

Patient Name	: B/O.RUCHI SHUKLA	Visit No	: CHA250043796
Age/Gender	: 1 M 18 D/M	Registration ON	: 11/Mar/2025 12:19PM
Lab No	: 10141091	Sample Collected ON	: 11/Mar/2025 12:19PM
Referred By	: Dr.SWARNJYOTI EYE HOSPITAL	Sample Received ON	:
Refer Lab/Hosp	: CHARAK NA	Report Generated ON	: 11/Mar/2025 04:06PM

ECG -REPORT

RATE : 162 bpm

* RHYTHM : Normal

* P wave : Normal

* PR interval : Normal

* QRS Axis : Rt axis

Duration : Normal

Configuration : R/S ratio in V1>1

* ST-T Changes : None

* QT interval :

* QTc interval : Sec.

* Other :

OPINION: R/S RATIO IN V1 >1
(FINDING TO BE CORRELATED CLINICALLY)

[DR. RAJIV RASTOGI, MD, DM]

CHARAK



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2D-ECHO & COLOUR DOPPLER REPORT

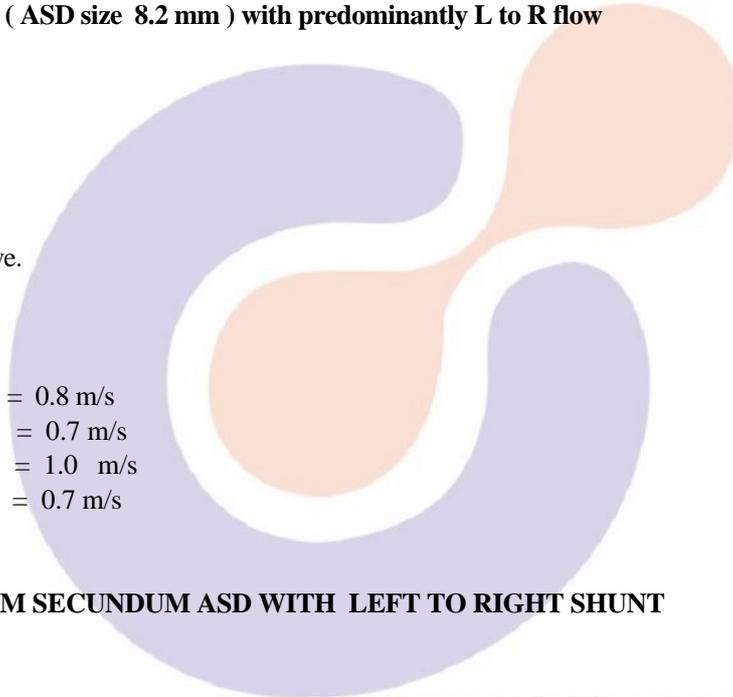
Situs solitus
SVC & IVC draining into RA.
All four pulmonary veins draining into LA.

Dilated RA & RV

Large Ostium secundum ASD (ASD size 8.2 mm) with predominantly L to R flow

Normal LA & LV
Atrio ventricular concordance.
Normal TV & MV.
Intact interventricular septum.
Ventriculo-arterial concordance
Normally related great arteries.
Normal aortic and pulmonary valve.
No PDA seen.

Velocities - Mitral = 0.8 m/s
Aortic = 0.7 m/s
Pulmonary = 1.0 m/s
Tricuspid = 0.7 m/s



OPINION :- LARGE OSTIUM SECUNDUM ASD WITH LEFT TO RIGHT SHUNT

DR . RAJEEV RASTOGI MD,DM
(Cardiologist)

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SKIAGRAM CHEST AP (LYING) VIEW

- Ill defined opacities are seen in right upper & mid zones --? infective.
- Heart size cannot be commented upon (AP view).
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

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

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed by Gausiya

*** End Of Report ***

CHARAK

