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English

11-12-2021
11:38



2119002, NILAYAN CHATTOPADHYAY, M, 29 years
NARAYAN MEMORIAL HOSPIT/

DIAGNOSTICS REPORT

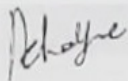
Patient Name	: Mr. Nilayan Chattopadhyay	Order Date	: 11/12/2021 10:41
Age/Sex	: 29 Year(s)/Male	Report Date	: 11/12/2021 17:27
UHID	: NMHK.2119002	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BELEDANGA RD., ,Kolkata, West Bengal, 700141	Mobile	: 7044342416

X-RAY REPORT OF CHEST PA

FINDINGS:

- Lung parenchyma shows no focal lesion. No general alteration of radiographic density. Apices are clear. Bronchovascular lung markings are within normal limits.
- Both the hila are normal in size, density and position.
- Mediastinum is central. Trachea is in midline.
- Domes of diaphragm are smoothly outlined. Position is within normal limits.
- Lateral costo-phrenic angles are clear.
- Cardiac size appears within normal limits. Margin is well visualised and cardiac silhouette is smoothly outlined. Shape is within normal limit.
- Bony thorax reveals no definite abnormality.

IMPRESSION:Normal Study.



Dr.MALA CHATTERJEE ,

MD Radio-Diagnosis

RegNo: Reg no. 38895

LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. Nilayan Chattopadhyay	Age/Sex	: 29 Year(s)/Male
UHID	: NMHK.2119002	Order Date	: 11/12/2021 10:41
Episode	: OP	Mobile No	: 7044342446
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BELEDANGA RD. , ,Kolkata,West Bengal ,700141		

Immunoassay

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0050694	Collection Date : 11/12/21 10:56	Ack Date :	Report Date : 11/12/21 17:58

THYROID FUNCTION TEST

SAMPLE : SERUM

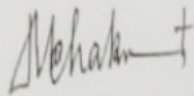
T3	1.16	ng/ml	0.6 - 1.8
ECLIA		ug/dL	5.4 - 11.7
T4	8.15		
ECLIA		uIU/ml	Adult Male – 0.27-5.50 Adult Female – 0.27-5.50 Newborns - <25 Upto 12 years – 0.3-5
TSH	1.22		

ECLIA

Interpretations:

- 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 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)
- There is no high dose hook effect at TSH concentrations upto 1000 µmol/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 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).
- 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



Dr. MAINAK CHAKRABORTY
MBBS, MD(PATH)
 (CONSULTANT PATHOLOGIST)

Checked By

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Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0050695	Collection Date : 11/12/21 10:56	Ack Date :	Report Date : 11/12/21 17:58

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

TEST	RESULT	UNITS	REF RANGE
HAEMOGLOBIN (HB)	14.3	gm/dl	13 - 17
RBC COUNT	4.87	$\times 10^6/\mu\text{l}$	4.5 - 5.5
TOTAL WBC COUNT	6.61	$10^3/\text{cmm}$	4 - 10
PLATELET COUNT	220	$10^3/\text{cmm}$	150 - 410
PCV	43	%	40 - 50
MCV	88	fl	83 - 101
MCH	29	pg	27 - 32
MCHC	33	gm/dl	31.5 - 34.5
ESR	05	mm/hr	≤ 10

DIFFERENTIAL COUNT

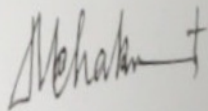
TEST	RESULT	UNITS	REF RANGE
NEUTROPHILS	57	%	40 - 80
LYMPHOCYTES	39	%	20 - 40
MONOCYTES	02	%	2 - 10
EOSINOPHILS	02	%	1 - 6
BASOPHILS	00	%	0 - 2

PERIPHERAL BLOOD SMEAR

RBC

Normocytic normochromic

End of Report



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Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0050695	Collection Date : 11/12/21 10:56	Ack Date :	Report Date : 11/12/21 18:33

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

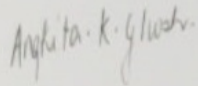
BLOOD GROUP

RH TYPE

' A '

POSITIVE

End of Report



Dr. ANGKITA K. GHOSH
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(CONSULTANT PATHOLOGIST)
RegNo: 82734
Checked By





LABORATORY INVESTIGATION REPORT

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Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0050696	Collection Date : 11/12/21 10:58	Ack Date :	Report Date : 11/12/21 17:58

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	60	ml	
COLOUR	PALE STRAW		
APPEARANCE	SLIGHTLY HAZY		1.010 - 1.030
SPECIFIC GRAVITY	1.010		
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	<5/HPF

MICROSCOPIC EXAMINATION

PUS CELLS	1-2/HPF	<20/HPF
EPITHELIAL CELLS	1-2/HPF	
RBC	NIL	ABSENT
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	

Please correlate clinically.

