



ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ
ভারত সরকার
Unique Identification Authority of India
Government of India

তালিকাভুক্তির আই ডি / Enrollment No. : 1111/20028/02698

26/04/2015

To
Sankar Kumar Ballav
শঙ্কর কুমার বরভ
bira ballav para
Bira
Bira Ballavepara, North 24 Parganas
West Bengal - 743234



KH348259279FT

34825927



আপনার আধার সংখ্যা / Your Aadhaar No. :

8307 5134 7582

আধার - সাধারণ মানুষের অধিকার



ভারত সরকার

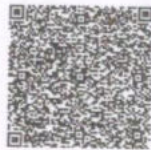
Government of India



শঙ্কর কুমার বরভ
Sankar Kumar Ballav
পিতা : দীনবন্ধু বরভ
Father : Dinabandhu Ballav

জন্মতারিখ / DOB: 31/01/1962
পুরুষ / Male

8307 5134 7582



আধার - সাধারণ মানুষের অধিকার

APOLLO CLINIC OM TOWER
36C, B.T ROAD OPP "RBU"
KOL 700002
Ph 033 25565555
033 25563333

Sankar K. Ballav.

8307 5134 7582

Address: Bira Ballav para,
Bira, Bira Ballavepara, North
24 Parganas, West Bengal,
743234

পিসি পথ,
বিরি বালবেপারা, উত্তর ২৪ পরগণা
জিলা, পশ্চিম বঙ্গ, ৭৪৩২৩৪

Unique Identification Authority of India
ভারতীয় বিশিষ্ট পরিচয় পরিদপ্তর



- Aadhaar is valid throughout the country.
- Aadhaar will be helpful in availing Government and Non-Government services in future.
- আধার সারা দেশে প্রযোজ্য।
- আধার ভবিষ্যতে সরকারী ও বেসরকারী পরিষেবা গ্রহণে সহায়ক হবে।

- Aadhaar is proof of identity, not of citizenship.
- To establish identity, authenticate online.

INFORMATION

- আধার পরিচয়ের প্রমাণ, নাগরিকত্বের প্রমাণ নয়।
- পরিচয়ের প্রমাণ তালিকাভুক্ত প্রমাণ প্রমাণ করা কঠোর।

তথ্য




बैंक ऑफ बरोडा
Bank of Baroda

नाम : संकर कुमार बल्लभ
 Name : SANKAR KUMAR BALLAV
 कार्यालय पता : प. ३५३ ९५३
 E. C. No. 153959


 अधिकारी अधिकारी



Sankar K. Ballav
 एसेस डी मॅनेजर

Sankar K. Ballav.

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LETTER OF APPROVAL / RECOMMENDATION

To,

The Coordinator,
Mediwheel (Arcofemi Healthcare Limited)
Helpline number: 011- 41195959

Dear Sir / Madam,

Sub: Annual Health Checkup for the employees of Bank of Baroda

This is to inform you that the following employee wishes to avail the facility of Cashless Annual Health Checkup provided by you in terms of our agreement.

PARTICULARS	EMPLOYEE DETAILS
NAME	MR. BALLAV SANKAR KR
EC NO.	153959
DESIGNATION	HEAD CASHIER "E" _II
PLACE OF WORK	KOLKATA, NSB INTERNATIONAL AIRP
BIRTHDATE	31-01-1962
PROPOSED DATE OF HEALTH CHECKUP	22-01-2022
BOOKING REFERENCE NO.	21M153959100009680E

This letter of approval / recommendation is valid if submitted along with copy of the Bank of Baroda employee id card. This approval is valid from **18-01-2022** till **31-03-2022** The list of medical tests to be conducted is provided in the annexure to this letter. Please note that the said health checkup is a **cashless facility** as per our tie up arrangement. We request you to attend to the health checkup requirement of our employee and accord your top priority and best resources in this regard. The EC Number and the booking reference number as given in the above table shall be mentioned in the invoice, invariably.

We solicit your co-operation in this regard.

Yours faithfully,

Sd/-

Chief General Manager
HRM Department
Bank of Baroda

(Note: This is a computer generated letter. No Signature required. For any clarification, please contact Mediwheel (Arcofemi Healthcare Limited))

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I am Sankar Mr. Ballav. chest air renike
do not Paslow. I dont T.M.T. test


Date: -22/01/2022.

