

Patient Name : Mr.ALOK KUMAR Visit No : CHA250045594
Age/Gender : 62 Y/M Registration ON : 15/Mar/2025 08:55AM
Lab No : 10142889 Sample Collected ON : 15/Mar/2025 08:55AM
Referred By : Dr.ROHAN BAJPAI Sample Received ON :
Refer Lab/Hosp : CGHS (BILLING) Report Generated ON : 15/Mar/2025 12:22PM

ECG -REPORT

RATE : 64 bpm
* RHYTHM : Normal
* P wave : Normal
* PR interval : Normal
* QRS Axis : Normal
Duration : Normal
Configuration : ? Loss of r in V1-V4
* ST-T Changes : None
* QT interval :
* QTc interval : Sec.
* Other :

OPINION: ?LOSS OF R IN V1-V4
(FINDING TO BE CORRELATED CLINICALLY)

CHARAK
[DR. PANKAJ 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 : 2.3cm.
(d) EF : 77 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 Thickness /4 SVA /4
Calcium /4 Total /16

2. AORTIC VALVE STUDY

(a) Aortic root : 3.1cms (b) Aortic Opening : 1.2cms (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 : 3.2 cms Clot : - Others :
Right Atrium : Normal Clot : - Others : -

Contd.....



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VENTRICLES

RIGHT VENTRICLE : Normal

RVD (D)
RVOT

LEFT VENTRICLE :

LVIVS (D) 1.2 cm (s) 1.6 cm

Motion : normal

LVPW (D) 1.2cm (s) 1.9 cm

Motion : Normal

LVID (D) 4.2 cm (s) 2.4 cm

Ejection Fraction :74%

Fractional Shortening : 42 %

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 = 0.8 a = 1.1	a > e	-	-	-
AORTIC	1.5	Normal	-	-	-
TRICUSPID	0.4	Normal	-	-	-
PULMONARY	0.8	Normal	-	-	-

OTHER HAEMODYNAMIC DATA

COLOUR DOPPLER

NO REGURGITATION OR TURBULENCE ACROSS ANY VALVE

CONCLUSIONS :

- **CONCENTRIC LVH**
- **GOOD LV SYSTOLIC FUNCTION**
- **LVEF = 74%**
- **NO RWMA**
- **a > e**
- **NO CLOT / VEGETATION**
- **NO PERICARDIAL EFFUSION**

OPINION – CONCENTRIC LVH

DR. PANKAJ RASTOGI MD.DM



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ULTRASOUND STUDY OF WHOLE ABDOMEN

- **Liver 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.
- **Gall bladder** 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.
- **Pancreas** 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.
- **Both kidneys** are normal in size and position. No hydronephrosis is seen. **Left kidney shows a concretion measuring 3.6mm at mid pole.** No mass lesion is seen. Cortico-medullary differentiation is well maintained. Parenchymal thickness is normal. No scarring is seen. Right kidney measures 85 x 39 mm in size. Left kidney measures 99 x 39 mm in size.
- **Ureters** Both ureters are not dilated. UVJ are seen normally.
- **Urinary bladder** is partially distended with anechoic lumen. No calculus or mass lesion is seen. UB walls are not thickened.
- Bilateral seminal vesicles are seen normally.
- **Prostate is grossly enlarged in size, measures 60 x 55 x 6 mm with weight of 119gms** and shows homogenous echotexture of parenchyma. No mass lesion is seen. **Median lobe is enlarged and is bulging into base of bladder.**
- **Pre void urine volume approx 63cc.**
- **Post void residual urine volume approx. 42cc (significant).**

OPINION:

- **MILD HEPATOMEGALY WITH FATTY INFILTRATION OF LIVER GRADE-I.**
- **LEFT RENAL CONCRETION.**
- **GROSS PROSTATOMEGALY WITH MEDIAN LOBE ENLARGEMENT WITH SIGNIFICANT PVRU...Adv: SPSA**

Clinical correlation is necessary.

[DR. R.K. SINGH, MD]

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SKIAGRAM CHEST PA VIEW

- Both lung fields are clear.
- Mild cardiomegaly is present.
- Both CP angles are clear.
- Soft tissue and bony cage are seen normally.
- Both domes of diaphragm are sharply defined.

OPINION

- **MILD CARDIOMEGALY.**

Clinical correlation and Cardiac evaluation is needed.

[DR. RAJESH KUMAR SHARMA, MD]

Transcribed By: Purvi

CHARAK
*** End Of Report ***

