



ভারতীয় বিনিষ্ট পরিচয় প্রাধিকরণ

ভারত সরকার

Unique Identification Authority of India
Government of India

ভালিকাভুক্তির আই ডি / Enrollment No.: 1490/50132/06794

To
হারাধন দেবনাথ
Haradhan Debnath
S/O: Mannyabar Debnath
676/A KAILASH GHOSH ROAD
Purba Barisha
Barisha
Thakurpukur Mahestola South 24 Parganas
West Bengal 700008
9163409018

21/12/2016
25477325



MD254773255FH



আপনার আধার সংখ্যা / Your Aadhaar No. :

6721 6612 8016

আমার আধার, আমার পরিচয়



ভারত সরকার
Government of India



হারাধন দেবনাথ
Haradhan Debnath
পিতা : মান্যবার দেবনাথ
Father : Mannyabar Debnath
জন্মতারিখ / DOB : 06/10/1971
পুরুষ / Male



6721 6612 8016

আমার আধার, আমার পরিচয়



Health Check Up NMH <healthcheckup.nmh@gmail.com>

Health Check up Booking Request(22E37913)

1 message

6 November 2024 at 12:40

Mediwheel <wellness@mediwheel.in>
To: healthcheckup.nmh@gmail.com
Cc: customercare@mediwheel.in



011-41195959

Dear Narayana Memorial Hospital

We have received a booking request with the following details. Provide your confirmation by clicking on the Yes button.

You confirm this booking?

Yes No

Name : Haradhan Debnath

Contact Details : 8777864015

Hospital Package Name : Mediwheel Full Body Health Checkup Male Above 40

Location : 601, Diamond Harbour Rd, Manton, Behala, Kolkata, West Bengal
700034

Appointment Date : 07-11-2024

Member Information		
Booked Member Name	Age	Gender
MR. DEBNATH HARADHAN	53 year	Male

Thanks,
Mediwheel Team
Please Download Mediwheel App



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DIAGNOSTICS REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Order Date	: 07/11/2024 09:23
Age/Sex	: 53 Year(s)/Male	Report Date	: 07/11/2024 15:07
UHD	: NMHK-2421622	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	: NMH	Mobile	: 8777864015
Address	: 676/A,K.G.ROAD, BARISHA,Kolkata, West Bengal, 700008		

REPORT OF ECHO SCREENING

No regional wall motion abnormality at rest.
Normal LV systolic function (LVEF = 65%).
Normal RV systolic function. (TAPSE = 1.8 cm, RVS' = 0.10 m/s).
Borderline concentric left ventricular hypertrophy.
Adequate diastolic compliance (E/e' = 11.2), (E/A = 1.10).
No pericardial effusion.
Mild TR. Estimated PASP = 23 mmHg.
IVC normal diameter &> 50 % respiratory compressibility.
No thrombus, mass / vegetation.

Dr. Sudip Chakraborty
MBS,DIP (Preventative Cardiology)
Fellow Clinical

RegNo: 56285

Print Date Time : 09/11/2024 13:23:09

Print By : SNEHA SARKAR

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DIAGNOSTICS REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Order Date	: 07/11/2024 09:23
Age/Sex	: 53 Year(S)/Male	Report Date	: 07/11/2024 15:42
UHID	: NHHK-2421622		
Ref. Doctor	: NHH	Facility	: NARAYAN MEMORIAL
Address	: 676/A,K.G.ROAD, BARISHA,Kolkata, West Bengal, 700008	Mobile	: 8777864015
		HOSPITAL	

CHEST X-RAY REPORT OF PA VIEW

Accentuation of vascular markings noted bilaterally.

No appreciable pleural thickening / calcification is noted.

Costo-phrenic angles are normal.

Cardiac shadow appears normal.

Bilateral hilar shadows are normal.

Both domes of diaphragm are normal.

No obvious bony abnormality is seen.

Trachea is central in position.

DR.KANISHKA MUKHERJEE
MBBS,MD(Rad. Diag.)