Sankar Mr. Ballav

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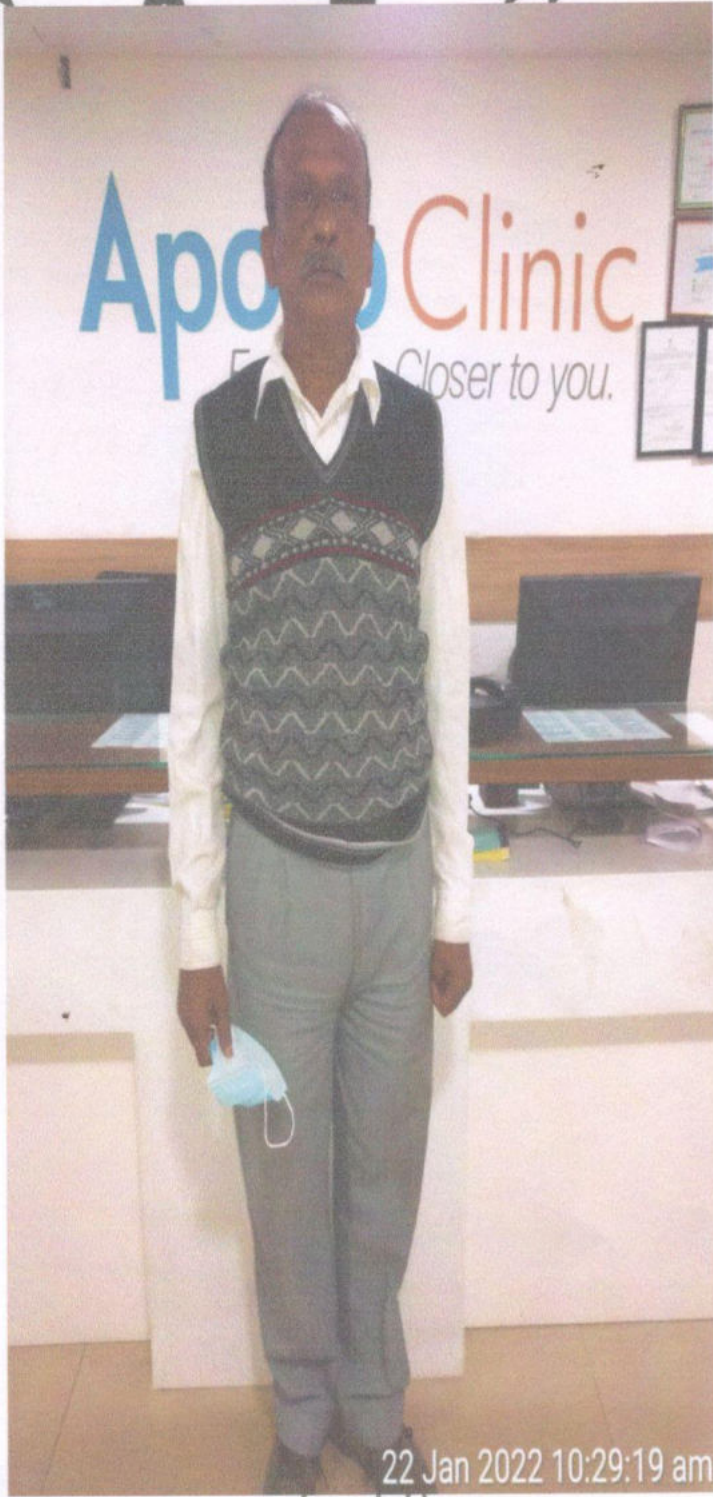
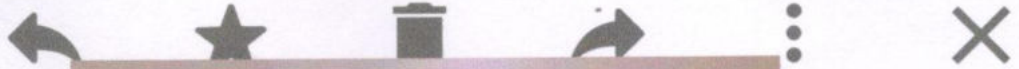
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 +91 74392 97827



5 of 8



22 Jan 2022 10:29:19 am

6 of 8

Patient Name: MR. SANKAR KUMAR BALLAV
UHID/MR No.: FSIN.0000013917
Visit Date: 22.01.2022
Sample collected on: 22.01.2022
Ref Doctor: SELF

Age/Gender: 60 Years / Male
OP Visit No.: FSINOPV16965
Reported on: 22.01.2022
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u> <u>UNIT</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE</u>
BLOOD GROUP RH TYPE	"B" NEGATIVE(-Ve)	

Results are to be correlate clinically.

