

### CHECK LIST

NAME		PATHOLOGY/PP
OP		ECG/PFT
AGE		ECHO/TMT
DATE		USG / CXR
PACKAGE		URINE / STOOL
REFERRED BY		MAMMO/ PAP
HT	165 cm	EYE/ DENTAL
WT	69 kg	GP CONSULTATION
BP	120/80 mmHg	DIETITION
PULSE	85 bpm	CARDIOLOGIST
WAIST	86.5 cm	GYNECOLOGIST
HIP	93 cm	DENTAL
RESPIRATORY RATE		
CHEST (INHALE)	92 cm	
CHEST (EXHALE)	90 cm	
ABDOMEN	89 cm	

SpO<sub>2</sub> - 99%



भारत सरकार



आधार

भारतीय विशिष्ट पहचान प्राधिकरण

भारत सरकार  
Unique Identification Authority of India  
Government of India

नामांकन क्रम/ Enrolment No.: 2090/73384/00011

Download Date: 18/08/2017

To  
अमित कुमार  
Amit Kumar  
S/O Onkar Sharan Bharti  
village post harda khurd  
vijaya bank  
Harda  
Harda Madhya Pradesh - 461331  
7828612600

Generation Date: 28/07/2017

Signature valid

Digitally signed by  
UNIQUE IDENTIFICATION  
AUTHORITY OF INDIA 03  
Date: 2017.08.18 21:02:46  
IST



आपका आधार क्रमांक / Your Aadhaar No. :

9427 4739 0321

मेरा आधार, मेरी पहचान



भारत सरकार  
Government of India



अमित कुमार  
Amit Kumar  
जन्म तिथि/DOB: 10/12/1983  
पुरुष/ MALE

9427 4739 0321



मेरा आधार, मेरी पहचान



## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. Amit Kumar	<b>Age/Sex</b> : 39 Year(s) / Male
<b>UHID</b> : NMHK.2204277	<b>Order Date</b> : 25/03/2023 09:22
<b>Episode</b> : OP	<b>Mobile No</b> : 7828612600
<b>Ref. Doctor</b> : NMH	<b>DOB</b> : 01/01/1984
<b>Address</b> : BLOCK B-3, FLAT NO-2, BIREN ROY ROAD , BEHALA CHOWRASTA ,Kolkata, West Bengal ,700 034	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

### Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108323	Collection Date : 25/03/23 09:41	Ack Date : 25/03/2023 10:42	Report Date : 25/03/23 17:24

#### BLOOD GROUPING & Rh TYPING

##### SAMPLE : EDTA BLOOD

BLOOD GROUP : 'O'

Method - Agglutination forward & Reverse

RH TYPE : POSITIVE

#### THYROID FUNCTION TEST

##### SAMPLE : SERUM

T3	1.18	ng/ml	0.60 - 1.80
T4	8.34	ug/dL	5.40 - 11.70
TSH	2.44	uIU/ml	Adult Male - 0.27-5.50 Adult Female - 0.27-5.50 Newborns - <25 Upto 12 years - 0.3-5

Method - 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 (triglycerid es < 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).



## LABORATORY INVESTIGATION REPORT

**Patient Name** : Mr. Amit Kumar

**UHID** : NMHK.2204277

**Episode** : OP

**Ref. Doctor** : NMH

**Address** : BLOCK B-3, FLAT NO-2, BIREN ROY ROAD ,  
BEHALA CHOWRASTA ,Kolkata, West Bengal ,700  
034

**Age/Sex** : 39 Year(s) / Male

**Order Date** : 25/03/2023 09:22

**Mobile No** : 7828612600

**DOB** : 01/01/1984

**Facility** : NARAYAN MEMORIAL HOSPITAL

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 : 07H0108323	Collection Date : 25/03/23 09:41	Ack Date : 25/03/2023 11:40	Report Date : 25/03/23 14:12

#### SERUM CREATININE

##### SAMPLE : SERUM

SERUM CREATININE 0.7 mg/dl 0.7 - 1.2  
*Method - Jaffe Gen2 Compensated*

#### LIVER FUNCTION TEST ( LFT )

##### SAMPLE : SERUM

TOTAL BILIRUBIN 0.6 mg/dl 0 - 1.1  
*Method - Diazo Method*

DIRECT BILIRUBIN 0.2 mg/dl 0 - 0.2  
*Method - Diazo Method*

INDIRECT BILIRUBIN 0.4 mg/dl 0.2 - 0.9  
*Method - Calculated*

SGPT (ALT) 29 U/L 0 - 34  
*Method - IFCC Without Pyridoxal Phosphate*

SGOT (AST) 23 U/L 0 - 31  
*Method - IFCC Without Pyridoxal Phosphate*

ALKALINE PHOSPHATASE 106 U/L 53 - 128  
*Method - IFCC*

TOTAL PROTEIN 7.1 g/dl 6.4 - 8.2  
*Method - Biuret*

ALBUMIN 4.6 gm/dl 3.5 - 5.2  
*Method - Bromocresol Green*

GLOBULIN 2.5 g/dl 2 - 3.5  
*Method - Calculated*

ALBUMIN:GLOBULIN 1.8 - 1.1 - 2.5  
*Method - Calculated*

GGT 20 U/L 8 - 61



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Method - Enzymatic colorimetric assay

### BLOOD UREA NITROGEN

BLOOD UREA NITROGEN 12.6 mg/dl 6 - 20

Method - Calculated

### LIPID PROFILE

#### SAMPLE : SERUM

TOTAL CHOLESTEROL 164 mg/dl Desirable <200 |  
Borderline 200-239 |  
High >=240

Method - CHOD-PAP

HDL CHOLESTEROL 47 mg/dl 40 - 60

Method - Homogenous Enzymatic Colorimetric

LDL CHOLESTEROL 100 mg/dl Optimal < 100 |  
Borderline 130

Method - Homogenous Enzymatic Colorimetric

VLDL 17 mg/dl 0 - 30

Method - CALCULATED

CHOLESTEROL-HDL RATIO 3.49

LDL-HDL RATIO 2.13

TRIGLYCERIDES 87 mg/dl Desirable <150 |  
Borderline 150 - 200 |  
High >200

Method - Enzymatic Colorimetric

### URIC ACID

#### SAMPLE : SERUM

URIC ACID 4.0 mg/dl 3.4 - 7

Method - Enzymatic Colorimetric

#### SAMPLE : SERUM

RESULT 18.0

Sample No : 07H0108323A Collection Date : 25/03/23 09:41 Ack Date : 25/03/2023 11:15 Report Date : 25/03/23 14:12

### GLYCOSYLATED HAEMOGLOBIN (HBA1C)

#### SAMPLE : EDTA BLOOD



## LABORATORY INVESTIGATION REPORT

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<b>Episode</b> : OP	<b>Mobile No</b> : 7828612600
<b>Ref. Doctor</b> : NMH	<b>DOB</b> : 01/01/1984
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HBA1C 6.4

### Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
- HbA1c has been endorsed by clinical groups & 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 severe iron deficiency anaemia & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- Interference of Haemoglobinopathies in HbA1c estimation.  
A. For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.  
B. Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.  
C. Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- 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 %.

