

LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. Samir Kumar Ojha	Age/Sex	: 45 Year(s)/Male
UHID	: NMHK.2117544	Order Date	: 13/11/2021 09:35
Episode	: OP	Mobile No	: 9798695088
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 63/8 HARIPAD DUTTA LANE , TOLLYGANGE ,Kolkata, West Bengal ,700017		

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0047331	Collection Date : 13/11/21 09:39	Ack Date :	Report Date : 13/11/21 16:58

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB)	14.9	gm/dl	13 - 17
RBC COUNT	5.39	x10 ⁶ /ul	4.5 - 5.5
TOTAL WBC COUNT	7.6	10 ³ /cmm	4 - 10
PLATELET COUNT	290	10 ³ /cmm	150 - 410
PCV	44	%	40 - 50
MCV	82 ▼	fl	83 - 101
MCH	28	pg	27 - 32
MCHC	34	gm/dl	31.5 - 34.5
ESR	05	mm/hr	<=10

DIFFERENTIAL COUNT

NEUTROPHILS	69	%	40 - 80
LYMPHOCYTES	28	%	20 - 40
MONOCYTES	02	%	2 - 10
EOSINOPHILS	01	%	1 - 6
BASOPHILS	00	%	0 - 2

PERIPHERAL BLOOD SMEAR

RBC

Normocytic normochromic

End of Report

Angkita K. Ghosh

Dr. ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

RegNo: 82734

Checked By

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Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0047381	Collection Date : 13/11/21 14:10	Ack Date :	Report Date : 13/11/21 16:59

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP	' B '
RH TYPE	POSITIVE

End of Report

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Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0047331	Collection Date : 13/11/21 09:39	Ack Date :	Report Date : 13/11/21 19:02

KIDNEY FUNCTION TEST

SERUM CREATININE

SAMPLE : SERUM

SERUM CREATININE	1.0	mg/dl	0.6 - 1.2
<i>Jaffe Gen2 Compensated</i>			

BLOOD UREA NITROGEN

BLOOD UREA NITROGEN	10.7	mg/dl	6 - 20
<i>Calculated</i>			

URIC ACID

SAMPLE : SERUM

URIC ACID	6.6	mg/dl	3.5 - 7.2
<i>Enzymatic Colorimetric</i>			

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

TOTAL BILIRUBIN	0.8	mg/dl	0 - 2
<i>Diazo Method</i>			

DIRECT BILIRUBIN	0.3 ▲	mg/dl	0 - 0.2
<i>Diazo Method</i>			

INDIRECT BILIRUBIN	0.5	mg/dl	0.2 - 0.9
<i>Calculated</i>			

SGPT (ALT)	29	U/L	0 - 34
<i>IFCC Without Pyridoxal Phosphate</i>			

SGOT (AST)	23	U/L	0 - 31
<i>IFCC Without Pyridoxal Phosphate</i>			

ALKALINE PHOSPHATASE	98	U/L	53 - 128
<i>IFCC</i>			

TOTAL PROTEIN	7.2	g/dl	6.4 - 8.2
<i>Biuret</i>			

ALBUMIN	4.7	gm/dl	3.5 - 5.2
<i>Bromocresol Green</i>			

GLOBULIN	2.5	g/dl	2 - 3.5
<i>Calculated</i>			

ALBUMIN:GLOBULIN	1.9	-	1.1 - 2.5
<i>Calculated</i>			

GGT	63 ▲	U/L	8 - 61
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,Kolkata,West Bengal ,700017

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Enzymatic colorimetric assay

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL	179	mg/dl	Desirable <200 Borderline 200-239 High >=240
<i>CHOD-PAP</i>			
HDL CHOLESTEROL	55	mg/dl	40 - 60
<i>Homogenous Enzymatic Colorimetric</i>			
LDL CHOLESTEROL	108	mg/dl	Optimal < 100 Borderline 130
<i>Homogenous Enzymatic Colorimetric</i>			
VLDL	17.00	mg/dl	0 - 30
<i>CALCULATED</i>			
CHOLESTEROL-HDL RATIO	3.25	-	
LDL-HDL RATIO	1.96	-	
TRIGLYCERIDES	85	mg/dl	Desirable <150 Borderline 150 - 200 High >200