End of Report

Dr. MAINAK CHAKRABORTY
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 (CONSULTANT PATHOLOGIST)

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Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0050694	Collection Date : 11/12/21 10:56	Ack Date :	Report Date : 11/12/21 17:58

KIDNEY FUNCTION TEST

SERUM CREATININE

SAMPLE : SERUM		mg/dl	0.7 - 1.2
SERUM CREATININE	0.7		
<i>Jaffe Gen2 Compensated</i>			

BLOOD UREA NITROGEN

BLOOD UREA NITROGEN	9.0	mg/dl	6 - 20
<i>Calculated</i>			

URIC ACID

SAMPLE : SERUM		mg/dl	3.4 - 7
URIC ACID	6.3		
<i>Enzymatic Colorimetric</i>			

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

TOTAL BILIRUBIN	1.1 ▲	mg/dl	<1.1
<i>Diazo Method</i>		mg/dl	0 - 0.2
DIRECT BILIRUBIN	0.4 ▲	mg/dl	0.2 - 0.9
<i>Diazo Method</i>		U/L	0 - 34
INDIRECT BILIRUBIN	0.7	U/L	0 - 34
<i>Calculated</i>		U/L	0 - 31
SGPT (ALT)	71 ▲	U/L	0 - 31
<i>IFCC Without Pyridoxal Phosphate</i>		U/L	53 - 128
SGOT (AST)	34 ▲	U/L	53 - 128
<i>IFCC Without Pyridoxal Phosphate</i>		g/dl	6.4 - 8.2
ALKALINE PHOSPHATASE	80	g/dl	6.4 - 8.2
<i>IFCC</i>		gm/dl	3.5 - 5.2
TOTAL PROTEIN	7.5	gm/dl	3.5 - 5.2
<i>Biuret</i>		g/dl	2 - 3.5
ALBUMIN	5.2	g/dl	2 - 3.5
<i>Bromocresol Green</i>		-	1.1 - 2.5
GLOBULIN	2.3		
<i>Calculated</i>		U/L	8 - 61
ALBUMIN:GLOBULIN	2.3		
<i>Calculated</i>			
GGT	27		

LABORATORY INVESTIGATION REPORT

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Enzymatic colorimetric assay

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL	192	mg/dl	Desirable <200 Borderline 200-239 High >=240
<i>CHOD-PAP</i>			
HDL CHOLESTEROL	37 ▼	mg/dl	40 - 60
<i>Homogenous Enzymatic Colorimetric</i>			
LDL CHOLESTEROL	136	mg/dl	Optimal < 100 Borderline 130
<i>Homogenous Enzymatic Colorimetric</i>			
VLDL	19	mg/dl	0 - 30
<i>CALCULATED</i>			
CHOLESTEROL-HDL RATIO	5.19	-	-
LDL-HDL RATIO	3.68	mg/dl	Desirable <150 Borderline 150 - 200 High >200
TRIGLYCERIDES	103		

Enzymatic Colorimetric

Sample No : 07H0050696B Collection Date : 11/12/21 10:58 Ack Date : Report Date : 11/12/21 17:58

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING	88	mg/dl	70 - 109
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Hexokinase

Sample No : 07H0050749B Collection Date : 11/12/21 14:20 Ack Date : Report Date : 12/12/21 15:18

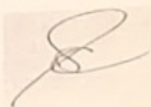
BLOOD SUGAR(PP)

SAMPLE : PLASMA

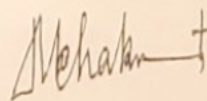
BLOOD SUGAR PP	94	mg/dl	70.00 - 140.00
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Hexokinase

End of Report



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



Dr.MAINAK CHAKRABORTY
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

Checked By

LABORATORY INVESTIGATION REPORT

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Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0050695A	Collection Date : 11/12/21 10:56	Ack Date :	Report Date : 13/12/21 12:12

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

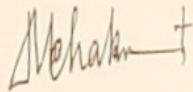
SAMPLE : EDTA BLOOD

HBA1C	5.2	%	Non-diabetic : 4-6
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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 glycemc control:
 Excellent control:- 6 - 7%,
 Fair to good control:- 7 - 8%,
 Unsatisfactory control:- 8 - 10%
 Poor control >10%

