

Patient Name	: Ms.MANJU LATA SINGH	Visit No	: CHA250039443
Age/Gender	: 58 Y/F	Registration ON	: 05/Mar/2025 08:57AM
Lab No	: 10136738	Sample Collected ON	: 05/Mar/2025 08:57AM
Referred By	: Dr.PANKAJ RASTOGI	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 05/Mar/2025 11:46AM

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 : 1.3 cm.
(d) EF 65 mm/sec (e) EPSS :20 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 :3.1cms (b) Aortic Opening :1.8cms (c) Closure: Central
(d) Calcium : - (e) Eccentricity Index : 1 (f) Vegetation : -

(g) Valve Structure : Tricuspid,

3. PULMONARY VALVE STUDY

- (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 : 3.2cms Clot : - Others :
Right Atrium : Normal Clot : - Others : -

Contd.....



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VENTRICLES

RIGHT VENTRICLE : Normal

RVD (D)
RVOT

LEFT VENTRICLE :

LVIVS (D) 0.9 cm (s) 1.1 cm

Motion : normal

LVPW (D) 1.0cm (s) 1.7cm

Motion : Normal

LVID (D) 6.4 cm (s) 5.1 cm

Ejection Fraction : 39 %

Fractional Shortening : %

TOMOGRAPHIC VIEWS

Parasternal Long axis view :

DILATED LV
POOR LV CONTRACTILITY.

Short axis view

CHARAK

Aortic valve level :

AOV - NORMAL
PV - NORMAL
TV - NORMAL

Mitral valve level :

MV - NORMAL

Papillary Muscle Level :

GLOBAL HYPOKINESIA OF LV
ABNORMAL ELECTRICAL ACTIVATION OF LV

Apical 4 chamber View :

No LV CLOT



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PERICARDIUM
Normal
DOPPLER STUDIES

	Velocity (m/sec)	Flow (/4)	pattern	Regurgitation	Gradient (mm Hg)	Valve area (cm 2)
MITRAL	e = 1.0 a = 0.4	Normal	1	-	-	-
AORTIC	1.4	Normal	-	-	-	-
TRICUSPID	0.4	Normal	-	-	-	-
PULMONARY	1.0	Normal	-	-	-	-

OTHER HAEMODYNAMIC DATA

COLOUR DOPPLER

GR I/IV MR

CONCLUSIONS :

- DILATED LV
- POOR LV SYSTOLIC FUNCTION
- LVEF = 39 %
- GLOBAL HYPOKINESIA OF LV
- ABNORMAL ELECTRICAL ACTIVATION OF LV
- MILD MR
- PACEMAKER LEAD SEEN IN SITU
- NO CLOT / VEGETATION
- NO PERICARDIAL EFFUSION

OPINION – DILATED CARDIOMYOPATHY WITH IVCD

DR. PANKAJ RASTOGI, MD,DM

*** End Of Report ***