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

Sample No : 07H0108323B Collection Date : 25/03/23 09:41 Ack Date : 25/03/2023 12:11 Report Date : 25/03/23 14:12

### BLOOD SUGAR(F)

#### SAMPLE : PLASMA

BLOOD SUGAR FASTING 122 ▲ mg/dl 70 - 109

Method - Hexokinase

Sample No : 07H0108385B Collection Date : 25/03/23 13:34 Ack Date : 25/03/2023 14:04 Report Date : 25/03/23 16:14

### BLOOD SUGAR(PP)

#### SAMPLE : PLASMA

BLOOD SUGAR PP 141 ▲ mg/dl 70.00 - 140.00

Method - Hexokinase

End of Report

Dr.S. Chatterjee  
MD, MBBS, FAACC

## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. Amit Kumar	<b>Age/Sex</b> : 39 Year(s) / Male
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### Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108323	Collection Date : 25/03/23 09:41	Ack Date : 25/03/2023 10:42	Report Date : 25/03/23 17:24

#### BLOOD GROUPING & Rh TYPING

##### SAMPLE : EDTA BLOOD

BLOOD GROUP ' O '

Method - Agglutination forward & Reverse

RH TYPE POSITIVE

#### THYROID FUNCTION TEST

##### SAMPLE : SERUM

T3	1.18	ng/ml	0.60 - 1.80
Method - ECLIA			
T4	8.34	ug/dL	5.40 - 11.70
Method - ECLIA			
TSH	2.44	uIU/ml	Adult Male - 0.27-5.50 Adult Female - 0.27-5.50 Newborns - <25 Upto 12 years - 0.3-5

Method - 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.
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End of Report

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

Checked By

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



## LABORATORY INVESTIGATION REPORT

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### Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108323	Collection Date : 25/03/23 09:41	Ack Date : 25/03/2023 12:53	Report Date : 26/03/23 12:20

#### URINE FOR SUGAR FASTING<sup>a</sup>

##### SAMPLE : URINE

RESULT PRESENT

Sample No : 07H0108385	Collection Date : 25/03/23 13:34	Ack Date : 25/03/2023 17:13	Report Date : 26/03/23 12:21
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#### URINE FOR SUGAR PP

##### SAMPLE : URINE

RESULT PRESENT

End of Report

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

Checked By

## LABORATORY INVESTIGATION REPORT

**Patient Name** : Mr. Amit Kumar **Age/Sex** : 39 Year(s)/Male  
**UHID** : NMHK.2204277 **Order Date** : 25/03/2023 09:22  
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BEHALA CHOWRASTA , Kolkata, West Bengal , 700 **Facility** : NARAYAN MEMORIAL HOSPITAL  
034

### Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108328	Collection Date : 25/03/23 09:55	Ack Date : 25/03/2023 12:53	Report Date : 27/03/23 11:18

#### STOOL FOR R/E

##### SAMPLE : STOOL

##### PHYSICAL EXAMINATION

COLOUR. BROWNISH  
CONSISTENCY SOFT  
MUCUS PRESENT  
VISIBLE BLOOD NOT FOUND  
ADULT PARASITE NOT FOUND

##### CHEMICAL EXAMINATION

REACTION ACIDIC

##### MICROSCOPIC EXAMINATION

PUS CELLS 0-1 <5/HPF  
VEG CELL PRESENT  
RBC ABSENT  
OVA NOT FOUND  
PARASITES NOT FOUND  
CYSTS NOT FOUND  
BACTERIAL FLORA PRESENT  
FAT GLOBULES ABSENT  
STARCH GRANULES PRESENT

Please correlate clinically.

End of Report



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



## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. Amit Kumar	<b>Age/Sex</b> : 39 Year(s)/Male
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### Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108323	Collection Date : 25/03/23 09:41	Ack Date : 25/03/2023 10:42	Report Date : 27/03/23 11:18

#### COMPLETE HAEMOGRAM ( CBC )

##### SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB) <i>Colorimetric method (Cyn Meth)</i>	14.6	gm/dl	13 - 17
RBC COUNT <i>Electrical Impedance Method</i>	5.3	$\times 10^6/\mu\text{l}$	4.5 - 5.5
TOTAL WBC COUNT <i>Electrical Impedance Method</i>	9.0	$10^3/\text{cmm}$	4 - 10
PLATELET COUNT <i>Electrical Impedance Method</i>	240	$10^3/\text{cmm}$	150 - 410
PCV <i>RBC pulse ht. detection method</i>	45	%	40 - 50
MCV <i>calculated</i>	85	fl	83 - 101
MCH <i>Calculated</i>	28	pg	27 - 32
MCHC <i>Calculated</i>	33	gm/dl	31.5 - 34.5
ESR <i>Modified Westergren Method</i>	05	%	0 - 10
<b>DIFFERENTIAL COUNT</b>			
NEUTROPHILS <i>Microscopy</i>	63	%	40 - 80
LYMPHOCYTES <i>Microscopy</i>	29	%	20 - 40
MONOCYTES <i>Microscopy</i>	05	%	2 - 10



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EOSINOPHILS 03 % 1 - 6  
*Microscopy*

BASOPHILS 00 % 0 - 2  
*Microscopy*

### PERIPHERAL BLOOD SMEAR

RBC Normocytic normochromic  
WBC Within normal limits  
PLATELET Adequate

End of Report

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MBBS, MD(PATH)  
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### Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108323	Collection Date : 25/03/23 09:41	Ack Date : 25/03/2023 12:53	Report Date : 27/03/23 11:18

#### URINE FOR R/E

##### SAMPLE : URINE

##### PHYSICAL EXAMINATION

VOLUME	25	ml	
COLOUR	PALE STRAW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.015		1.010 - 1.030
REACTION(pH)	ACIDIC (pH-6.0)		

##### CHEMICAL EXAMINATION

SUGAR	PRESENT(++)	ABSENT
ALBUMIN.	ABSENT	ABSENT
BLOOD	ABSENT	ABSENT
KETONE	ABSENT	ABSENT
BILE SALT	ABSENT	ABSENT
BILE PIGMENTS	ABSENT	ABSENT

##### MICROSCOPIC EXAMINATION

PUS CELLS	1-2/HPF	<5/HPF
EPITHELIAL CELLS	1-2/HPF	<20/HPF
RBC	ABSENT	ABSENT
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT
OTHERS	SPERMATOZOA PRESENT	

Please correlate clinically.

End of Report





## LABORATORY INVESTIGATION REPORT

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

Checked By





## DIAGNOSTICS REPORT

Patient Name	: Mr. Amit Kumar	Order Date	: 25/03/2023 09:22
Age/Sex	: 39 Year(s)/Male	Report Date	: 25/03/2023 15:30
UHID	: NMHK.2204277	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BLOCK B-3, FLAT NO-2, BIREN ROY ROAD, BEHALA CHOWRASTA, Kolkata, West Bengal, 700034	Mobile	: 7828612600

### USG REPORT OF WHOLE ABDOMEN (SCREENING)

**LIVER** : Liver is normal in size and 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 : 10.3 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 2.6 cm x 2.6 cm x 2.5 cm. It weight approx 8.9 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 (Grade I).

**Dr. MADHUSHREE RAY NASKAR, MBBS  
, DMRD**

Consultant Radiologist

RegNo: 57032



## DIAGNOSTICS REPORT

Patient Name	: Mr. Amit Kumar	Order Date	: 25/03/2023 09:22
Age/Sex	: 39 Year(s)/Male	Report Date	: 25/03/2023 20:04
UHID	: NMHK.2204277	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BLOCK B-3, FLAT NO-2, BIREN ROY ROAD, BEHALA CHOWRASTA, Kolkata, West Bengal, 700034	Mobile	: 7828612600

### STRESS TEST (TREAD MILL)

The patient exercised according to the BRUCE for 8.07 mins, achieving a work level of Max. METS: 10.20 The resting heart rate of 78 bpm rose to a maximal heart rate of 160 (88% of Pr.MHR) bpm. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise stress test was stopped due to THR achieved.

#### Interpretation

Summary: Resting ECG: normal. Functional capacity: normal. HR response to Exercise: appropriate. BP response to Exercise: appropriate. Chest pain: none. Arrhythmia: none. ST changes: Non-specific.

#### Conclusion

**EXERCISE STRESS TEST IS NEGATIVE FOR EVIDENCE OF PROVOCABLE MYOCARDIAL ISCHAEMIA.  
GOOD EFFORT TOLERANCE.**  
Please correlate clinically.