Enzymatic Colorimetric

Sample No : 07H0047331B Collection Date : 13/11/21 09:39 Ack Date : Report Date : 15/11/21 13:08

BLOOD SUGAR(PP)#

SAMPLE : PLASMA

BLOOD SUGAR PP	105	mg/dl	80 - 140
<i>Hexokinase</i>			

Sample No : 07H0047331C Collection Date : 13/11/21 09:39 Ack Date : Report Date : 13/11/21 19:02

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING	97	mg/dl	70 - 110
<i>Hexokinase</i>			

End of Report



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

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Immunoassay

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0047331	Collection Date : 13/11/21 09:39	Ack Date :	Report Date : 13/11/21 19:25

THYROID FUNCTION TEST

SAMPLE : SERUM

TEST	RESULT	UNIT	REF RANGE
T3 ECLIA	1.34	ng/ml	0.6 - 1.8
T4 ECLIA	9.38	ug/dL	5.4 - 11.7
TSH ECLIA	3.57	uIU/ml	Adult Male – 0.27-5.50 Adult Female – 0.27-5.50 Newborns - <25 Upto 12 years – 0.3-5

ECLIA

Interpretations:

1. For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
2. The assay is unaffected by icterus (Bilirubin < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (Intralipid < 1500 mg/dL), biotin (< 102 nmol/L or < 25 ng/ml), IgG < 2 g/dL and IgM < 0.5 g/dL)
3. There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
4. 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.
5. The assay is unaffected 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 nmol or < 100 ng/ml).
6. The assay is unaffected by icterus (bilirubin < 599 µmol/L or < 35 mg/dl), hemolysis (Hb < 1.2 mmol/L or < 2.0 g/dl), lipemia (Intralipid < 1800 mg/dl) and biotin (< 123 nmol or < 30 ng/ml).

End of Report



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Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0047331	Collection Date : 13/11/21 09:39	Ack Date :	Report Date : 14/11/21 09:42

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	50	ml
COLOUR	PALE STRAW	
APPEARANCE	CLEAR	1.010 - 1.030
SPECIFIC GRAVITY	1.020	
REACTION(pH)	ACIDIC 6.5	

CHEMICAL EXAMINATION

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

MICROSCOPIC EXAMINATION

PUS CELLS	3-4 / HPF	<5/HPF
EPITHELIAL CELLS	2-3 / HPF	<20/HPF
RBC	1-2 / HPF	ABSENT
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	

End of Report

Angkita K. Ghosh

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 RegNo: 82734
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Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0047331A	Collection Date : 13/11/21 09:39	Ack Date :	Report Date : 13/11/21 19:18

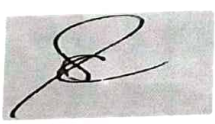
GLYCOSYLATED HAEMOGLOBIN (HBA1C)

HBA1C **6.1 ▲** % Non-diabetic : 4-6
By HPLC

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
- HbA1c has been endorsed by clinical group & American Diabetes Association guidelines 2017, for diagnosis of Diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low HbA1c in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (Specially in Severe iron deficiency anaemia and hemolytic), chronic renal failure and liver disease. Clinical correlation suggested.
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (fructosamine) is recommended for testing of HbA1c.
 - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.

Note: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.
 c) Heterozygous state detected (D10/turbo is corrected for HbS and HbC trait).
 6. For known diabetic patients, following values can be considered as a tool for monitoring the glycemic control:
 Excellent control:- 6 - 7%,
 Fair to good control:- 7 - 8%,
 Unsatisfactory control:- 8 - 10%
 Poor control > 10%