End of Report




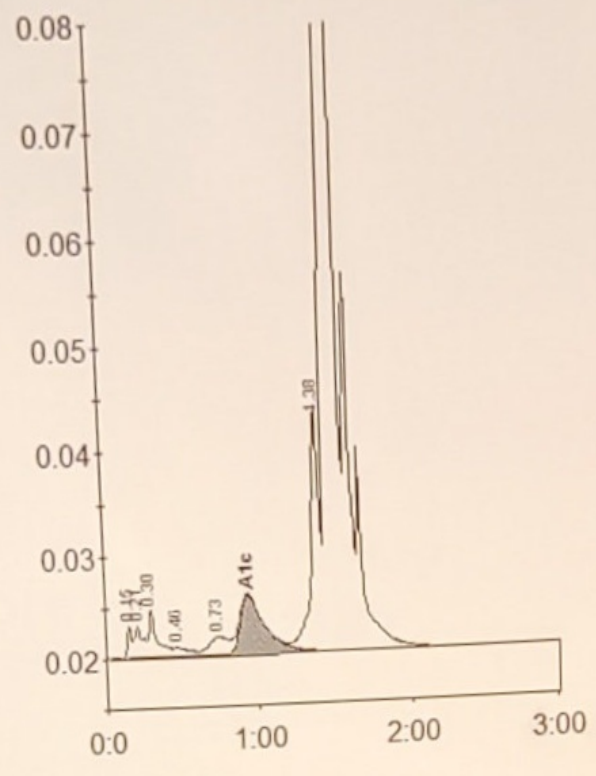
Dr. MAINAK CHAKRABORTY
MBBS, MD(PATH)
 (CONSULTANT PATHOLOGIST)

Checked By

report
 micRad
 D-10
 S/N: #DJ0A467747
 Sample ID:
 Injection date
 Injection #: 6
 Rack #: ---

DATE: 12/12/2021
 TIME: 15:11
 Software version: 4.30-2
 07H0050695A
 12/12/2021 13:42
 Method: HbA1c
 Rack position: 5

Mr. Nilayan Chattopadhyay
 (R)NPHK.2119002 29y/ n

 07H0050695A
 EDTA Wh 11-12 10:56



Peak table - ID: 07H0050695A

Peak	R.time	Height	Area	Area %
Unknown	0.15	3254	6934	0.4
A1a	0.21	3069	12149	0.7
A1b	0.30	4759	18803	1.1
F	0.46	943	7085	0.4
LA1c/CHb-1	0.73	1860	16790	0.9
A1c	0.93	5918	67329	5.2
P3	1.38	24233	95244	5.4
A0	1.45	522340	1543279	87.3
Total Area:		1767614		

Concentration:	%	mmol/mol
A1c	5.2	34

DIAGNOSTICS REPORT

Patient Name	: Mr. Nilayan Chattopadhyay	Order Date	: 11/12/2021 10:41
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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 1.0 cm.

CD : Normal . CD 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 : 11.5 cm & Left kidney measures : 10.5 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 3.6 cm x 3.2 cm x 2.3 cm. It weight approx 19 gm.

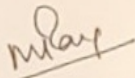
DIAGNOSTICS REPORT

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PERITONEUM : : No free fluid is noted.

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

IMPRESSION : Fatty changes in liver.



Dr. MADHUSHREE RAY NASKAR ,
MBBS,DMRD

Consultant Radiologist

RegNo: 57032

DIAGNOSTICS REPORT

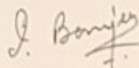
Patient Name	: Mr. Nilayan Chattopadhyay	Order Date	: 11/12/2021 10:41
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ELECTROCARDIOGRAM REPORT (ECG)

HR : 69 bpm
Rhythm : Sinus
P wave : Normal
PR Interval : 170 msec
QRS axis : Left axis (-7 Degree)
QRS duration : 76 msec
QRS configuration : Normal
T wave : Non specific changes
ST segment : Non specific changes
QTc : 402 msec
QT : 374 msec

IMPRESSION:

- Sinus rhythm. Left QRS axis.
- Non specific ST-T changes.
Clinical correlation please.



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

Board Certified Comprehensive
Echocardiographer (USA)

NILAYAN CHRISTOPHER

2119882

29 years Male

CM / kg

HR 69/min

RR 871 ms

PR 178 ms

QR5 76 ms

QT 374 ms

QTc 482 ms (Bazett)