Dr. CHANCHAL KR KUNDU, MBBS, MD (CAL), DM (CARDIOLOGY)

RegNo: 58024

## EXERCISE STRESS TEST REPORT

Patient Name: MR.AMIT KUMAR  
Regn. ID.: NMHK 2304277  
Height: 165 cm.  
Weight: 69 kg

DOB: 01-01-1984  
Age: 39 yrs.  
Gender: Male  
Race: Indian

Study Date: 25.03.2023  
Test Type: Treadmill Stress Test  
Protocol: BRUCE

Attending Physician: Dr. Sourav basu  
Reporting Physician: Dr. Indira Banerjee  
Technician: SHEKHAR SARKAR,Technologist

**Medication:**  
Jardiance met 12.5/500

**Medical History:**  
Diabetes  
**Reason for Exercise Test:**  
Health checkup

Phase Name	Stage Name	Time in stage	Mets	Speed (km/h)	Grade (%)	HR (bpm)	BP (mmHg)
PRETEST	SUPINE	0.26	1.0	0.0	0.00	78	120/80
	STANDING	0.27	1.0	0.0	0.00	90	120/80
	HYPERVEN.	0.40	1.0	0.0	0.00	114	120/80
EXERCISE	STAGE 1	3.0	4.6	1.7	10.00	121	140/80
	STAGE 2	3.0	7.0	2.5	12.00	140	140/80
	PEAK EX	2.07	10.2	3.4	14.00	160	150/80
RECOVERY	EARLY	1.0	1.8	1.0	0.00	131	150/80
	LATE	5.07	1.0	0.0	0.00	95	120/80

The patient exercised according to the BRUCE for 8.07 mins, achieving a work level of Max. METS: 10.20 The resting heart rate of 78 bpm rose to a maximal heart rate of 160 (88% of Pr.MHR) bpm. The resting blood pressure of 120/80 mmHg, rose to a maximum blood pressure of 150/80 mmHg. The exercise stress test was stopped due to THR achieved.

### Interpretation

Summary: Resting ECG: normal. Functional capacity: normal. HR response to Exercise: appropriate. BP response to Exercise: appropriate. Chest pain: none. Arrhythmia: none. ST changes: Non-specific.

### Conclusion

**EXERCISE STRESS TEST IS NEGATIVE FOR EVIDENCE OF PROVOCABLE MYOCARDIAL ISCHAEMIA. GOOD EFFORT TOLERANCE.**

*Please correlate clinically.*

AMIT KUMAR (39 M)

Narayan Memorial Hospital, Behala

ID: 2204277

Date: 25-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 26 s

HR: 78 bpm

Protocol: Bruce

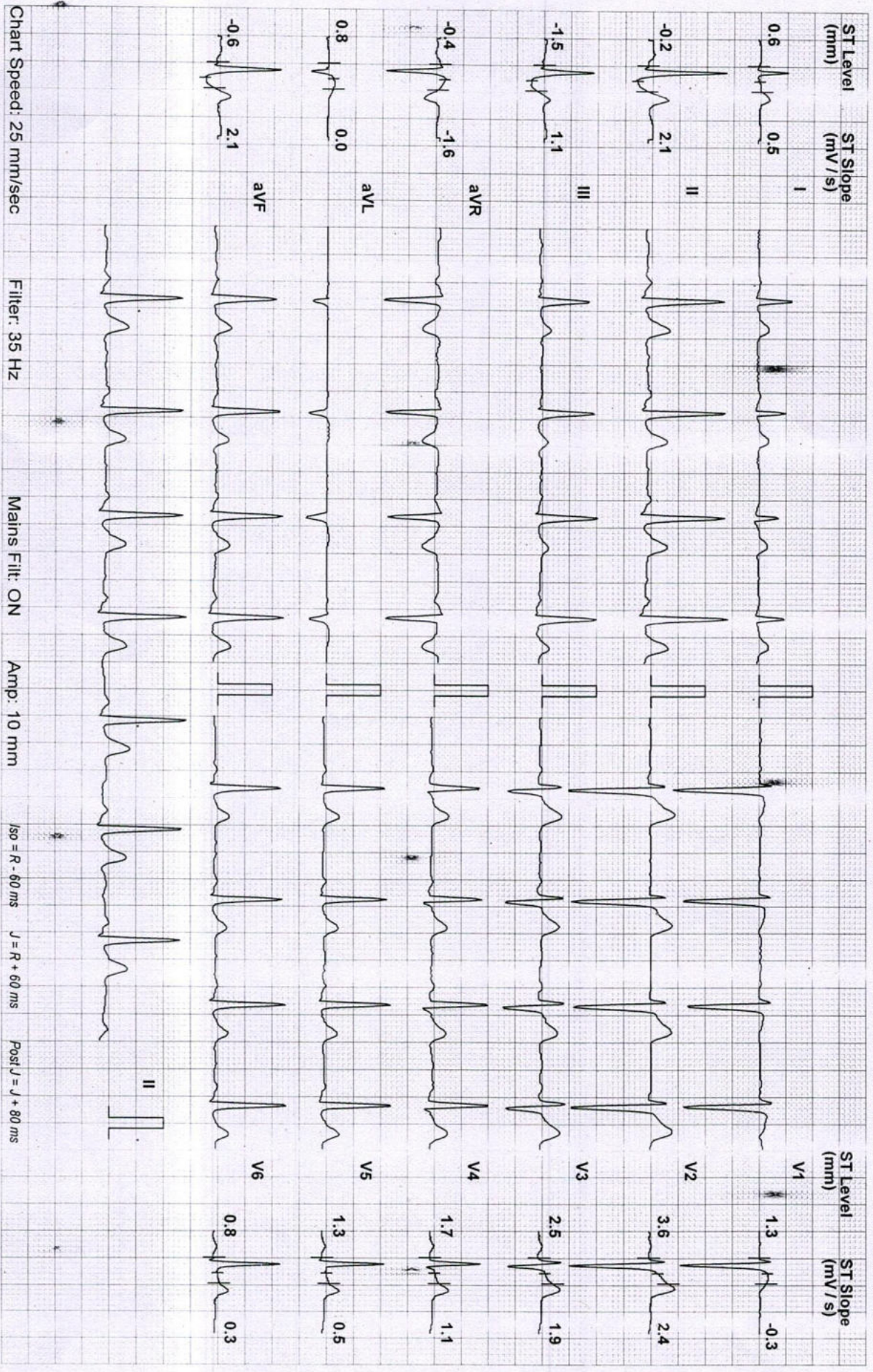
Stage: Supine

Speed: 0 mph

Grade: 0 %

(THR: 153 bpm)

B.P: 120 / 80



AMIT KUMAR (39 M)

Narayan Memorial Hospital, Behala

ID: 2204277

Date: 25-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 27 s HR: 90 bpm

Protocol: Bruce

Stage: Standing

Speed: 0 mph

Grade: 0 %

(THR: 153 bpm)