End of Report



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Patient report

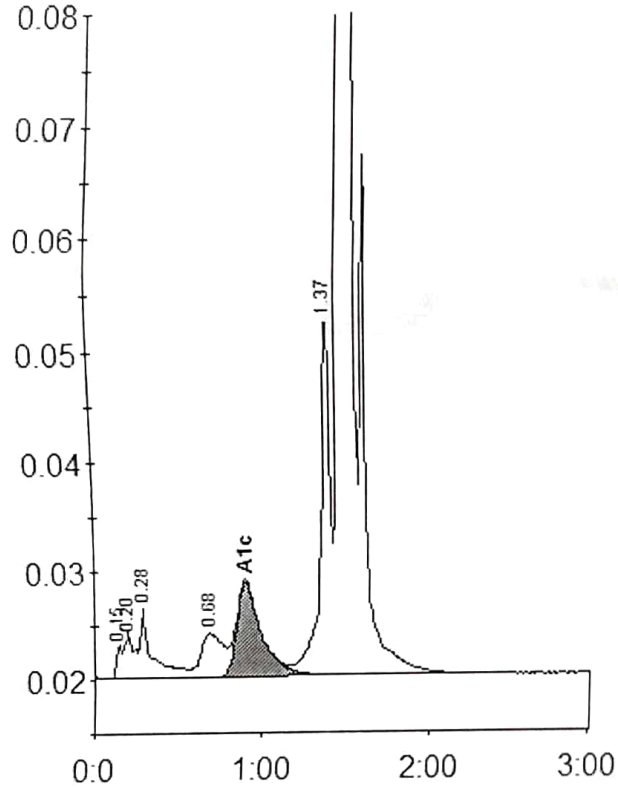
Bio-Rad
 D-10
 S/N: #DJ0A467747
 Sample ID:
 Injection date
 Injection #: 10
 Rack #: ---

DATE: 13/11/2021
 TIME: 19:51
 Software version: 4.30-2
 07H0047331A
 13/11/2021 18:55
 Method: HbA1c
 Rack position: 1

Mr. Samir Kumar Ojha
 (R)NMHK.2117544 45y/ M



07H0047331A
 EDTA Wh 13-11 09:39



Peak table - ID: 07H0047331A

Peak	R.time	Height	Area	Area %
Unknown	0.15	3153	7800	0.3
A1a	0.20	4399	11620	0.5
A1b	0.28	6415	37465	1.6
LA1c/CHb-1	0.68	4033	37428	1.6
A1c	0.89	8804	88430	6.1
P3	1.37	33320	127217	5.5
A0	1.45	635943	1998464	86.6
Total Area:			2308424	

Concentration:	%	mmol/mol
A1c	6.1	43

DIAGNOSTICS REPORT

Patient Name	: Mr. Samir Kumar Ojha	Order Date	: 13/11/2021 09:35
Age/Sex	: 45 Year(s)/Male	Report Date	: 13/11/2021 19:26
UHID	: NMHK.2117544	IP No	:
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CHEST X-RAY REPORT OF PA VIEW

Lung fields are clear. No focal parenchymal opacity is seen.

No appreciable pleural thickening / calcification is noted.

Costo-phrenic angles are normal.

Cardiac shadow appears normal.

Bilateral hilar shadows are normal.

No obvious bony abnormality is seen.



Dr.MADHUSHREE RAY NASKAR ,
MBBS,DMRD

Consultant Radiologist

RegNo: 57032

DIAGNOSTICS REPORT

Patient Name	: Mr. Samir Kumar Ojha	Order Date	: 13/11/2021 09:35
Age/Sex	: 45 Year(s)/Male	Report Date	: 13/11/2021 16:53
UHID	: NMHK.2117544	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 63/8 HARIPAD DUTTA LANE, TOLLYGANGE, Kolkata, West Bengal, 700017	Mobile	: 9798695088

ELECTROCARDIOGRAM REPORT (ECG)

HR	: 79 bpm
Rhythm	: Sinus
P wave	: Normal
PR Interval	: 158 msec
QRS axis	: Normal (36 Degree)
QRS duration	: 108 msec
QRS configuration	: RBBB
T wave	: Non specific changes
ST segment	: Non specific changes
QTc	: 416 msec
QT	: 362 msec

IMPRESSION:

- Sinus rhythm. Normal QRS axis.
 - Right Bundle Branch Block.
 - Non specific ST-T changes.
- Clinical correlation please.