RegNo: 74523

Print Date Time : 09/11/2024 13:09:14

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DIAGNOSTICS REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Order Date	: 07/11/2024 09:23
Age/Sex	: 53 Year(s)/Male	Report Date	: 07/11/2024 13:24
UHID	: NMHK/2421622		
Ref. Doctor	: NMH	Facility	: NARAYANA MEMORIAL HOSPITAL
Address	: 676/A, K.G. ROAD, BARISHA, Kolkata, West Bengal, 700008	Mobile	: 8777864015

USG REPORT OF WHOLE ABDOMEN (SCREENING)

LIVER : Liver is normal in size. **Parenchymal echogenicity is raised**. Intrahepatic biliary radicles are not dilated. No focal mass lesion is seen.

PORTA :

PV : Normal. PV measures 0.9 cm.

CBD : Normal. CBD measures 0.4 cm.

GALL BLADDER :

Gall bladder is normal in size, contour, outline and position. No calculus is seen. Wall thickness is normal.

PANCREAS :

Pancreas is normal in size and parenchymal echogenicity. Pancreatic duct is not dilated.

SPLEEN :

Spleen is not enlarged and parenchyma shows normal homogeneous pattern.

KIDNEYS :

Both kidneys are normal in size, shape, outline, position and parenchymal echogenicity. Corticomedullary differentiation maintained. No evidence of any calculus/ mass / hydronephrosis is seen.

Right kidney measures : 9.0 cm & Left kidney measures : 9.5 cm.

Print Date Time : 09/11/2024 13:09:23

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DIAGNOSTICS REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Order Date	: 07/11/2024 09:23
Age/Sex	: 53 Year(S)/Male	Report Date	: 07/11/2024 13:24
UHID	: NMHK.2421622	Facility	: NARAYANA MEMORIAL HOSPITAL
Ref. Doctor	: NMH	Mobile	: 8777864015
Address	: 676/A,K.G.ROAD, BARISHA,Kolkata, West Bengal, 700008		

URINARY BLADDER : Urinary bladder is normal in contour, outline and distension.
No vesical lesion is seen.

POST VOID BLADDER : No significant residual urine is seen (44 cc).

PROSTATE : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 3.3 cm x 3.7 cm x 3.2 cm. It weight approx 20 gm.

PERITONEUM : No free fluid is noted.

RETROPERITONEUM : IVC and aorta appear normal. No lymphadenopathy is seen.

IMPRESSION : Fatty changes in liver (Grade I)

Mast

DR.MADHUSHREE RAY NASKAR
MBBS,DMRD

Consultant Radiologist
RegNo: 57032

Print Date Time : 09/11/2024 13:09:23

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(A Unit of Narayan Health Services Pvt. Ltd.)

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1ZS



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. HARADHAN DEBNATH
UHID : NMHK.2421622
Episode : OP
Ref. Doctor : NMH
Address : 676/A,K.G.ROAD , BARISHA ,Kolkata,West Bengal ,700008

Age/Sex : 53 Year(s) / Male
Order Date : 07/11/2024 09:23
Mobile No : 8777864015
DOB : 06/10/1971
Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION

RESULTS

UNITS

BIOLOGICAL REF RANGE

Sample No : 07H0201794

Collection Date : 07/11/24 09:37

Ack Date : 07/11/2024 15:29

Report Date : 07/11/24 16:10

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP

Method - Agglutination forward & Reverse

RH TYPE

'O'

POSITIVE

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB)

Method - Colorimetric method (Cyn Meth)

RBC COUNT

Method - Electrical Impedance Method

TOTAL WBC COUNT

Method - Electrical Impedance Method

PLATELET COUNT

Method - Electrical Impedance Method

PCV

Method - RBC pulse ht. detection method

MCV

Method - calculated

MCH

Method - Calculated

MCHC

Method - Calculated

ESR

Method - Modified Westergren Method

DIFFERENTIAL COUNT

Method - Microscopy

NEUTROPHILS

Method - Microscopy

LYMPHOCYTES

Method - Microscopy

MONOCYTES

Method - Microscopy

EOSINOPHILS

Method - Microscopy

14.9

5.1

5.0

200

46

90

29

33

05

49

40

05

06

gm/dl

x10⁶/ul

10³/cmm

10³/cmm

%

fl

pg

gm/dl

%

%

%

%

%

13 - 17

4.5 - 5.5

4 - 10

150 - 410

40 - 50

83 - 101

27 - 32

31.5 - 34.5

0 - 12

40 - 80

20 - 40

2 - 10

1 - 6

Print DateTime : 09/11/2024 12:52:20

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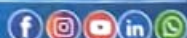
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LABORATORY INVESTIGATION REPORT