B.P: 120 / 80

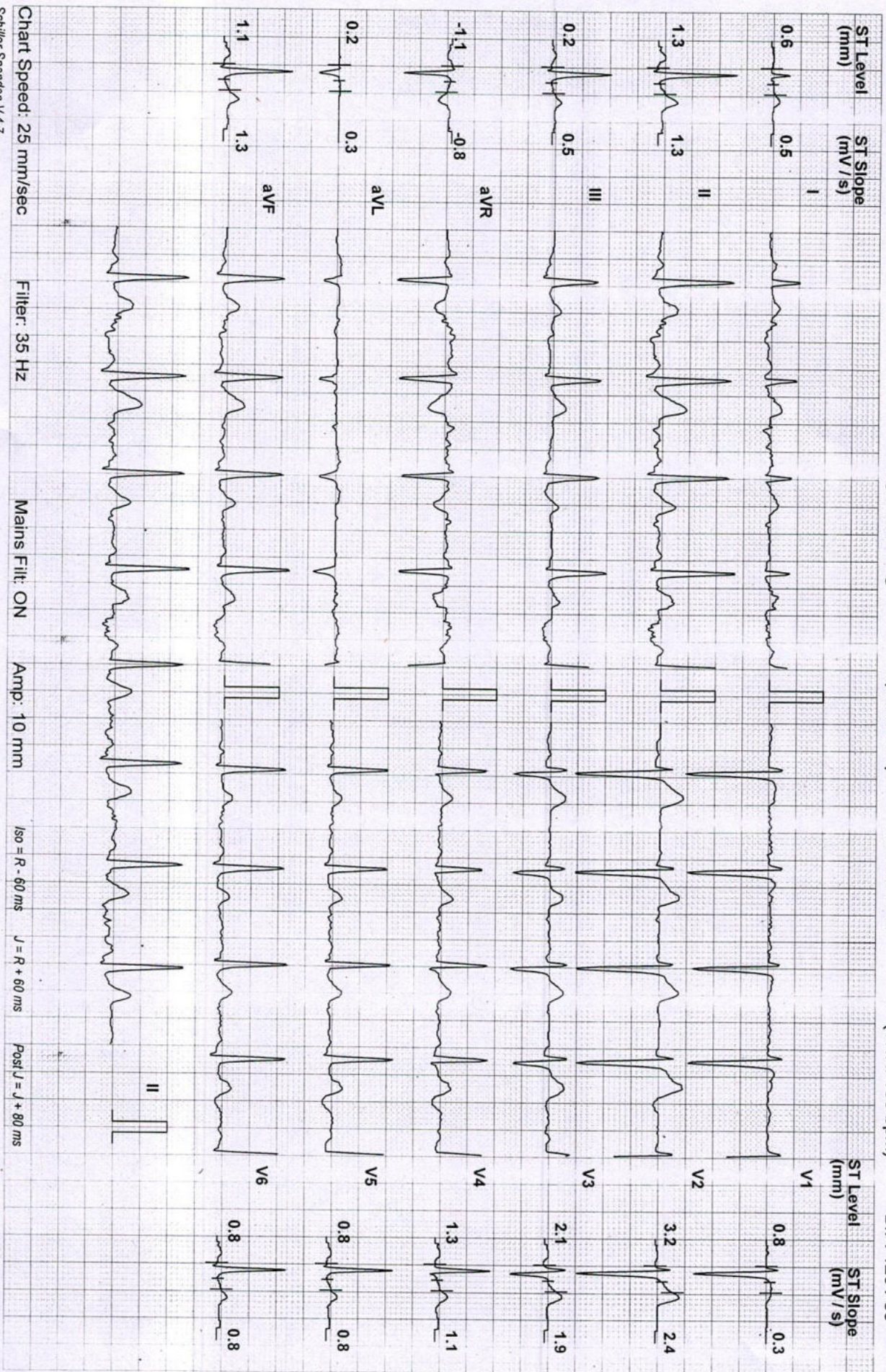


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Fil: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 80 ms

Schiller Spandan V 4.7

# Narayan Memorial Hospital, Behala

AMIT KUMAR (39 M)

ID: 2204277

Date: 25-Mar-23

Exec Time : 0 m 0 s

Stage Time : 0 m 40 s HR: 114 bpm

Protocol: Bruce

Stage: Hyperventilation

Speed: 0 mph

Grade: 0%

(THR: 153 bpm)

B.P: 120 / 80

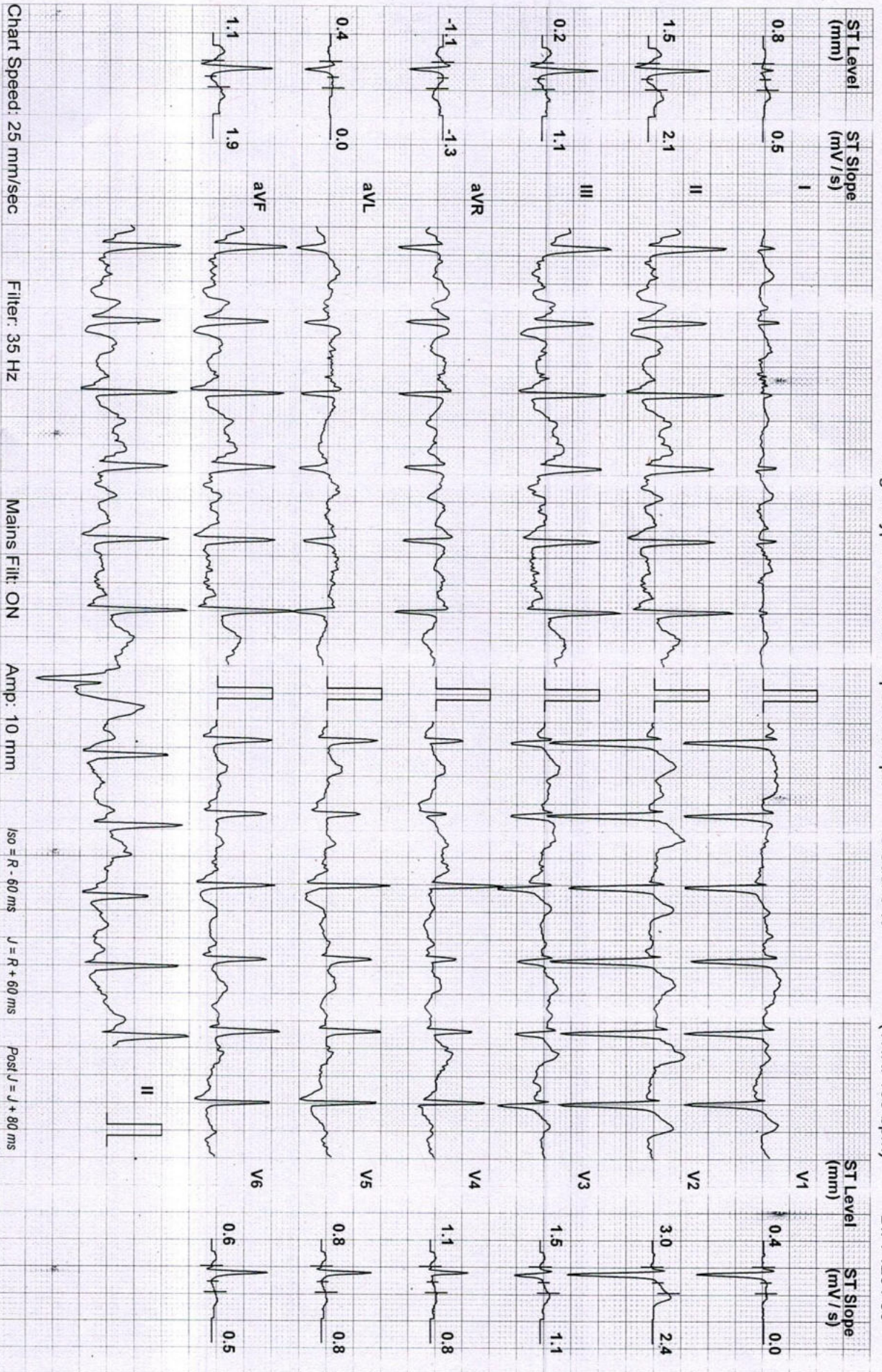


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filt: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 80 ms

Schiller Spandan V 4.7

AMIT KUMAR (39 M)