*** End of the report***

Lab Technician/Technologist
Madhumita_Biswas


Dr. BIPARNAK HALDAR
MBBS, MD(PATHOLOGY)
CONSULTANT PATHOLOGIST

Patient Name: MR. SANKAR KUMAR BALLAV
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APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE- (FASTING) GLUCOSE- (FASTING) Method: (GOD-POD)	83.0	70.0- 110.0	mg/dL
GLUCOSE- (POST PRANDIAL) GLUCOSE- (POST PRANDIAL) Method: (GOD-POD)	127.0	80.0- 140.0	mg/dL

End of the report

Results are to be correlate clinically

BK

Lab Technician / Technologist
Madhumita_Biswas

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**DEPARTMENT OF SPECIAL BIOCHEMISTRY
REPORT PREPARED ON PATHOLOGY**

Test Name	Value	Unit	Normal Range
Glycosylated Haemoglobin (HbA1c), HPLC Glycosylated Haemoglobin (HbA1c), HPLC	4.1	%	Excellent Control: <4 Good Control: 4-6 Fair Control: >6-7 Action Suggested: >7-8 Poor Control: >8
Estimated Average Glucose (EAG)	121	mg/dL	Excellent Control: 90-120 Good Control: 120-150 Fair Control: > 150-180 Action Suggested: 181-210 Panic Value: >211

Methodology: HPLC

Instrument Used: Bio-Rad D-10

Comment

- For patients with Hb variant diseases there may be lowering of HbA1c due to low HBA synthesis.
- EAG is value calculated from HbA1c & indicates average glucose level over past three months.

Factors that interfere with HbA1c Measurement: Genetic variants (e.g. Hbs trait, HbC trait), elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements. The effects vary depending on the specific Hb variant or derivative and the specific HbA1c method.

Factors that affect interpretation of HbA1c Results: Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g. recovery from acute blood loss, hemolytic anemia) will falsely lower HbA1c test results regardless of the assay method used.


***** End Of Report *****

BK

Lab Technician / Technologist
Susmita_Saha

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UHID/MR No.: FSIN.0000013917
Visit Date: 22.01.2022
Sample collected on: 22.01.2022
Ref Doctor: SELF

Age/Gender: Opp. of Rabindra Bharati University
OP Visit No.: FSINOPV16965
Reported on: 22.01.2022
Specimen: BLOOD

DEPARTMENT OF HAEMATOLOGY

TEST NAME	RESULT	BIOLOGICAL REFERENCE	UNIT
COMPLETE BLOOD COUNT			
HAEMOGLOBIN	16.1	Female 12-15 Male 13-16	gm%
Method: Non cyanideSis Based			
RBC COUNT	5.59	Female 3.8-4.8 Male 4.5-5.5	mill/Cumm
Method: Electrical Impedence			
HEMATPOCRIT (PCV)	52.4	Female 36-46 Male 42-52	%
MCV	93.8	83-101 fl	fl
Method: Calculated			
MCH	31.6	27-32 pg	pg
Method: Calculated			
MCHC	33.7	31.5-34.5	%
Method: Calculated			
PLATELET COUNT	2.17	1.5-4 lakhs/cu mm	Lac/cumm
Method: Electrical Impedence			
TOTAL WBC COUNT	6800	4.0-10.0	/cumm
Method: Electrical Impedence			
NEUTROPHIL	56	40-80	%
Method: Microscopy			
LYMPHOCYTE	40	20-45	%
Method: Microscopy			
MONOCYTE	03	2-10	%
Method: Microscopy			
EOSINOPHIL	01	1-6	%
Method: Microscopy			
BASOPHIL	00	<1-2	%
Method: Microscopy			
ESR	09	Male:12 Female:19	mm/hr mm/hr
Method: westergrren's			

Note: RBC are Normocytic with normochromic.

INSTRUMENT USED:

SYSMEX (XP 100)

*Please correlate with clinical conditions.

