



arogya spandan

the rhythm of holistic healing...

Prestigious Membership



ECP | CHELATION | OZONE | NUTRITION



Patient Case Study # 79502

Ground Floor, Aditi Apartment, Karnik Chowk, Karnik Road, Kalyan (W)
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For Appointments :
8652750555

Mrs Jayashree Ananta Mirkute
Age - 50 years
Kalyan West

Known case of hypertension with Type 2 Diabetes mellitus with Osteoarthritis
HbsAg positive

History of hospitalisation(outside) for Acute left ventricular failure (heart failure) on 8/11/2023

The chief complaint was breathlessness, headache, from last 10 days . Worsened from morning 3 am with profuse sweating and chest pain .

2 D echo done on 8/11/2023 shows severely reduced left ventricular ejection fraction i.e. 28 %

Type I left ventricular diastolic dysfunction.

RWMA - Akinetic anterior septum, Apex , anterior wall.

Coronary angiography done on 9/11/2023

Shows 50 to 70 % blockage in LAD.

The patient started non-surgical treatments for heart failure at Arogya Spandan.

Chief complaints was exertional dyspnea class I to II , mild headache on and off, occasional left sided chest pain .

Treatment duration was three months.

After treatment significant improvement in symptoms are seen.

Now no breathing difficulty

No chest pain .

Before Treatment

DOPPLER STUDY:

TYPE I LV DIASTOLIC DYSFUNCTION

	PG	MG	AREA	GRADE of regurgitation
MV				MILD MR
AV	9 mm Hg			
PV/RVOT	6 mm Hg			
TV				

PASP by TR Jet: 45 Mm Hg

MODERATE PAH

IMPRESSION:

RWMA +

TYPE I LV DIASTOLIC DYSFUNCTION

SEVERE LV SYSTOLIC DYSFUNCTION

NO SIGNIFICANT PAH

DR. PANKAJKUMAR KASAR

MD, FNB, DNB (CARD), AFESC, FSCAI

CONSULTANT CARDIOLOGIST



PARAM
MEDICAL DIAGNOSTIC CENTER

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Name: MRS JAYASHREE MIRKUTE
Age/ Sex: 50 Yr(s) /F CaseNo:A60324
Referred by: Dr. Haridwar A. Patil
Date: 04/05/2024
Done By: Dr. Amit Rana

Echocardiography and Colour Doppler Report

Echo findings:

- All cardiac chambers normal in size.
- RWMA: No regional wall motion abnormality at rest
- Myocardial wall thickness is normal
- LV and RV contractility appears normal
- LVEF: 60%
- All cardiac valves structurally appears normal
- IAS and IVS is intact
- There is normal branching of pulmonary artery
- Pericardium is of normal thickness
- No clot/vegetation or pericardial effusion
- The inferior vena cava appeared of normal size and demonstrated inspiratory collapse.

Doppler and Colour flow findings:

- Normal flow across all cardiac valves
- Normal Diastolic function
- Estimated peak pulmonary arterial systolic pressure is normal.
- Pulmonary Venous flow appears normal.

Summary:

- Normal size chambers
- No RWMA at rest
- Normal LV and RV systolic function
- LVEF: 60%
- Normal Flow across all valves
- Normal Diastolic function
- No Pulmonary Hypertension.

Dr. Amit Rana
(M.D.) Mumbai

This test has limitations please correlate and interpret according to clinical judgment.
Study is recorded on an accompanying CD/DVD for reference if needed



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