ID: 2204277

Date: 25-Mar-23 Exec Time : 3 m 0 s

Stage Time : 3 m 0 s HR: 121 bpm

Protocol: Bruce

Stage: 1

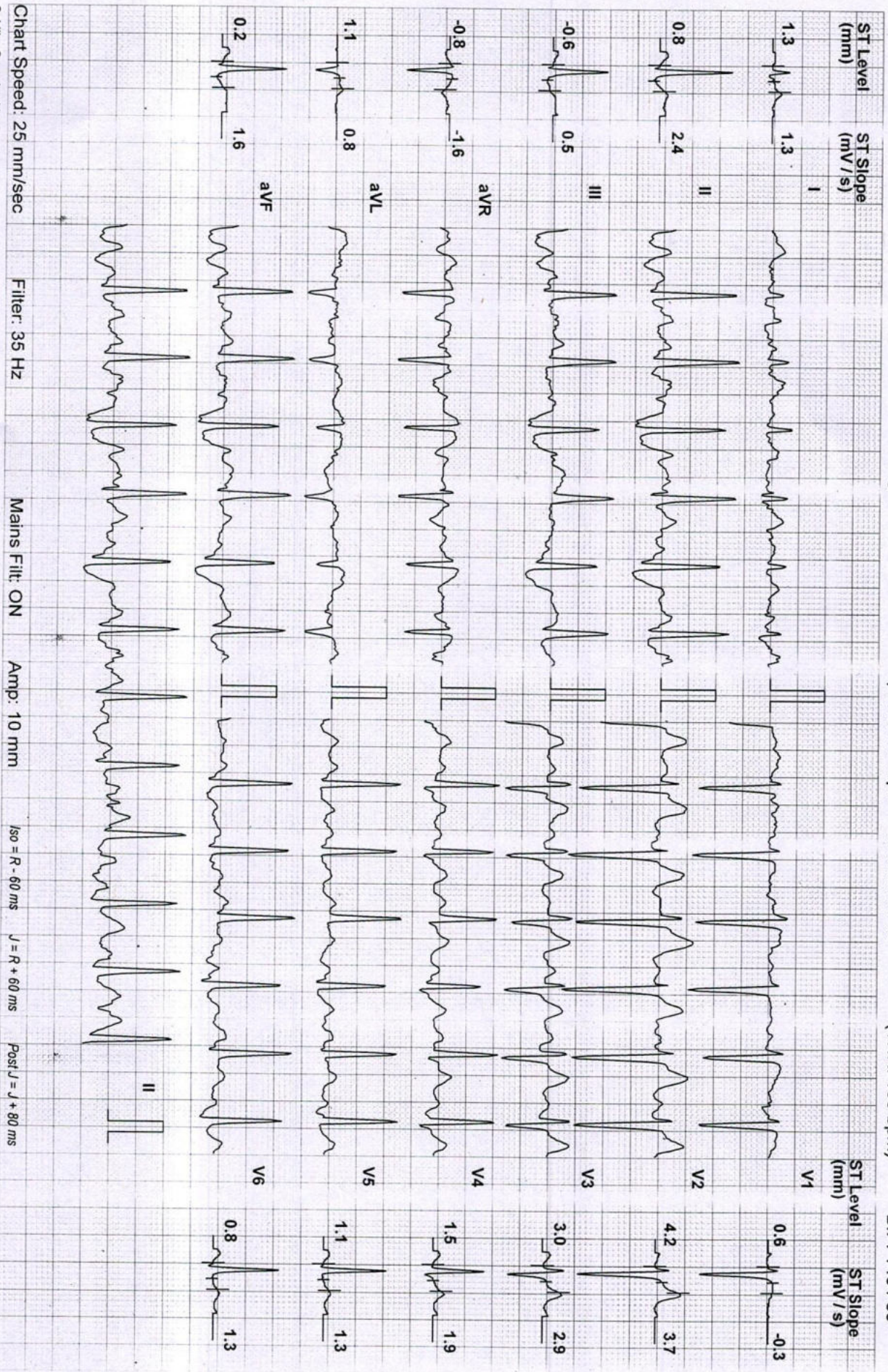
Speed: 1.7 mph

Grade: 10 %

(THR: 153 bpm)

B.P: 140 / 80

Narayan Memorial Hospital, Behala



Schiller Spandan V 4.7

AMIT KUMAR (39 M)

ID: 2204277

Date: 25-Mar-23

Exec Time : 6 m 0 s

Stage Time : 3 m 0 s

HR: 140 bpm

# Narayan Memorial Hospital, Behala

Protocol: Bruce

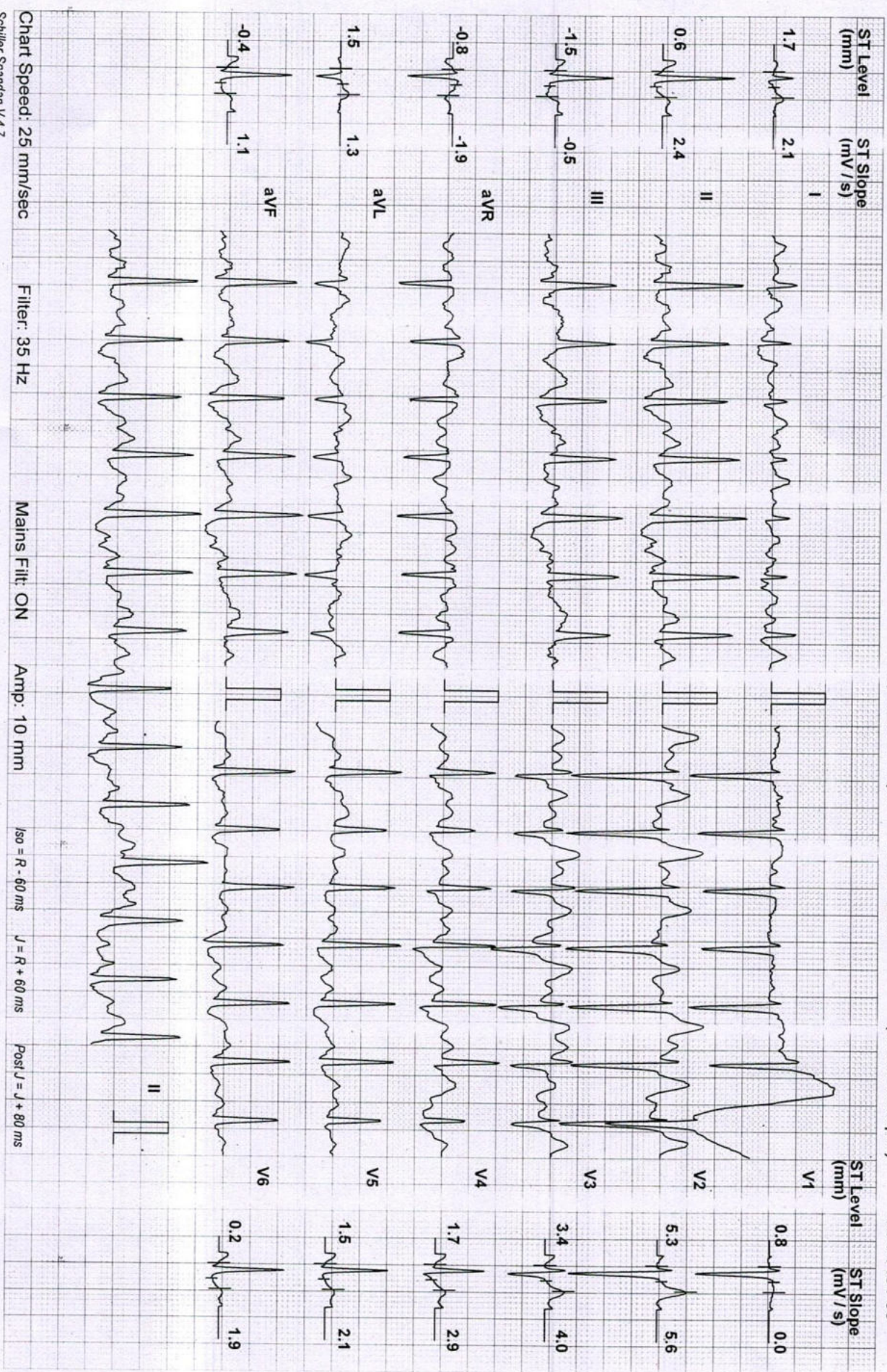
Stage: 2

Speed: 2.5 mph

Grade: 12 %

(THR: 153 bpm)