Patient Name	: M. HARADHAN DEBNATH	Age/Sex	: 53 Year(s) / Male
UNIT	: NHHK-2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 8777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 676/A,K.G.ROAD , BARISHA, Kolkata,West Bengal ,700008	Facility	: NARAYAN MEMORIAL HOSPITAL

BASOPHILS 00 % 0 - 2
Method - Microscopy

PERIPHERAL BLOOD SMEAR
RBC Normocytic normochromic
WBC Within normal limits.
PLATELET Adequate.

End of Report

S. Prinka
Dr. Alimula Dabari
MBS, MD (Prenatology)
 (Consultant Paedologist)
 Reg.No: WBMC 92599
 Checked By





LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Age/Sex	: 53 Year(s) / Male
UNIT	: NHK/2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 8777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 678/A,K.G.ROAD , BARISHA, Kolkata West Bengal ,700008	Facility	: NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION

RESULTS

UNITS

BIOLOGICAL REF RANGE

Sample No : 07H0201794 Collection Date : 07/11/24 09:37 Adt Date : 07/11/2024 12:23 Report Date : 07/11/24 16:55

SERUM CREATININE

SAMPLE : SERUM

SERUM CREATININE

Method - Jaffe Gen2 Compensator

0.9 mg/dl 0.7 - 1.2

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

TOTAL BILIRUBIN

Method - Diaz Method

0.8 mg/dl 0 - 1.1

DIRECT BILIRUBIN

Method - Diaz Method

0.3 ▲ (H) mg/dl 0 - 0.2

INDIRECT BILIRUBIN

Method - Calculated

0.5 mg/dl 0.2 - 0.9

SGPT (ALT)

Method - JCT Without Pyruvical Phosphate

32 U/L 10 - 50

SGOT (AST)

Method - JCT Without Pyruvical Phosphate

33 U/L 0 - 40

ALKALINE PHOSPHATASE

Method - JCT

76 U/L 40 - 129

TOTAL PROTEIN

Method - Sulfur

7.1 g/dl 6.6 - 8.7

ALBUMIN

Method - Bromocresol Green

4.8 gm/dl 3.5 - 5.2

GLOBULIN

Method - Calculated

2.3 g/dl 2 - 3.5

ALBUMIN:GLOBULIN

Method - Calculated

2.1 - 1.1 - 2.5

GGT

Method - Enzymatic colorimetric assay

16 U/L 8 - 61

N.B

NORMAL RANGE : TOTAL PROTEIN

Umbilical Cord - 4.8-8.0

Premature - 3.5-6.0

BLOOD UREA NITROGEN



NMC 5623

Print Date/Time : 09/11/2024 12:52:32

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LABORATORY INVESTIGATION REPORT

Patient Name : Mr. HARADHAN DEBNATH
UHID : NMHM.242.1622
Episode : OP
Ref. Doctor : NMH
Address : 676/A,K.G.ROAD , BARISHA , Kolkata,West Bengal
 ,700008

Age/Sex : 53 Year(s) / Male
Order Date : 07/11/2024 09:23
Mobile No : 8777864015
DOB : 06/10/1971
Facility : NARAYAN MEMORIAL
 HOSPITAL

BLOOD UREA NITROGEN

7.4 mg/dl 6 - 20
 Method - Creatinine

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL
 Method - CHOD-PAP

141 mg/dl
 Desirable <200
 Borderline 200 - 239
 High >=240

HDL CHOLESTEROL

Method - Homozygous Enzymatic Colorimetric

39 ▼ (L)

mg/dl
 81
 Method - Homozygous Enzymatic Colorimetric
 Optimal < 100
 Borderline 130 - 159
 High>160

VLDL

Method - CALCULATED

21.4

CHOLESTEROL-HDL RATIO

3.62

LDL-HDL RATIO

2.08

TRIGLYCERIDES

Method - Enzymatic Colorimetric

107

mg/dl
 Desirable <150
 Borderline 150 - 200
 High >200

URIC ACID

SAMPLE : SERUM

URIC ACID

Method - Enzymatic Colorimetric

8.1 ▲ (H)

mg/dl 3.4 - 7

BUN / CREATINE RATIO

SAMPLE : SERUM

BUN / CREATINE RATIO

8.2 ; 1

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

HBA1C

Method - High Performance Liquid Chromatography (HPLC)

