

Patient Name	: Ms.SHANOOFA PATHANI	Visit No	: CHA250037564
Age/Gender	: 45 Y/F	Registration ON	: 02/Mar/2025 10:54AM
Lab No	: 10134859	Sample Collected ON	: 02/Mar/2025 10:54AM
Referred By	: Dr.LOTUS HOSPITAL	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 02/Mar/2025 11:34AM

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 : 50 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
Calcium /4 Total /16

2. **AORTIC VALVE STUDY**

- (a) Aortic root : 2.8cms (b) Aortic Opening : 1.9cms (c) Closure: Central
(d) Calcium : - (e) Eccentricity Index : 1 (f) Vegetation : -

(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

5. **SEPTAL AORTIC CONTINUITY** 6. **AORTIC MITRAL CONTINUITY**

Left Atrium : 3.9 cms Clot : - Others :
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) 1.9 cm

Motion : normal

LVPW (D) 1.4cm (s) 1.9cm

Motion : Normal

LVID (D) 4.0 cm (s) 2.4cm

Ejection Fraction :70%

Fractional Shortening : 39 %

TOMOGRAPHIC VIEWS

Parasternal Long axis view :

CONCENTRIC LVH
GOOD LV CONTRACTILITY.

Short axis view

Aortic valve level :

AOV - NORMAL
PV - NORMAL
TV - NORMAL

Mitral valve level :

MV - NORMAL

Papillary Muscle Level :

NO RWMA

Apical 4 chamber View :

No LV CLOT

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PERICARDIUM

Normal

DOPPLER STUDIES

	Velocity (m/sec)	Flow pattern (/4)	Regurgitation	Gradient (mm Hg)	Valve area (cm ²)
MITRAL	e = 0.7 a = 0.6	Normal	-	-	-
AORTIC	1.0	Normal	-	-	-
TRICUSPID	0.4	Normal	-	-	-
PULMONARY	1.0	Normal	-	-	-

OTHER HAEMODYNAMIC DATA

COLOUR DOPPLER

NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

CONCLUSIONS :

- CONCENTRIC LVH
- GOOD LV SYSTOLIC FUNCTION
- LVEF = 70 %
- NO RWMA
- ALL VALVES NORMAL
- NO CLOT / VEGETATION
- NO PERICARDIAL EFFUSION

OPINION – CONCENTRIC LVH

DR. RAJIV RASTOGI, MD,DM

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ULTRASOUND STUDY OF WHOLE ABDOMEN

Compromised assessment due to excessive bowel gases (poor bowel preparation).

- **Liver** is mildly enlarged in size, 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.
- **Gall bladder** 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.
- **Pancreas** is normal in size and shows homogenous echotexture of parenchyma. PD is not dilated. No parenchymal calcification is seen. No peripancreatic collection is seen.
- **Spleen** is normal in size and shows homogenous echotexture of parenchyma. No SOL is seen.
- No retroperitoneal adenopathy is seen.
- No ascites is seen.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. **Left kidney shows a well defined simple cyst measuring 17 x 16mm at mid pole.** No calculus is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 85 x 40 mm in size. Left kidney measures 85 x 39mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is not distended.

OPINION:

- **MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.**
- **LEFT RENAL SIMPLE CORTICAL CYST BOSNIAK TYPE-I**

Clinical correlation is necessary.

CHARAK

[DR. R.K. SINGH, MD]

Transcribed By: Purvi



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SKIAGRAM CHEST PA VIEW

- Respiratory film .
- Hazy opacity is seen in left lower zone? Infective.
- Heart size is at upper limits of normal . Unfolding of aorta is seen .
- Left CP angle is not sharply defined.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

Adv: Repeat X-ray after a course of antibiotics and cardiac evaluation .

[DR. RAJESH KUMAR SHARMA, MD]

TRANSCRIBED BY: ANUP

*** End Of Report ***

CHARAK