B.P: 140 / 80



Schiller Spandan V 4.7



# Narayan Memorial Hospital, Behala

**AMIT KUMAR (39 M)**

ID: 2204277

Date: 25-Mar-23

Exec Time : 8 m 7 s

Stage Time : 2 m 7 s

HR: 160 bpm

Protocol: Bruce

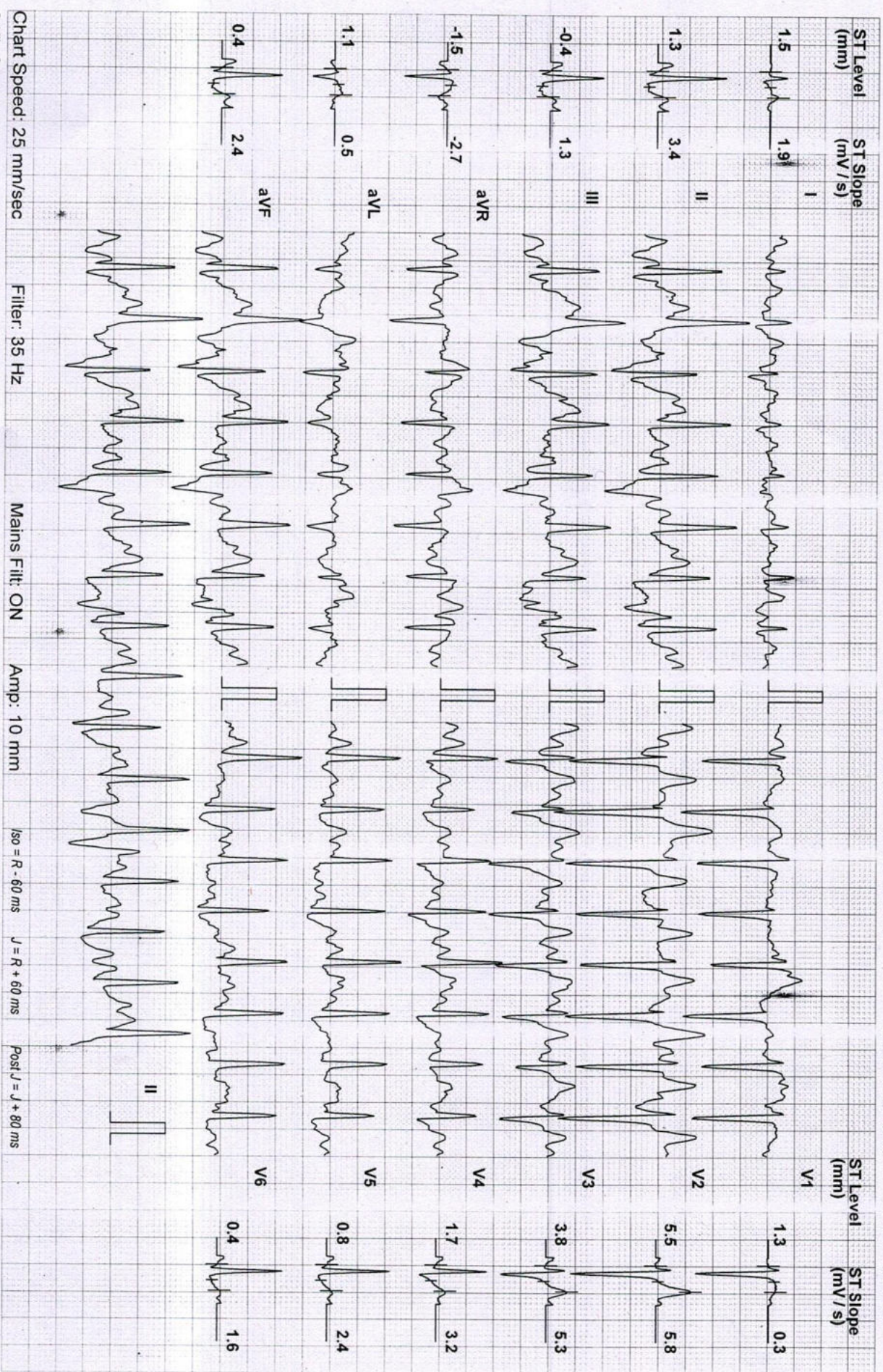
Stage: Peak Ex

Speed: 3.4 mph

Grade: 14 %

(THR: 153 bpm)

B.P: 150 / 80



Schiller Spandan V 4 7

AMIT KUMAR (39 M)

Narayan Memorial Hospital, Behala

ID: 2204277

Date: 25-Mar-23

Exec Time : 8 m 7 s

Stage Time : 1 m 0 s

HR: 131 bpm

Protocol: Bruce

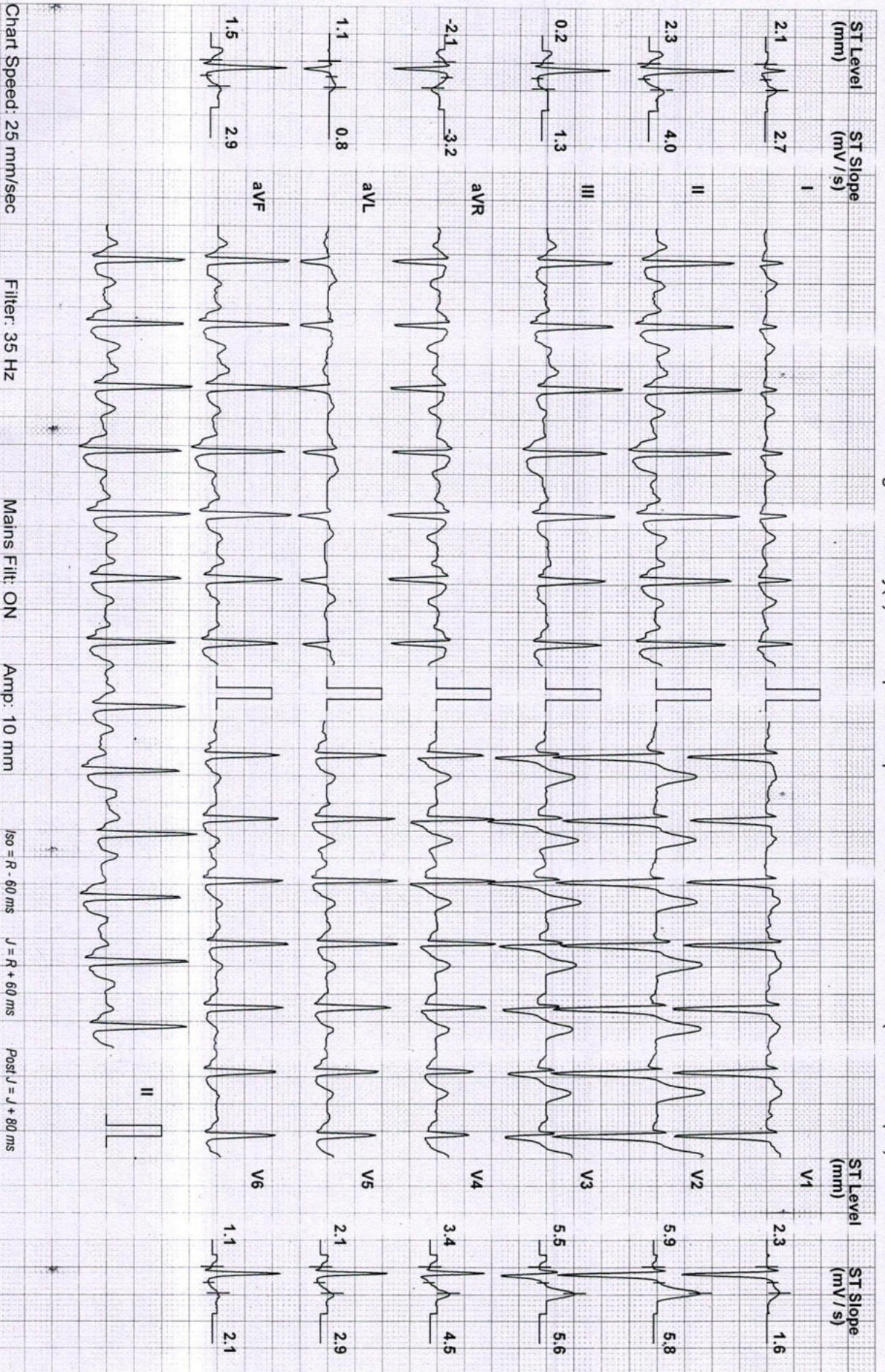
Stage: Recovery(1)