5.0

Using BIO RAD-D10 Machine

Estimated average blood glucose (EAG)

97

REFERENCE RANGE

Hemoglobin A1c (%)

< 6

Degree of Glucose Control

Non Diabetic Level

Non Diabetic Level





LABORATORY INVESTIGATION REPORT

Patient Name : Mr. HARADHAN DEBNATH	Age/Sex : 53 Year(s) / Male
UHID : NMHK.2421622	Order Date : 07/11/2024 09:23
Episode : OP	
Ref. Doctor : NMH	Mobile No : 8777864015
	DOB : 06/10/1971
Address : 676/A,K.G.ROAD , BARISHA ,Kolkata,West Bengal ,700008	Facility : NARAYAN MEMORIAL HOSPITAL

BLOOD UREA NITROGEN 7.4 mg/dl 6 - 20
Method - Calculated

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL 141 mg/dl	Desirable <200 Borderline 200 - 239 High >=240
Method - CHOD-PAP	
HDL CHOLESTEROL 39 ▼ (L) mg/dl	40 - 60
Method - Homogenous Enzymatic Colorimetric	
LDL CHOLESTEROL 81 mg/dl	Optimal < 100 Borderline 130 - 159 High >160
Method - Homogenous Enzymatic Colorimetric	
VLDL 21.4 mg/dl	0 - 30
Method - CALCULATED	
CHOLESTEROL-HDL RATIO 3.62 -	
LDL-HDL RATIO 2.08 -	
TRIGLYCERIDES 107 mg/dl	Desirable <150 Borderline 150 - 200 High >200
Method - Enzymatic Colorimetric	

URIC ACID

SAMPLE : SERUM

URIC ACID 8.1 ▲ (H) mg/dl 3.4 - 7
Method - Enzymatic Colorimetric

BUN / CREATINE RATIO

SAMPLE : SERUM

BUN / CREATINE RATIO 8.2 ; 1

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

HBA1C 5.0 %	
Method - High Performance Liquid Chromatography (HPLC) using BIORAD-D10 Machine	
Estimated average blood glucose (EAG) 97 mg/dl	

REFERENCE RANGE

Hemoglobin A1c (%)	Degree of Glucose Control
< 6	Non Diabetic Level





LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Age/Sex	: 53 Year(s) / Male
UNID	: NMHK.2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 8777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 676/A,K.G.ROAD , BARISHA ,Kolkata,West Bengal ,700008	Facility	: NARAYAN MEMORIAL HOSPITAL

6-7	Near Normal Glycemia
< 7	Goal
7-8	Good Control
>8	Action Suggested

INTERPRETATION

- 1) Human hemoglobin inside erythrocytes undergoes a non enzymatic chemical reaction with glucose. The rate & extent of this reaction are thought to be dependent on the average blood glucose.
 - 2) The ratio of HbA1c to the total HbA concentration has been suggested as a reliable measure of the degree of metabolic control in diabetic patients.
 - 3) Lipemic and Icteric samples do not interfere with the measurement of the percent HbA1c.
 - 4) Hemoglobin F (Hb F) has the potential to interfere with the measurement of HbA1c generating falsely elevated % Alc values average blood glucose.
- N.B.: All reference ranges are age and sex matched. Reference limits mentioned herein are in accordance with the literature along with the kit whi may change with the change in chemistry or the kit.
- N.B.: 1. The above result relates only to the items tested and only to the time of testing.2. The above report cannot be reproduced in part or whole without the written permission of the chief pathologist.

