



GE Medical Systems

Hospital name
Address
City, State Zip code
Phone

Patient Information

Name: Asamoah, Martin

Patient Id: ECHO 2 18

Date: 09/01/2018

Birthdate: 14/04/1966

Sex: Male

Accession #:

Perf.Physician:

Ref.Physician:

Operator: ADM

Indications:

Comments:

Measurements

2D

IVSd	1.35 cm
LVIDd	4.65 cm
EDV(Teich)	100.01 ml
LVPWd	1.05 cm
LVIDs	3.02 cm
ESV(Teich)	35.63 ml
EF(Teich)	64.37 %
ESV(Cube)	27.60 ml
EF(Cube)	72.61 %
%FS	35.06 %
SV(Teich)	64.38 ml
SV(Cube)	73.18 ml
LVPWs	2.75 cm
%LVPW Thck	161.32 %
LA Diam	4.22 cm

M-Mode & PW

IVSd	1.13 cm
LVIDd	4.70 cm
EDV(Teich)	102.29 ml
LVPWd	0.93 cm
LVIDs	2.51 cm
ESV(Teich)	22.65 ml
EF(Teich)	77.86 %
%FS	46.48 %
MV E Vel	0.46 m/s
MV DecT	201.24 ms
MV Dec Slope	2.28 m/s ²
MV A Vel	0.67 m/s
MV E/A Ratio	0.69
MV PHT	58.36 ms
MVA By PHT	3.77 cm ²
AV Vmax	1.07 m/s

AV maxPG	4.54 mmHg
TV E Vel	0.36 m/s
TV Dec Time	185.92 ms
TV Dec Slope	1.92 m/s ²
TV A Vel	0.36 m/s
TV E/A Ratio	1.00
TV PHT	53.92 ms
TVA	4.08 cm ²

Conclusion**Clinical Diagnosis**

hypertension

Referral Diagnosis

Hypertension

Summary

Mild septal wall thickness and mild left atrial dilatation. Good left ventricular systolic function and type 1 diastolic dysfunction. normal wall motion . The valves appear normal in structure and function and there is no thrombus, pericardial effusion or congenital .

SEPTAL WALL HYPERTROPHY DUE TO HYPERTENSION.
TYPE 1 DIASTOLIC DYSFUNCTION

OPTIMAL BP CONTROL

Images



Comments

Comments



Comments

Comments

Operator: ADM

Perf.Physician: