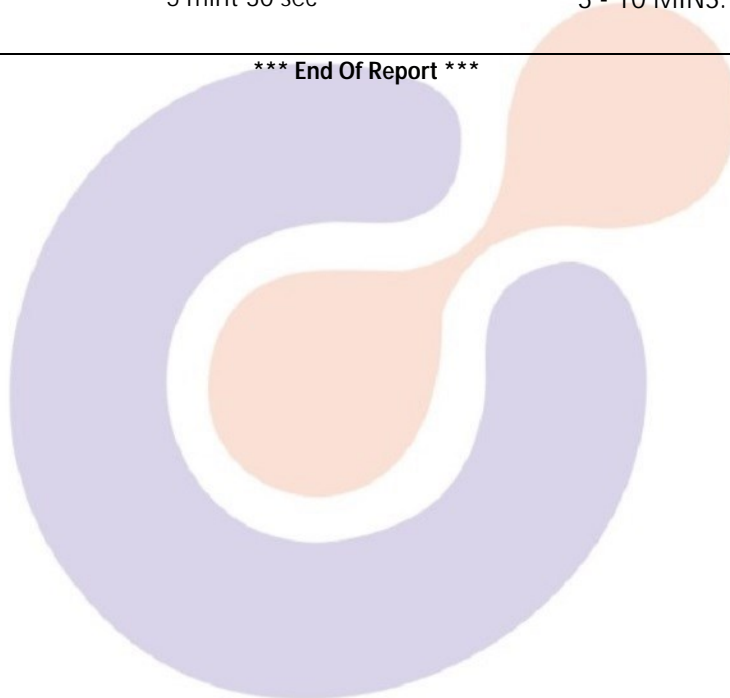


Patient Name	: Mr.MOHD SABBIR	Visit No	: CHA250041309
Age/Gender	: 48 Y/M	Registration ON	: 07/Mar/2025 02:36PM
Lab No	: 10138604	Sample Collected ON	: 07/Mar/2025 02:38PM
Referred By	: Dr.DHARMENDRA CHANDRA	Sample Received ON	: 07/Mar/2025 02:38PM
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 07/Mar/2025 07:22PM
Doctor Advice	: BTCT,2D ECHO,ECG,PNS		



Test Name	Result	Unit	Bio. Ref. Range	Method
BT/CT				
BLEEDING TIME (BT)	2 mint 45 sec	mins	2 - 8	
CLOTTING TIME (CT)	5 mint 30 sec		3 - 10 MINS.	

*** End Of Report ***



CHARAK

[Checked By]

Print.Date/Time: 07-03-2025 19:57:44

*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

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Lab No	: 10138604	Sample Collected ON	: 07/Mar/2025 02:36PM
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Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 07/Mar/2025 04:41PM

ECG -REPORT

* RATE : 75 bpm.

* RHYTHM : Normal

* P wave : Normal

* PR interval : Normal

* QRS Axis : Normal

Duration : Normal

Configuration : Normal

* ST-T Changes : T Inversion in V4-V6

* QT interval :

* QTc interval : Sec.

* Other :

OPINION T INVERSION IN V4-V6? ISCHEMIC
(FINDING TO BE CORRELATED CLINICALLY)

[DR. RAJIV RASTOGI, MD, DM]



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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** : 134mm/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** : 3.2cms (b) **Aortic Opening** : 2.0cms (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 : 4.1 cms **Clot** : - **Others** :
Right Atrium : Normal **Clot** : - **Others** : -

Contd.....



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VENTRICLES

RIGHT VENTRICLE : Normal

RVD (D)
RVOT

LEFT VENTRICLE :

LVIVS (D) 1.2cm (s)2.0 cm

Motion : normal

LVPW (D) 1.1cm (s) 1.7 cm

Motion : Normal

LVID (D) 5.0 cm (s) 2.9 cm

Ejection Fraction : **72%**

Fractional Shortening : **41%**

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 = 0.5 a = 0.8	a > e	-	-	-
AORTIC	1.5	Normal	-	-	-
TRICUSPID	0.4	Normal	-	-	-
PULMONARY	0.9	Normal	-	-	-

OTHER HAEMODYNAMIC DATA

COLOUR DOPPLER

NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

CONCLUSIONS :

- CONCENTRIC LVH
- GOOD LV SYSTOLIC FUNCTION
- LVEF = 72 %
- NO RWMA
- a > e
- NO CLOT / VEGETATION
- NO PERICARDIAL EFFUSION

OPINION –CONCENTRIC LVH

DR. RAJIV RASTOGI, MD,DM



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SKIAGRAM PNS OM VIEW

- Bilateral maxillary sinuses are hazy -- sinusitis.
- Ethmoid gallery is seen normally.
- Nasal septum is deviated towards right.
- Frontal sinuses are seen normally.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed by R R...

*** End Of Report ***

