





हृदय वक्ष एवं तंत्रिका विज्ञान केन्द्र
CARDIO-THORACIC & NEURO-SCIENCES CENTRE

अखिल भारतीय आयुर्विज्ञान संस्थान
A.I.I. Hospital

एक्सरे-फार्म

X-RAY REQUISITION FORM

नाम CV 2022/014/0009838
Nar UHID: 105983646
एक्स Date 18/05/2022 MON, FRI
X-R Name ANSHIKA
हस्प D/O ANURODH KUMAR 2Y /F
Ho Phone No. 98174E9499
एक Consultant Room 18
Ex SR Room 14
Cardiology
Paed. Cardiology
General
Dr. SOURABH KUMAR
GUPTA
DR SHATANIK

यु लिंग आय
ge Sex Income
चिकित्सक विभाग
Referring Unit
गी स्थिति
Ambulatory/Non

चिकित्सक की जांच रिपोर्ट :
Clinical Information :

CXR-PA

1077328
20/5/22

किसी दवा का बुरा प्रभाव
Any History of Allergy
अन्तिम माहवारी तिथि
LMP
कोई पुराने एक्स-रे
Any Previous X-Ray

चिकित्सक के हस्ताक्षर
SIGNATURE OF MEDICAL OFFICER
रेडियोग्राफर के लिए
FOR RADIOGRAPHERS USE

पहचान चिन्ह Identification Mark
अंगूठा निशान Thumb Impression

कमरा नं. Room No.	फिल्म साइज Size & No. of Films	के.वी. एम.ए.एस. KV MAS
हस्ताक्षर / Signature		

रिपोर्ट
REPORT

एक्स रे-चिकित्सक
RADIOLOGIST

ECHOCARDIOGRAPHY REPORT

DEPARTMENT OF CARDIOLOGY, CARDIOTHORACIC CENTRE
ALL INDIA INSTITUTE OF MEDICAL SCIENCES, NEW DELHI-110029

NAME Anshika AGE 27 SEX M/F DATE 18/5/22
ECHO No. 10302/22 UHID No. 105983646 C.R. No. _____
HEIGHT _____ cm WEIGHT 85 kg. BSA _____ m² Ref. Physician Dr. Saurabh
Referring Diagnosis _____ Done by Dr. Chander Checked by Dr. _____
Quality of Imaging _____ Poor/Adequate/Good

MITRAL VALVE

Morphology AML Normal Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming
PML Normal Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.
Subvalvular deformity Present/Absent Score _____
Doppler Normal / Abnormal
Mitral stenosis Present / Absent RR interval _____ msec
EDG _____ mmHg MDG _____ mmHg MVA _____ cm²
Mitral regurgitation Absent/Trivial/Mild/Moderate/Severe

TRICUSPID VALVE

Morphology Normal / Atresia/Thickening/Calcification/Prolaps/Vegetation/Doming
Doppler Normal / Abnormal
Tricuspid stenosis Present/Absent RR interval _____ msec
EDG _____ mmHg MDG _____ mmHg
Tricuspid regurgitation Absent/Trivial/Mild/Moderate/Severe Fragmented Signals
Velocity _____ m/sec Pred. RSVP-RAP+ _____ mmHg

PULMONARY VALVE

Morphology Normal / Atresia/Thickening/Doming/Vegetation
Doppler Normal / Abnormal
Pulmonary stenosis Present/Absent Level
PSG _____ mmHg Pulmonary annulus _____ mm
Pulmonary regurgitation Present/Absent
Early diastolic gradient _____ mmHg End diastolic gradient _____ mmHg

AORTIC VALVE

Morphology Normal / Thickening/Calcification/Rstricted Opening/Flutter/Vegetation No. of cusps 1/2/3/4
Doppler Normal / Abnormal
Aortic stenosis Present/Absent Level
PSG _____ mmHg Aortic annulus _____ mm
Aortic regurgitation Absent/Trivial/Mild/Moderate/Severe

Measurements

	Normal Values
Aorta 13	(21-22mm/m ²)
LV es 20 (2 score 20) (2SD)	(16-19mm/m ²)
IVS ed 4	(06-10mm)
RV ed	(4-14mm/m ²)
EF 60%	(62-80%)
IVS Motion	Normal/Flat/Paradoxical
IAS	

Normal Values

LA es 14	(21-22 mm/m ²)
LV ed 35	(19-32 mm/m ²) (2 score 32) (2SD)
PW(LV)ed 4	(07-11mm)
RV Anterior wall	(upto 5mm)

CHAMBERS

LV	Normal/Enlarged/Clear/Thrombus/Hypertrophy <i>mildly enlarged</i> Contraction <u>Normal</u> /Reduced
LA	<u>Normal</u> /Enlarged/Clear/Thrombus
RA	<u>Normal</u> /Enlarged/Clear/Thrombus
RV	<u>Normal</u> /Enlarged/Clear/Thrombus

PERICARDIUM

Normal/Thickened/Calcification/Effusion.

REMARKS

29 | LC | 3PV → LA | AV-VA concordance | NRGA |

⊙ arch

upper muscular 4mm VSD ⊕ (L → R) , mild LVVO

TEE

[ΔPG ⇒ 55mmHg]

No clot/vegetation/PE/RWMA

DIAGNOSIS

values ⊙ , No GA/PDA/ASD

~~EF~~ LVEF 60%.

Final Impression

Acute | TQP | moderate upper musc. VSD (L → R) | LVEF

Resident

Consultant

1097327
antero-posterior Factory3
AIIMS CARD

Anshika Anshika Miss.
105983646
20-May-22
Acq Tm: 10:37 AM

R

SIZE X 1083

W 8285 L 8045

Anshika Anshika Miss. 105983646 1097327 antero-posterior Factory3 20-May-22 10:37 AM
CARDIO-THORACIC & NEURO SCIENCES CENTRE(AIIMS DELHI)



भारत सरकार

Government of India



अनुरोध कुमार

Anurodh Kumar

जन्म तिथि / DOB : 07/07/1996

पुरुष / Male



4900 5231 5146

आधार - आम आदमी का अधिकार



भारतीय विशिष्ट पहचान प्राधिकरण

Unique Identification Authority of India

पता:

आत्मज: राघवेन्द्र, ग्राम निटावली,
सझाजिपुर, मैनपुरी, शझाजिपुर, उत्तर
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