> is normal in contour with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- Bilateral seminal vesicles are seen normally.
- <u>Prostate</u> is mildly enlarged in size, measures 26 x 42 x 39 mm with weight of 23gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.

### **OPINION:**

- Mild hepatomegaly with fatty infiltration of liver grade-I.
- Borderline splenomegaly.
- Bilateral grade II Medical renal disease (ADV: RFT Correlation).
- Bilateral simple renal cortical cysts.
- Mild prostatomegaly.

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Rachna





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## SKIAGRAM CHEST PA VIEW

- Both lung fields are clear.
- Bilateral hilar shadows are prominent.
- Mild cardiomegaly is present.
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

### IMPRESSION:

• MILD CARDIOMEGALY.

Clinical correlation and Cardiac evaluation is needed.

Transcribed by R R...

[DR. RAJESH KUMAR SHARMA, MD]



