

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003 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.AMRENDRA KUMAR VERMA	Visit No	: CHA250041538
Age/Gender	: 63 Y 7 M 18 D/M	Registration ON	: 08/Mar/2025 07:43AM
Lab No	: 10138833	Sample Collected ON	: 08/Mar/2025 07:43AM
Referred By	: Dr.ROHAN BAJPAI	Sample Received ON	:
Refer Lab/Hosp	: CGHS (BILLING)	Report Generated ON	: 08/Mar/2025 09:57AM

ECG -REPORT

RATE	: 90 bpm		
* RHYTHM	: Normal		
* P wave	: Normal		
* PR interval	: Normal		
* QRS Axis	: Normal		
Duration	: Normal		
Configuration	: Normal		
* ST-T Changes	: None		
* QT interval			
* QTc interval	: Sec.		
* Other			
OPINION: ECG WITH IN NORMAL LIMITS (FINDING TO BE CORRELATED CLINICALLY)			



[DR. PANKAJ RASTOGI, MD, DM]





PR.

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2	: CGHS (BILLING)	Report Generated ON	: 08/Mar/2025 10:14AM

2D- ECHO & COLOR DOPPLER REPORT				
1. MITRAL VALVE STUDY	Y: MVOA - Normal (perin	netry) cm2 (PHT)		
Anterior Mitral Leaflet:				
(a) Motion: Normal	(b) Thickness : Normal	(c) DE : 1.5 cm.		
(d) EF :70 mm/sec	(e) EPSS : 06 mm	(f) Vegetation : -		
(g) Calcium : -				
Posterior mitral leaflet : Nor	mal			
(a). Motion : Normal	(b) Calcium: -	(c) Vegetation :-		
Valve Score : Mobility /4 Thickness /4 SVA /4 Calcium /4 Total /16				
2. AORTIC VALVE STUDY	Z			
(a) Aortic root :3.4cms	(b) Aortic Opening :1.8cm	ns (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 : - Clot : -	Others : Others : -		
Right Atrium : Normal		omers: -		



Contd.....



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VENTRICLES

RIGHT VENTRICLE : Normal RVD (D) RVOT

LEFT VENTRICLE :

LVIVS (D) 1.1 cm (s) 1.4 cm

LVPW (D) 1.0cm (s) 1.7 cm

LVID (D) 4.6 cm (s) 2.6 cm

Motion : normal

Motion : Normal

Ejection Fraction :74%

Fractional Shortening : 43%

Parasternal Long axis view :

TOMOGRAPHIC VIEWS

NORMAL LV RV DIMENSION GOOD LV CONTRACTILITY.

Short axis view

Aortic valve level :

AOV - NORMAL PV - NORMAL - NORMAL ΤV

ΔRΔ

Mitral valve level :

Papillary Muscle Level : NO RWMA

Apical 4 chamber View :

MV - NORMAL

No LV CLOT

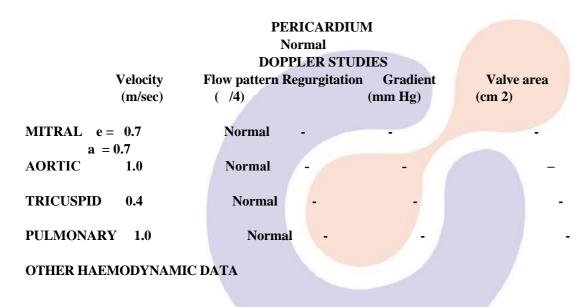




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COLOUR DOPPLER

NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

CONCLUSIONS :



- NORMAL LV RV DIMENSIONGOOD LV SYSTOLIC FUNCTION
- LVEF = 74 %
- 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

Excessive gaseous abdomen

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- <u>Liver</u> is mildly enlarged in size (~163mm) and shows mild altered 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 is seen. GB walls are not thickened. Few tiny echogenic bright foci with comet tail artifacts are seen at GB wall.
- <u>CBD</u> 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 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 85 x 38 mm in size. Left kidney measures 97 x 45 mm in size.
- **<u>Ureters</u>** Both ureters are not dilated. UVJ are seen normally.
- <u>Urinary bladder</u> is *partially distended* 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 enlarged in size, measures 38 x 38 x 35 mm with weight of 27gms and shows homogenous echotexture of parenchyma. No mass lesion is seen.
- Post void residual urine volume Nil.

OPINION:

- MILD HEPATOMEGALY WITH MILD ALTERED ECHOTEXTURE OF LIVER PARENCHYMA (ADV: LFT & FIBRO SCAN).
- EARLY GB ADENOMYOMATOSIS/CHOLESTEROLOSIS CHANGES (ADV: FOLLOW UP).
- PROSTATOMEGALY GRADE-I.

(Possibility of acid peptic disease could not be ruled out).

Clinical correlation is necessary.

[DR. R. K. SINGH, MD]

Transcribed by Gausiya





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SKIAGRAM CHEST PA VIEW

- Small healed calcified focus is seen in right apex.
- Rest of the both lung field is clear.
- Bilateral hilar shadows are normal.
- Cardiac shadow is within normal limits.
- Both CP angles are clear.
- Old fracture right 5^{th-7th} rib are seen .
- Both domes of diaphragm are sharply defined. <u>IMPRESSION:</u>
- NO ACTIVE LUNG PARENCHYMAL LESION IS DISCERNIBLE EXCEPT FOR HEALED CALCIFIED FOCI.

To be correlated with previous records.

Clinical correlation is necessary.

[DR. RAJESH KUMAR SHARMA, MD]

*** End Of Report ***