End of the report

Dr. Biparna Haldar

Dr. BIPARNAK HALDAR
MBBS, MD(PATHOLOGY)
CONSULTANT PATHOLOGIST

Lab Technician/Technologist

Madhumita Biswas

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OP Visit No.: FSINOPV16965
Reported on: 22.01.2022
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
LIPID PROFILE			
Triglyceride Method: GPO-POD	131	<200	mg/dl
Cholesterol Method: CHO - POD	199	Desirable blood cholesterol :< 220 Borderline High: 170.0-199.0 High: > 199.0 mg/dl	mg/dl
HDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	54	50-80mg/dl	mg/dl
LDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	119	<130.0 mg/dl	mg/dl
VLDL CHOLESTEROL	26	20-35 mg/dl	mg/dl
LDL: HDL RATIO	2.2	1.5-3.5	
CHOL: HDL RATIO	3.6	1.5-3.5	

End of the report

Results are to be correlate clinically

Lab Technician / Technologist
Madhumita_Biswas

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APOLLO CLINIC @ OM TOWER
Age/Gender: 60 Years / Male
Opp. of Rabindra Bharati University
OP Visit No.: FSINOPV16965
Reported on: 22.01.2022
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIVER FUNCTION TEST (PACKAGE)			
BILIRUBIN- TOTAL Method: Daizo	0.7	1.1 Adult	mg/dl
BILIRUBIN- DIRECT Method: Daizo with DPD	0.2	Adult & Children: <0.25	mg/dl
BILIRUBIN- INDIRECT Method: calculated	0.5	0.1-1.0	mg/dl
TOTAL- PROTIEN Method: Photometric UV test	7.9	Adult: 6.6-8.8	gms/dl
ALBUMIN Method: BCG	4.8	3.5-5.2	gms/dl
GLOBULIN Method: calculated	3.1	1.8-3.0	gms/dl
A:G Ratio	1.5:1		
SGOT/AST Method: IFCC WITHOUT P5P	35	up to 38	U/L
SGPT/ALT Method: IFCC WITHOUT P5P	49	up to 38	U/L
AST:ALT RATIO	0.7		
ALKA-PHOS Method: PNPP- AMP BUFFER	82	Adult: 20-116 Child: 104-380	U/L
GGT [Gamma Glutamyl Transferase]	31	7-32	U/L

*Please correlate with clinical conditions.

End of the report

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Patient Name: MR. SANKAR KUMAR BALLAV
UHID/MR No.: FSIN.0000013917
Visit Date: 22.01.2022
Sample collected on: 22.01.2022
Ref Doctor: SELF

Age/Gender: 60 Years / Male
OP Visit No.: FSIN OPV16965
Reported on: 22.01.2022
Specimen: BLOOD

APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University

DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
BLOOD UREA NITROGEN (BUN) BLOOD UREA NITROGEN (BUN) Method: Calculated	10.7	8 - 20	mg/ dl
BUN: CREATININE RATIO	9.7		
URIC ACID URIC ACID Method: Uricase	5.5	Female: 2.6 - 6.0 Male: 3.4 - 7.0	mg/dl

End of the report

Results are to be correlate clinically

BK

Lab Technician / Technologist
Susmita_Saha

DR. BIPARNAK HALDAR
MBBS, MD (PATHOLOGY)
CONSULTANT PATHOLOGIST

Patient Name: MR. SANKAR KUMAR BALLAV

UHID/MR No.: FSIN.0000013917

Visit Date: 22.01.2022

Sample collected on: 22.01.2022

Ref Doctor: SELF

Age/Gender: 60 Years / Male

OP Visit No.: FSINOPV16965

Reported on: 22.01.2022

Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNIT</u>
TSH:THYROID STIMULATING HORMONE-SERUM TSH:THYROID STIMULATING HORMONE-SERUM Method : CLIA	2.46	0.35-5.50	uIU/ml
TOTAL T3: TRI IODOTHYRONINE – SERUM TOTAL T3: TRI IODOTHYRONINE – SERUM Method : CLIA	1.25	0.87 – 1.78	ug/dl
TOTAL T4: THYROXINE – SERUM TOTAL T4: THYROXINE – SERUM Method : CLIA	10.50	8.09 – 14.03	ug/dl

Results are to be correlate clinically .

End of the report

Lab Technician / Technologist
Susmita_Saha

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Patient Name: MR. SANKAR KUMAR BALLAV
UHID/MR No.: FSIN.0000013917
Visit Date: 22.01.2022
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Ref Doctor: SELF

Age/Gender: 50 Year / Male
APOLLO CLINIC @ OM TOWER
OP Visit No.: FSINOPV16965
Opp. of Rabindra Bharati University
Reported on: 22.01.2022
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE
REPORT PREPARED ON PATHOLOGY

TEST NAME	VALUE	UNITS	RANGE
PSA (prostate-Specific Antigen)(TOTAL)	0.50	ng/ml	<4.0ng/ml. :Negative 4.0 – 10.0ng/ml. :Borderline >10.0ng/ml. : Elevated
Methodology:CLIA			

****Interpretation :** PSA is a product of prostatic epithelium and is normally secreted in the semen. It has been widely used in the diagnosis and management of prostatic cancer. A universal cutoff value of 4ng/ml is generally being used. However this simplified approach has led to delayed diagnosis, as well as overdiagnosis in many cases. Several refinements in the interpretation of the PSA value have been proposed.