Dr.INDIRA BANERJEE ,
MD,DNB,MRCPC (UK)

Board Certified Comprehensive
Echocardiographer (USA)

DIAGNOSTICS REPORT

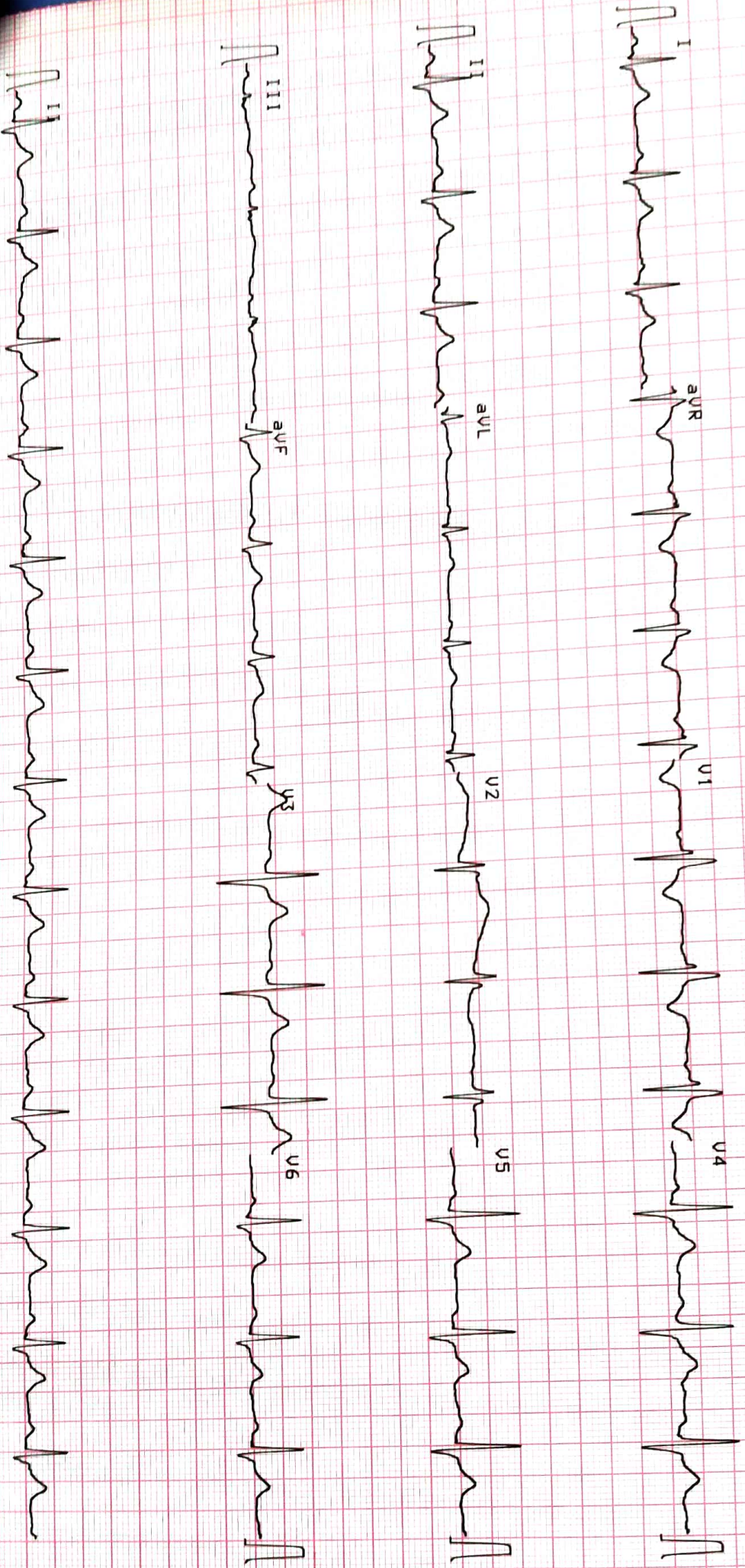
SAMIR KUMAR DJHA
2117544
45 years
M / F
kg

HR 79/min
Intervals:
RR 764 ms
P 184 ms
PR 158 ms
QRS 108 ms
QT 362 ms
QTc 416 ms
(Bazett)
10 mm/mV

Axis:
P 36°
QRS 36°
T 41°
P (II) 0.11 mV
S (U1) -1.10 mV
R (U5) 1.25 mV
Sokol. 2.35 mV