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING 98 mg/dl 70 - 109
Method - Hexokinase

BLOOD SUGAR(PP)

SAMPLE : PLASMA

BLOOD SUGAR PP 92 mg/dl 70 - 140
Method - Hexokinase

End of Report

Dr. S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

Checked By





LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Age/Sex	: 53 Year(s) / Male
UHID	: NMHK2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 8777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 676/A,K.G.ROAD , BARISHA, Kolkata, West Bengal ,700008	Facility	: NARAYAN MEMORIAL HOSPITAL

Immunoassays- Tumor Markers

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
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Sample No. : 07MH001794 Collection Date : 07/11/24 09:37 Ack Date : 07/11/2024 12:23 Report Date : 07/11/24 16:56

PROSTATE SPECIFIC ANTIGEN (PSA)

PROSTATE SPECIFIC ANTIGEN (PSA) 1.44 ng/ml <3.5

Interpretation : Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-antitrypsin (PSA-AT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations

End of Report

Dr. S. Chatterjee
MD, MBBS, FACC
(CONSULTANT BIOCHEMIST)

Checked By



LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. HARADHAN DEBNATH	Age/Sex	: 53 Year(s) / Male
UHID	: NMH-2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 8777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 676/A K.G.ROAD , BARISHA, Kolkata,West Bengal ,700008	Facility	: NARAYANA MEMORIAL HOSPITAL

Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF. RANGE
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Sample No. : 07H201794 Collection Date : 07/11/24 09:37 Acd Date : 07/11/2024 12:23 Report Date : 07/11/24 16:55

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	1.1	ng/ml	0.80 - 2.00
Method - ECLIA			
T4	8.16	ug/dL	5.10 - 14.10
Method - ECLIA			
TSH	1.9	uIU/ml	0.27-5.50
Method - ECLIA			
			Adult Male - 0.27-5.50
			Adult Female - 0.27-5.50
			Newborns - <25
			Up to 12 years - 0.3-5

Interpretations:
 1. For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.

- The assay is unimpaired by icterus (Bilirubin < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (intubid < 1500 mg/dL), biotin (<102 mmol/L or < 25 ng/ml), iVIG < 2 g/dL and iGM < 0.5 g/dL).
- There is no high dose hook effect at TSH concentrations upto 1000 µmIU/ml.
- TSH values may be transiently altered because of non thyroidal illness like several infections, liver disease, renal and heart failure, several burns, trauma and surgery etc. Drugs that decrease TSH values e.g. L-dopa, Glucocorticoid drugs that increase TSH values e.g. Iodine, Lithium, Amiodarone.
- The assay is unimpaired by icterus (Bilirubin< 633 µmol/L or < 37 mg/dl), hemolysis (Hb< 1.4 mmol/L or < 2.3 g/dl), lipemia (triglycerides< 28.5 mmol/L or 2500 mg/dl) and biotin (< 409 nmoI or < 100 ng/ml).
- The assay is unimpaired by icterus (Bilirubin< 599 µmol/L or < 35 mg/dl), hemolysis (Hb<1.2 mmol/L or < 2.0 g/dl), lipemia (intubid< 1800 mg/dl) and biotin (< 123 nmoI or < 30 ng/ml).

End of Report

Dr. S. Chatterjee
MD, MBBS, FACC
 (CONSULTANT BIOCHEMIST)



Sample ID: 07H0201794A

07/11/2024 15:32

Injection date

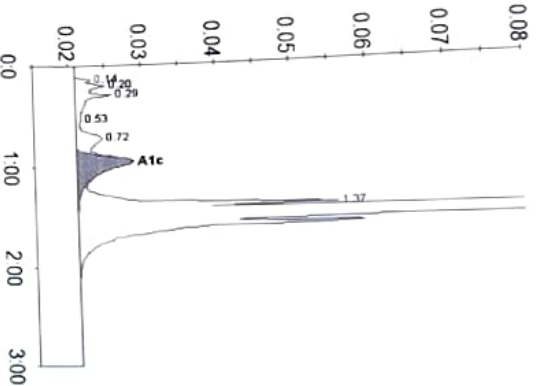
07/11/2024 15:32

Injection #: 12

Method: HbA1c

Rack #: ---

Rack position: 2



Peak table - ID: 07H0201794A

Peak	R.time	Height	Area	Area %
Unknown	0.14	2319	5684	0.2
A1a	0.20	4262	16291	0.7
A1b	0.29	5160	25132	1.1
F	0.53	737	3438	0.1
LALc/Hb-1	0.72	3559	32906	1.4
A1c	0.95	7659	86465	5.0
P3	1.37	35060	118130	5.0
A0	1.42	709238	2068378	87.8
Total Area:		2356424		