Speed: 0 mph

Grade: 0 %

(THR: 153 bpm)

B.P: 150 / 80



Schiller Spandan V 4.7

AMIT KUMAR (39 M)

Narayan Memorial Hospital, Behala

ID: 2204277

Date: 25-Mar-23

Exec Time : 8 m 7 s

Stage Time : 2 m 0 s

HR: 107 bpm

Protocol: Bruce

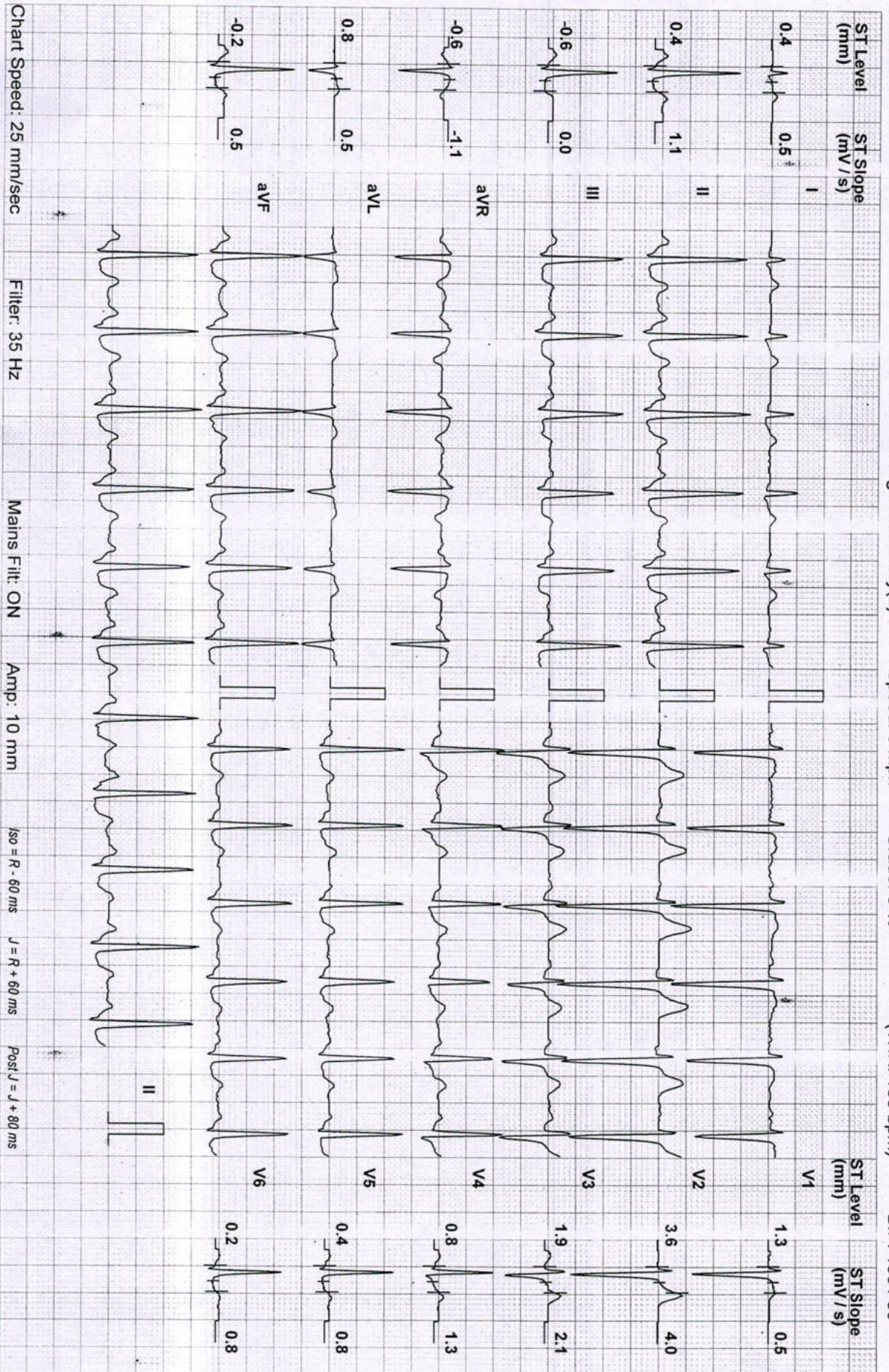
Stage: Recovery(2)

Speed: 0 mph

Grade: 0 %

(THR: 153 bpm)