Serum PSA density Reflects the PSA produced per gram of the prostate tissue. It is calculated by dividing the total serum PSA by the estimated gland volume (by transrectal ultrasound). Upper normal value for PSA density is 0.15

Age Specific reference ranges :	Age group	Upper reference range
	40 -49 Yrs	2.5 ng/ml
	50 -59Yrs	3.5 ng/ml
	60 -69 Yrs	4.5 ng/ml
	70 – 79Yrs	6.5 ng/ml

Serum PSA Velocity Men with prostatic cancer demonstrate an increased rate of rise in PSA level as compared to men having other conditions. The rate of change that best distinguishes between men with and without prostatic cancer is 0.75ng/ml per year. For this to be valid at least three PSA measurements should be done over a period of 1.5 yrs to 2.0 years.

Free PSA estimation PSA exists in two forms, a major fraction bound to alpha 1 chymotrypsin and a minor free fraction. The percentage of Free PSA (free PSA/total PSAX100) is very useful in discriminating the reconditions from prostate cancer when the total PSA level is in the "grey zone" of 4 – 10 ng/ml. Depending on the free PSA % the probability of prostate cancer can be determined as follows

%free PSA	probability of CA prostate
0 -10%	55%
10-15%	28%
15 – 20%	25%
>20%	10%

INSTRUMENT USED:


FULLY AUTOMATED CLIA – TOSOH AIA – 360
FULLY AUTOMATED CLIA - MINDRAY CL – 1000i
FULLY AUTOMATED CLIA - MAGLUMI 800


*****End Of Report*****

Lab Technician / Technologist
Madhumita_Biswas

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Age/Gender: 60 Years / Male
OP Visit No.: FSINOPV16965
Reported on: 22.01.2022
Specimen: URINE

URINE ROUTINE EXAMINATION

URINE FOR ROUTINE EXAMINATION

Test Name	Result	Unit	Method
<u>PHYSICAL EXAMINATION</u>			
QUANTITY	30	ml	Container Measurement
COLOUR	Watery		Naked Eye Observation
APPEARANCE	Clear		Naked Eye Observation
REACTION	Acidic		Multiple Reagent Strip
SPECIFIC GRAVITY	1.020		Multiple Reagent Strip
<u>CHEMICAL EXAMINATION</u>			
BLOOD	Nil		Multiple Reagent Strip
ALBUMIN	Nil		Multiple Reagent Strip / Heat & Acetic Acid
BILE PIGMENT	Nil		Fuchet's Test
BILE SALT	Nil		Hey's Sulphur Test
KETONE BODIES	Nil		Multiple Reagent Strip / Rothera Test
SUGAR	Nil		Multiple Reagent Strip / Benedict
<u>MICROSCOPIC EXAMINATION</u>			
PUS CELL	3-4	/HPF	Light Microscopy
RBC	Not found	/HPF	Light Microscopy
EPITHELIAL CELL	1-2	/HPF	Light Microscopy
MICRO ORGANISM	Present(+)		
Others	Not found		

Note : Any Abnormal Chemical Analysis Rechecked By Respective Manual Method

*** End of Report***

Lab Technician / Technologist
Madhumita_Biswas

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DEPARTMENT OF RADIOLOGY X-RAY OF CHEST (PA) VIEW

MR. NO- FSIN.0000000

SEX-MALE

NAME: - SANKAR KUMAR BALLAV

EXAMINATION DATE-22/01/2022

AGE-60 YRS


REPORT DATE-22/01/2022

REF DR:- SELF

FINDINGS:

- **Bilateral accentuated pulmonary vascular marking noted.**
- Both hilum appear normal.
- CTR within normal limit.
- Tracheal shadow is in the midline.
- Bilateral CP angle are clear
- No definite bone fracture is noted.

Impression:- Bilateral pulmonary vascular congestion.