18 mm/mV

P axis: 53°

QRS -7°

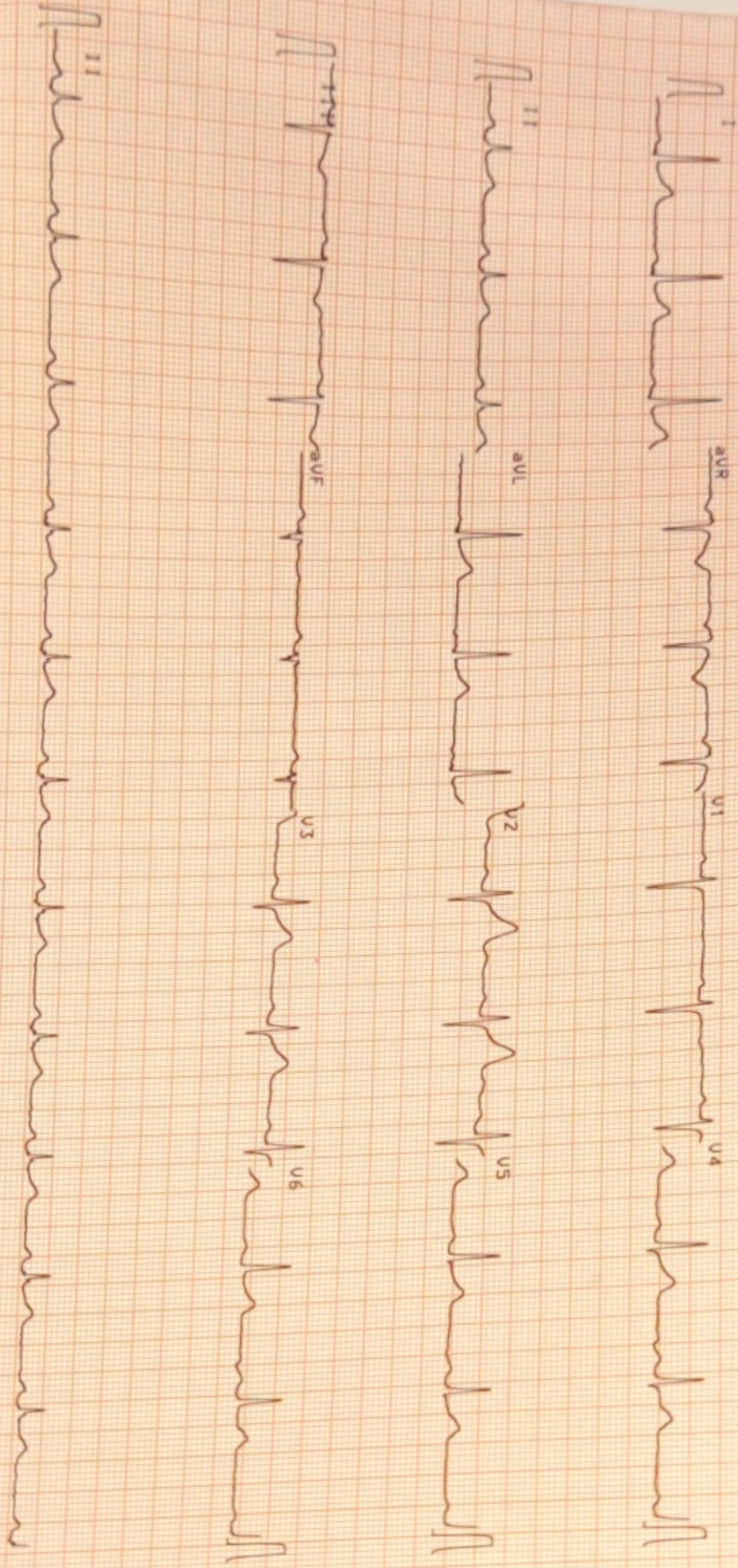
T 8°

SINUS RHYTHM
LEFTWARD AXIS
OTHERWISE NORMAL ECG

6:02

UNCONFIRMED REPORT

10 mm/mV



0.05-25 Hz FS0 SSF S85 11.12.2021 11:58:02

NARAYAN MEMORIAL HOSPITAL, BEMBLA

RT-102plus 1.25-C1

1 218

DIAGNOSTICS REPORT

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2D ECHOCARDIOGRAPHY WITH M-MODE

MEASUREMENTS

2D and M-Mode :

IVS (d)	10 mm	Aorta (at sinuses)	27 mm
LVID (d)	49 mm	LA diameter	35 mm
LVPW (d)	10 mm	RVID (d) - basal	15 mm
LVID (s)	28 mm	TAPSE	26 mm
LVEF	64 %		

Estimated PASP = 23 mmHg

FINDINGS

Left Ventricle :

Cavity size : Normal.
Wall thickness : Normal.
Segmental wall motion : No abnormality found.
Global systolic function : Normal (EF = 64 %)
Diastolic function : Normal.

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 = 18 mmHg.

Interartial and Interventricular Septum :No breech could be seen.

Aorta :Normal sized root and proximal aorta.

Pulmonary Artery :Normal, no pulmonary arterial hypertension.

Pericardium :Normal, no effusion.

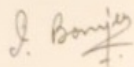
Inferior Vena Cava :IVC normal diameter, > 50% respiratory variation.

Others :No thrombus, mass, vegetation seen.

IMPRESSION:

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 64 %).
- * Good RV systolic function (TAPSE = 26 mm).
- * Normal valve morphology.
- * Normal LV diastolic function.
- * No pericardial effusion.
- * No pulmonary arterial hypertension.



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

Board Certified Comprehensive
Echocardiographer (USA)