Concentration:	%	mmol/mol
A1c	5.0	31

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Diamond Harbour Road, Kolkata - 700 034

Ph : 033 6640 0000 | Mob : +91 62921 95051 | E-mail : contact@nmh.org.in





LABORATORY INVESTIGATION REPORT

Patient Name	: MR. HARADHAN DEBKATH	Age/Sex	: 53 Year(s) / Male
UNITD	: NMHK.2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 9777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 676/A,K.G.ROAD , BAPUSHA ,Kolkata, West Bengal ,700008	Facility	: NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REFERENCE
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Sample No : 07H0201818 Collection Date : 07/11/24 11:04 Ad. Date : 07/11/2024 15:14 Report Date : 07/11/24 17:21

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	50	ml
COLOUR	PALE STRAW	
APPEARANCE	SLIGHTLY HAZY	
SPECIFIC GRAVITY	1.010	
REACTION(pH)	ALKALINE (pH-7.5)	

CHEMICAL EXAMINATION

SUGAR	ABSENT	ABSENT
ALBUMIN	ABSENT	
BLOOD	ABSENT	
KETONE	ABSENT	
BILE SALT	ABSENT	
BILE PIGMENTS	ABSENT	

MICROSCOPIC EXAMINATION

PLUS CELLS	2-4/HPE	<5/HPE
EPITHELIAL CELLS	1-2/HPE	<20/HPE
RBC	ABSENT	
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	
OTHERS	MICRO ORGANISM PRESENT - A FEW	

Plasma controls clinically.

URINE FOR SUGAR FASTING

SAMPLE : URINE	RESULT
	ABSENT



MC-3423



MC-3623

LABORATORY INVESTIGATION REPORT

Patient Name	: M. HARADHAN DEBWATH	Age/Sex	: 53 Year(s) / Male
UHID	: NMHK.2421622	Order Date	: 07/11/2024 09:23
Episode	: OP	Mobile No	: 8777864015
Ref. Doctor	: NMH	DOB	: 06/10/1971
Address	: 676/A,K.G.ROAD , BARISHA , Kolkata West Bengal ,700008	Facility	: NARAYAN MEMORIAL HOSPITAL

URINE FOR SUGAR PP

SAMPLE : URINE

RESULT

ABSENT

End of Report

S. Saha
Dr. Ritwick Dharal
MBBS, MD (Pathology)
(Consultant Pathologist)
Reg.No. WBMC 52599
Ordered By



MC-3623




Print Date/Time : 09/11/2024 12:55:29

Print By : SNEHA SARKAR

Page 2 of 2

Registered Office :
582, Diamond Harbour Road
Behala, Kolkata - 700 034

Corporate Office :
Diamond Manton, 85, (Mail - 601)
Diamond Harbour Road, Kolkata - 700 034
Ph. : 033 6640 0000 | Mob. : +91 62921 95051 | E-mail : contact@nmh.org.in

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(A Unit of Narayan Health Services Pvt. Ltd.)

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1Z5



DIAGNOSTICS REPORT

Patient Name : Mr. HARADHAN DEBNATH
Age/Sex : 53 Year(s)/Male
UHID : NMHK.2421622
Ref. Doctor : NMH
Address : 676/A,K.G.ROAD,
BARISHA,Kolkata, West Bengal,
700008

Order Date : 07/11/2024 09:23
Report Date : 08/11/2024 09:09

: NARAYAN MEMORIAL
HOSPITAL
: 877864015

Mobile

ELECTROCARDIOGRAM REPORT (ECG)

HR : 75 bpm
Rhythm : Sinus
P wave : Normal
PR Interval : 178 msec
QRS axis : Normal (31 Degree)
QRS duration : 82 msec
QRS configuration : Normal
T wave : Normal
ST segment : Isoelectric
QTc : 387 msec
QT : 344 msec
IMPRESSION
- Sinus rhythm.
- Within normal limits.
Clinical correlation please.