DR.ARNAB MANDAL

MD, Physician, PGDUS (Delhi) CEBT-USG (WBUHS KOLKATA)
Fellow of Jefferson Ultrasound Radiology and Education Institute
Philadelphia Ex-Radiology Resident (S.E.Railway)
Regd.No:72022(WBMC)

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NAME:MR.SANKAR KUMAR BALLAV	MR. NO: FSIN-0000	DATE: 22/01/2022
AGE :60YRS	SEX:MALE	REF. BY: SELF

ULTRASOUND OF WHOLE ABDOMEN

LIVER: Liver is **Enlarged fatty inform** in size (**17.50cm**) shape, outline and echotexture. The intrahepatic tubular structures are normal. Enlarged liver with increased echogenicity is noted . The porta hepatis is normal . The common bile duct measures **4mm** in diameater. The portal vein measures **9mm** at porta .

GALLBLADDER: Gall bladder is distended. Wall is normal. No calculus or mass is seen within the gall bladder.

PANCREAS: It is normal in size, Shape, Outline and echotexture. Pancreatic duct is not dilated.

SPLEEN: It is normal in size **7.23cm**, Shape, Outline and echotexture. No parenchymal lesion is noted.

BOTH KIDNEYS: Both kidneys are normal in position, size, shape, outline and echotexture. The cortico medullary differentiation is maintained. No calculus or hydronephrosis is seen.

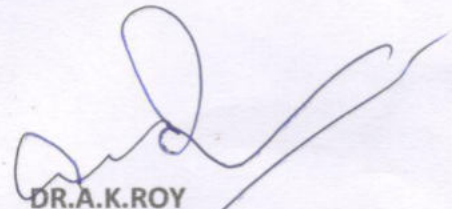
RIGHT KIDNEY measures **9.08cm**
LEFT KIDNEY measures **9.66cm**.

URINARY BLADDER: It is well distended with normal wall thickness. No calculus or mass is seen within the urinary bladder.

PROSTATE: It has a enlarge prostate. The prostatic outline is smooth. The periprostatic plane is normal. It is normal in size measures **4.53cmX3.15cmX3.65cm VOL-27.21gms**

IMPRESSION:

- HEPATOMEGALY GR – I FATTY INFILTRATION.
- ENLARGE PROSTATE.



DR.A.K.ROY

M.B.B.S, Dip BMSc, DTM&H (Cal)
Certificate on CEBT Abdomino Pelvic, USG(WBHSU)



Patient Name: SANKAR KUMAR BALLAV 60/M

Resting ECG Report

January 22, 2022

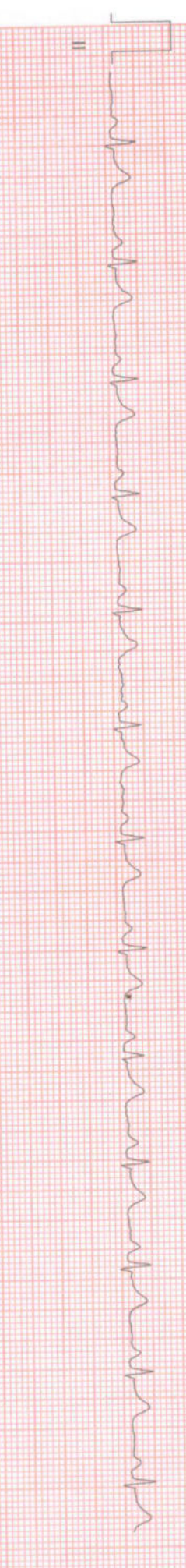
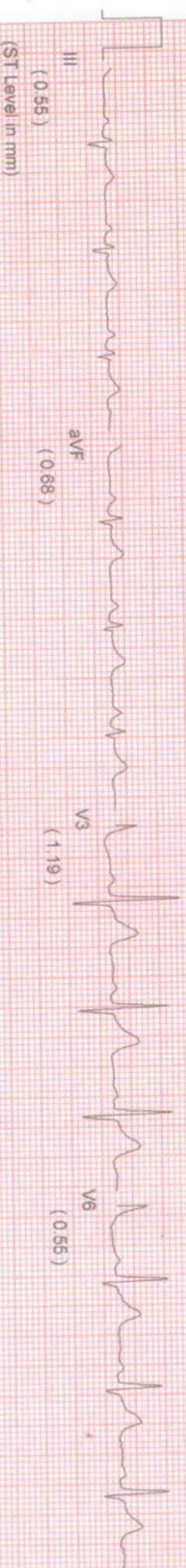
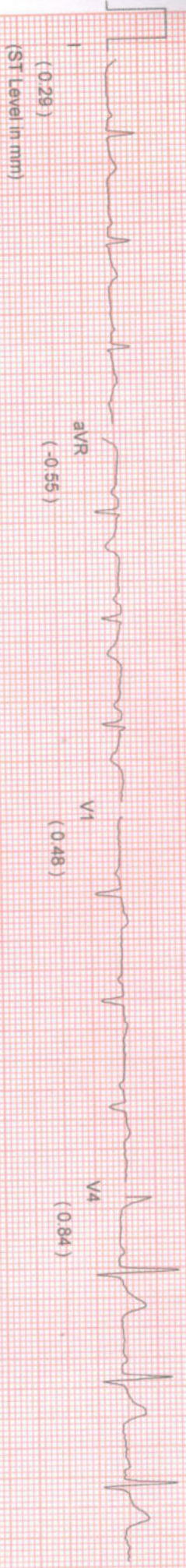
QT / QTc : 0.364 / 0.411 Sec
P-QRS-T Axis (51)-(39)-(57) deg

