

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003
Phone: 0522-4062223 9305548277 8400888844

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E-mail: charak1984@gmail.com CMO Reg. No. RMEE 2445133

CMO Reg. No. RMEE 244513 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Ms.SUSHEELA GUPTA

Age/Gender : 65 Y/F

Lab No : 10138346

Referred By : Dr.B HOPE HOSPITAL **

Refer Lab/Hosp : CHARAK NA

Visit No : CHA250041051

Registration ON : 07/Mar/2025 10:51AM Sample Collected ON : 07/Mar/2025 10:51AM

Sample Received ON :

Report Generated ON : 07/Mar/2025 11:57AM

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 73 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 Thi<mark>ckness /4 SVA</mark> /4

Calcium /4 Total /16

2. AORTIC VALVE STUDY

(a) Aortic root :2.8cms (b) Aortic Opening :1.7cms (c) Closure: Central (d) Calcium : - (e) Eccentricity Index : 1 (f) Vegetation : -

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

Contd.....





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VENTRICLES

RIGHT VENTRICLE: Normal

RVD (D) RVOT

LEFT VENTRICLE:

LVIVS (D) 0.7 cm (s) 1.5 cm Motion: normal

LVPW (D) 0.8cm (s) 1.3 cm Motion: Normal

LVID (D) 4.0 cm (s) 2.1 cm Ejection Fraction :78%

Fractional Shortening: 47 %

TOMOGRAPHIC VIEWS

Parasternal Long axis view:

NORMAL LV RV DIMENSION 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 (m/sec) (/4) (mm Hg)

Valve area (cm 2)

 $MITRAL \quad e = 1.0$

a = 0.9

Normal

AORTIC 1.2

Normal

mal - -

TRICUSPID 0.4

Normal

- -

PULMONARY 0.6

Normal

OTHER HAEMODYNAMIC DATA

COLOUR DOPPLER

NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

CONCLUSIONS:

- NORMAL LV RV DIMENSION
- GOOD LV SYSTOLIC FUNCTION
- LVEF = 78%
- NO RWMA
- ALL VALVES NORMAL
- NO CLOT / VEGETATION
- NO PERICARDIAL EFFUSSION

OPINION - NORMAL 2D-ECHO & COLOUR DOPPLER STUDY

DR. PANKAJ RASTOGI, MD,DM





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ULTRASOUND STUDY OF WHOLE ABDOMEN

- <u>Liver</u> 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.
- <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.
- **Spleen** is normal in size 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. No hydronephrosis is seen. No calculus or mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 86 x 41 mm in size. Left kidney measures 94 x 44 mm in size.
- <u>Ureters</u> 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.
- **<u>Uterus</u>** is atrophic and shows multiple myometrial calcifications.
- No adnexal mass lesion is seen.

OPINION:

Mild hepatomegaly with fatty infiltration of liver grade-I.

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]

Transcribed By: Purvi

*** End Of Report ***