Dr. Sudip Chakraborty
MBBS,DIP (Preventative Cardiology)
Fellow Clinical

RegNo: 56285

Registered Office : 582, Diamond Harbour Road, Behala, Kolkata - 700 034
Corporate Office : 582, Diamond Harbour Road, Behala, Kolkata - 700 034
Ph : 033 6640 0000 | Mob : +91 62921 95051 | E-mail : contact@nmh.org.in

Print By : Apnila manna

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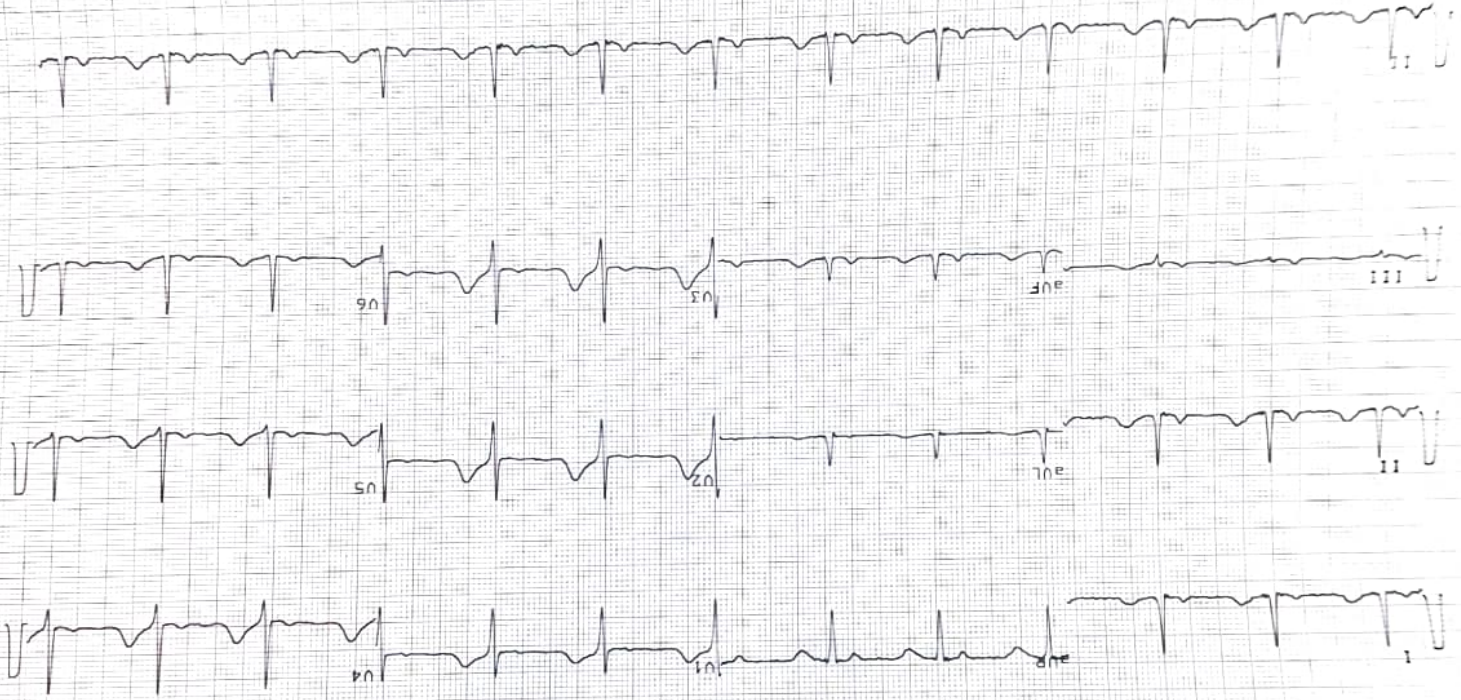


25 mm/s
10 mm/mV

0.05-25 Hz F50 55F 585 07.11.2024 14:03:56
NARAYAN MEMORIAL HOSPITAL, BEHARLA

Part No. 157017M 06 0123

RT-102plus 1.25 CI



10 mm/mV

18 mm/mV

HR 75/min
 Axis: P 52° QRS 31° T 41°
 Intervals: P (II) 0.12 mV P (I) 0.12 mV PR 178 ms QRS 82 ms QT 344 ms QTc 387 ms ST 50kol. 2.59 mV R (V5) 1.52 mV S (V1) -1.07 mV T 41°

SINUS RHYTHM
NORMAL ECG

6:02

UNCONFIRMED REPORT

DEBATH
 242162
 Male
 53 years
 cm / kg