PR Interval: 0.14 sec
QRS Duration: 0.084 Sec

RR Interval: 0.78 sec

HR : 76 bpm BP : 120 / 60 mmHg

Time: 10:54:41



Comments :-

Srinivas kr. Ballav

10mm/1mv 25mm/sec NASANI (C) Simul-G BL U 4.3/1.13

NAME: MR.SANKAR KUMAR BALLAV	MR NO: FSIN-0000	DATE : 22.01.2022
AGE: 60YRS.	SEX:MALE	REF BY: SELF(CORPORATE)

ECG REPORT

HR : 76 b/min
AXIS : NORMAL
RHYTHM : SINUS
PR INTERVAL : 0.78 sec
QT INTERVAL : 0.411 sec
QRS DURATION : 0.084 sec
T-WAVE : NORMAL.

IMPRESSION:

- RESTING ECG IS WITHIN NORMAL LIMITS.


Dr. SIDDHARTHA KUNDU
MBBS (Cal), PGDCC, CCEBDM
Clinical Cardiologist
Ex Sr Resident, Cardiology Dept
S.R Singh Hospital, Eastern Railway

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CONSULTANT PHYSICIAN & INTENSIVIST

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Opp. of Rabindra Bharati University

TO WHOM IT MAY CONCERN

THIS IS TO CERTIFY THAT, MR. SANKAR KUMAR BALLAV,
AGE- 60Y/MALE, IS PHYSICALLY FIT BUT HE DETECTED HIGH
SGPT.

DATE: 25.1.22.....

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36C, B.T ROAD OPP "RBU"
KOL 700002
Ph 033 25565555
033 25563333

Boudhayan Bhattacharjee

SIGNATURE

STAMP

Dr. BOUDHAYAN BHATTACHARJEE
MBBS, MD (TROPICAL MEDICINE)
65631 of WBMC



DR. SOURADEEP RAY

MBBS, MS (ENT)
ASSOCIATE PROFESSOR R.G. KAR MEDICAL, KOLKATA.
REGD.NO. 63999 (WBMC)

APOLLO CLINIC @ OM TOWER
Opp. of Rabindra Bharati University

TO WHOM IT MAY CONCERN

THIS IS TO CERTIFY THAT
MR. SANKAR KUMAR BALLAV , AGE- 60Y/MALE,
HAS NO PROBLEM IN HIS EAR, NOSE AND THROAT.

HIS EAR IS CLEAN, NO HEARING PROBLEM OBSERVED,
NASAL PASAGE IS CLEAR, WITH PROPER SMELLING CAPACITY,
THROAT IS CLEAR, NO INFECTION FOUND IN TONSILS.

DATE: 25-01-2022

Souradeep Ray

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Oral & Dental Surgeon
Regn.No. 3726 Part A (Wbdc)

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Opp. of Rabindra Bharati University

TO WHOM IT MAY CONCERN

THIS IS TO CERTIFY THAT **MR. SANKAR KUMAR BALLAV , 60Y/MALE,**
HAS NO ORAL PROBLEM.

THERE IS NO CAVITY AND BAD SMELL OBSRVED IN HIS MOUTH.

DATE: 25/01/22

A. Mukherjee
.....


SIGNATURE

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