B.P: 150 / 80



Schiller Spandan V 4.7

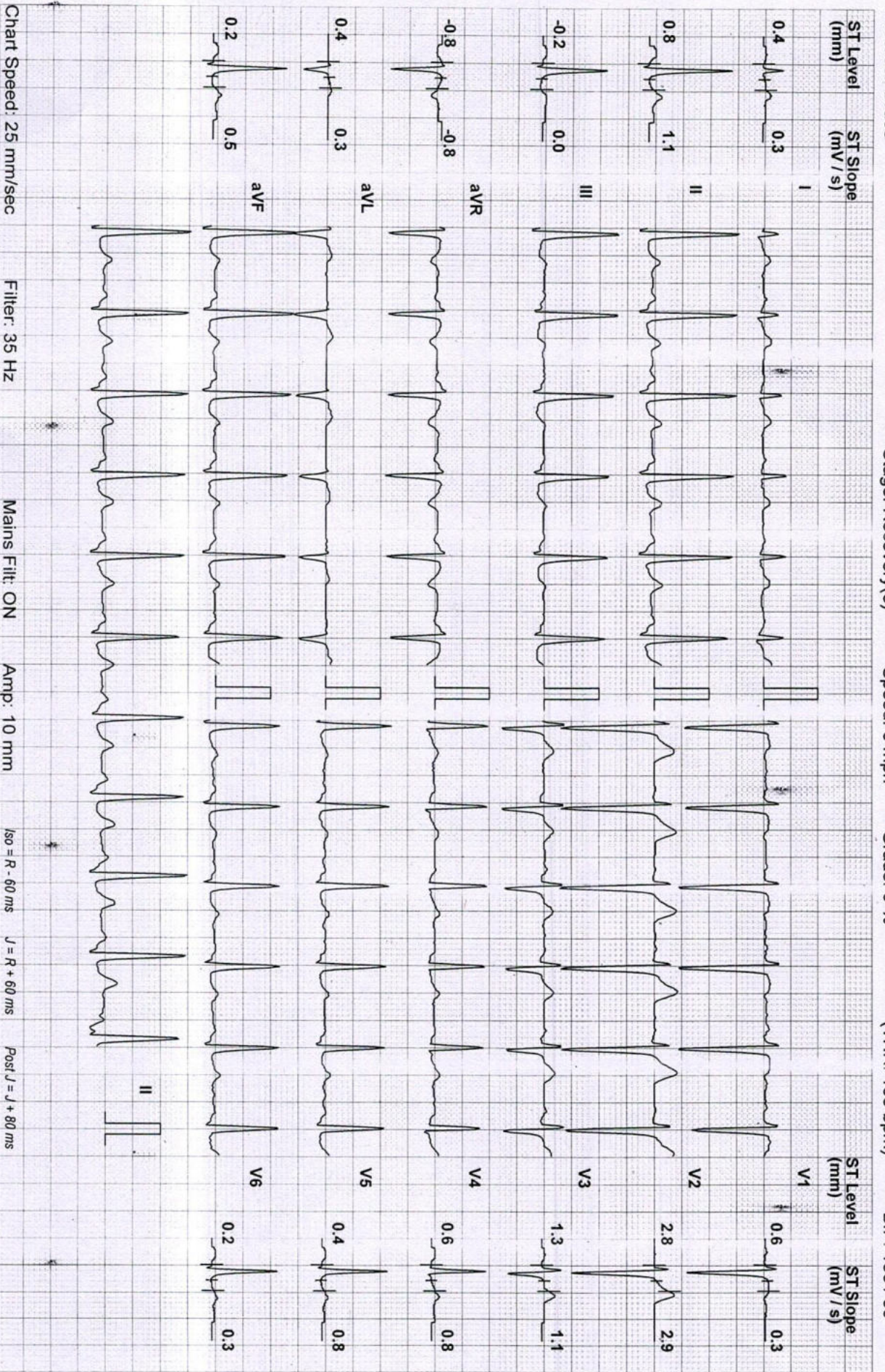


Chart Speed: 25 mm/sec

Filter: 35 Hz

Mains Filtr: ON

Amp: 10 mm

Iso = R - 60 ms

J = R + 60 ms

Post J = J + 80 ms

Schiller Spandan V 4.7



## DIAGNOSTICS REPORT

Patient Name	: Mr. Amit Kumar	Order Date	: 25/03/2023 09:22
Age/Sex	: 39 Year(s)/Male	Report Date	: 25/03/2023 14:55
UHID	: NMHK.2204277	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BLOCK B-3, FLAT NO-2, BIREN ROY ROAD, BEHALA CHOWRASTA, Kolkata, West Bengal, 700034	Mobile	: 7828612600

### 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. Sayani Mahal, MD Radiology (AIIMS), PDCC (AIIMS)

RegNo: 74369

## DIAGNOSTICS REPORT

Hee

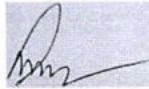
Patient Name	: Mr. Amit Kumar	Order Date	: 25/03/2023 09:22
Age/Sex	: 39 Year(s)/Male	Report Date	: 25/03/2023 14:13
UHID	: NMHK.2204277	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BLOCK B-3, FLAT NO-2,BIREN ROY ROAD, BEHALA CHOWRASTA,Kolkata, West Bengal, 700034	Mobile	: 7828612600

### ELECTROCARDIOGRAM REPORT (ECG)

HR	: 76 bpm
Rhythm	: Sinus
P wave	: Normal
PR Interval	: 146 msec
QRS axis	: Normal ( 37 Degree)
QRS duration	: 94 msec
QRS configuration	: Normal
T wave	: Non specific changes
ST segment	: Non specific changes
QTc	: 384 msec
QT	: 338 msec

#### IMPRESSION:

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



Dr.SOUMYA KANTI DUTTA , MBBS,MD(G EN.MED),DM(CARDIOLOGY)

RegNo: 63887

AMIT KUMAR  
2204277  
39 years Male  
..... kg

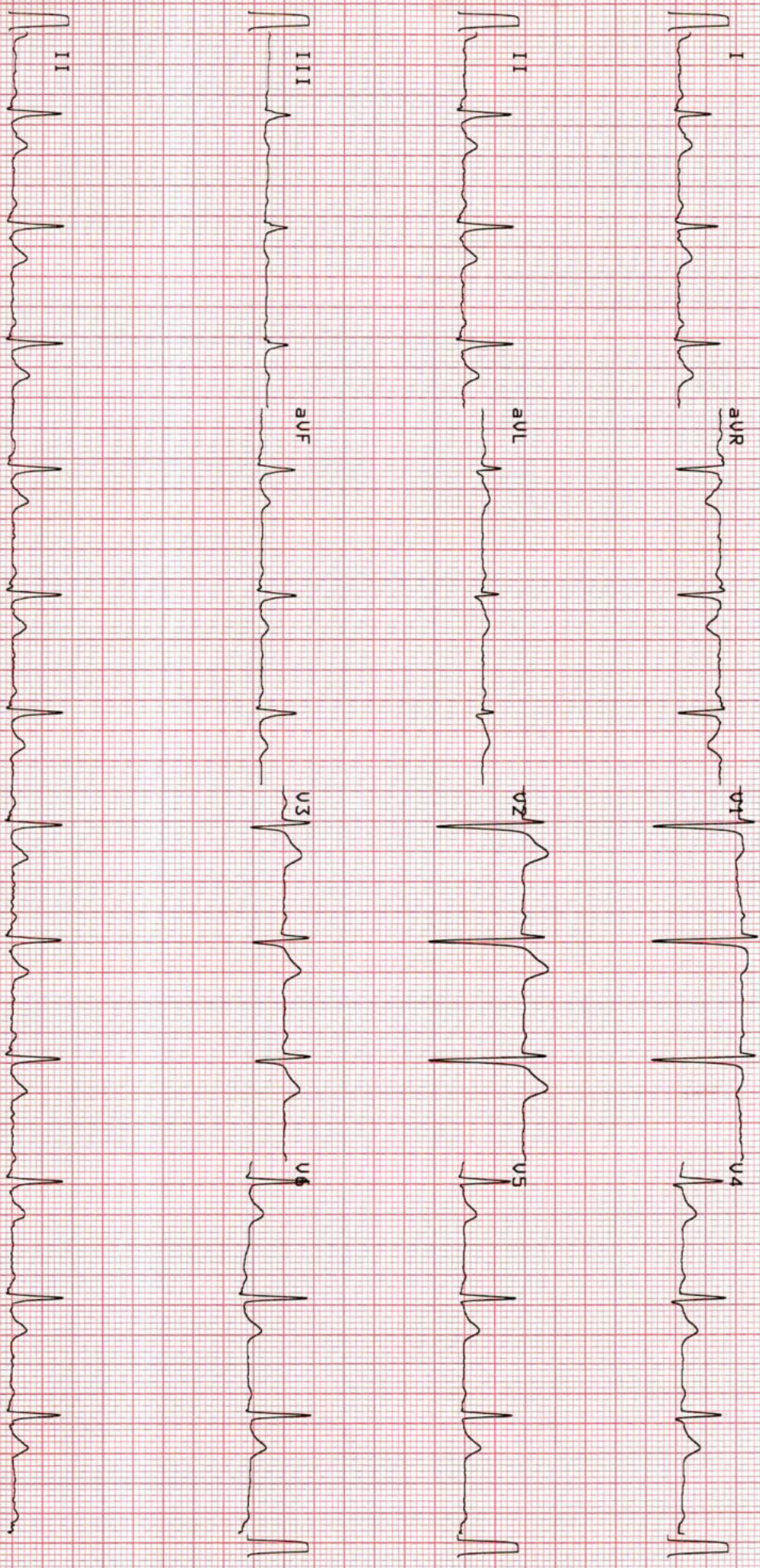
HR 76/min  
Intervals:  
RR 786 ms  
P 108 ms  
PR 146 ms  
QRS 94 ms  
QT 338 ms  
QTc 384 ms  
(Bazett)  
10 mm/mV

Axis:  
P 26 °  
QRS 37 °  
T 28 °

P (II) 0.10 mV  
S (V1) -1.66 mV  
R (V5) 1.02 mV  
Sokol. 2.94 mV

SINUS RHYTHM  
NORMAL ECG  
6.02

UNCONFIRMED REPORT



10 mm/mV  
25 mm/s

0.05-25 Hz FS0 55F 5BS 25.03.2023 12:35:17

NARAYAN MEMORIAL  
HOSPITAL, BEHALR

AT-102plus 1.25 Ct  
7 2180