SINUS RHYTHM
INCOMPLETE RIGHT BUNDLE BRANCH BLOCK
RVH WITH REPOLARIZATION ABNORMALITY
6.02

UNCONFIRMED REPORT



10 mm/mV

HCOPY

0.05-25 Hz FS0 SCF SRS 1X.11.2021 11.09.10

NARAYAN MEMORIAL
UNCDPTOL BEWOLIO

07-10721102 1 25 01

DIAGNOSTICS REPORT

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2D ECHOCARDIOGRAPHY WITH M-MODE

MEASUREMENTS

2D and M-Mode :

IVS (d)	11 mm	Aorta (at sinuses)	29 mm
LVID (d)	46 mm	LA diameter	37 mm
LVPW (d)	11 mm	RVID (d) - basal	17 mm
LVID (s)	25 mm	TAPSE	22 mm
LVEF	62 %		

Estimated PASP = 25 mmHg

Mitral E/A = 1.15

FINDINGS

Left Ventricle :

Cavity size : Normal.

Wall thickness : Normal.

Segmental wall motion : No abnormality found.

Global systolic function : Normal. (EF = 62 %)

Diastolic function : Adequate.

Left Atrium : Normal sized; no clot in body of appendage.

Right Ventricle and Right Atrium : Normal sized; normal RV systolic function.

Mitral Valve : Normal leaflets, good excursion, normal subvalvular apparatus. No regurgitation / No MS.

Aortic valve : Structurally normal, trileaflet, normal motion, no regurgitation.

Pulmonary Valve : Normal structure, adequate opening.

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Tricuspid Valve :Normal structure, normal excursion. Trivial TR. TR gradient = 20 mmHg.

Interarterial and Interventricular Septum :No breach could be seen.

Aorta :Normal sized root and proximal aorta.

Pulmonary Artery :Normal, no pulmonary arterial hypertension.

Pericardium :Normal, no effusion.

Inferior Vena Cava :IVC normal diameter, > 50% respiratory variation.

Others :No thrombus, mass, vegetation seen.

IMPRESSION:

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 62 %).
- * Good RV systolic function (TAPSE = 22 mm)
- * Normal valve morphology.
- * Adequate LV diastolic function.
- * No pericardial effusion.
- * No pulmonary arterial hypertension.



Dr.INDIRA BANERJEE,
MD,DNB,MRCPC (UK)

Board Certified Comprehensive
Echocardiographer (USA)

SAMIR KUMAR OJHA-2117544

562110420016

PID NO: P562100393830
Age: 45.0 Year(s) Sex: Male



Reference: Dr.SELF
Sample Collected At:
Narayan memorial hospital
601 diamond harbour road 700034
PROCESSING LOCATION:- Metropolis
Healthcare Limited, 36, Syed Amir Ali
Avenue, 1st Floor, Beckbagan, Kolkata-
700017

VID: 562110420016
TEST REPORT
Registered On:
13/11/2021 05:31 PM
Collected On:
13/11/2021 5:31PM
Reported On:
13/11/2021 06:39 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
PSA- Prostate Specific Antigen (Serum,ECLIA)	0.691	ng/mL	Conventional for all ages: 0 - 4 40 - 49 yrs: 0 - 2.5

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-anti-chymotrypsin (PSA-ACT 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.

Comments: Patients on Biotin supplement may have interference in some immunoassays.

Reference: Arch Pathol Lab Med—Vol 141, November 2017. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

-- End of Report --

Results relate only to the sample as received. Refer to conditions of reporting over leaf.

* The Parameters marked with an * are not accredited by NABL.
† This test was outsourced to Metropolis Healthcare Ltd. Mumbai

Dr. Rajat Mukherjee
M.D (Pathology)



INNER HEALTH REVEALED



DIAGNOSTICS REPORT

Patient Name	: Mr. Samir Kumar Ojha	Order Date	: 13/11/2021 09:35
Age/Sex	: 45 Year(s)/Male	Report Date	: 13/11/2021 10:43
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Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
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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.

CD : Normal . CD measures 0.3 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 : 10.0 cm & Left kidney measures : 9.4 cm.

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

PROSTATE : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 3.3 cm x 2.9 cm x 2.6 cm. It weight approx 13 gm.

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PERITONEUM : : No free fluid is noted.

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

IMPRESSION : Mild fatty changes in liver.



Dr. MADHUSHREE RAY NASKAR ,
MBBS, DMRD

Consultant Radiologist

RegNo: 57032