

DESUN HOSPITAL

(A unit of P N Memorial Neurocentre & Research Institute Ltd.)
Desun More, Kasba Golpark, E. M. Bypass, Kolkata - 700 107
Ph. : 033-71-222-000, Fax : 2443-9003 / 5050
E-mail : desun@desunhospital.com
Website : www.desunhospital.com



Name : Mr. Atin Kumar Mondal

Date : 9/12/23

U/Doctor : Dr. Anish Chakraborty

Age : 55Y Sex : M

Doctor's Prescription

Rx

cl N/A.

O/S Stomach ⊕.

Adv Scaling full mouth.

Rp

O/D mouthrinse Chlorhexidine (0.2%)
(10ml - dilute with 20ml lukewarm water) - rinse for Two times daily for 1 month.

Anish Chakraborty

9/12/23



DR. ANISH CHAKRABORTY
(BDS)
DENTISTRY
REGN. NO. 6648 A
DESUN HOSPITAL



MR. ATIN KUMAR MONDAL 55/M

CO → Routine checkup
OE → BE-Iris Coloboma & pseudophakia
HIO - NA

VA < 6/9
F.C-2m | c̄spect

VA < N6
N36p | c̄spect

Refractive connection
OK

Colour vision - BE - WNL

Adv

- Constant use own spect
- ✓ ELD - Hyvet / I-dew
- IOP x BE x TDS
- Refer to the higher center for fundus examination.

RIA - Iyn on ses



Dr. Soumyadeep Majumder
MBBS MB

Reg No 68358 WBMC

Department of Ophthalmology

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CIN - U85110WB2000PLC091118

Regd. Add. : - 8/1A/1 Keyatala Road, Kolkata - 700 029

Hospital Address : Desun More, Kasba Golpark, E. M. Bypass, Kolkata - 700 107

Ph. : 033-71-222-000, Fax : 2443-9003/2443-5050, E-mail : desun@desunhospital.com, Website : www.desunhospital.com



Name: Mr. Atin Kumar Mondal

Date: 9/12/23

U/Doctor: Dr. Sreemanti Bag

Age: 55Y Sex: M

Doctor's Prescription

Rx

Advice

e/o nasal obstruction / congestion
Recurrent episodes of sneezing / runny nose
on exposure to cold / dust / fumes / smoke

1870 ~~path~~
nasal polypoid mass
e? Epithelioma
since 5 years back
(no documents kept)
No known cancer history
on Examination
DRS (ENT) EB/17718
Bilateral nasal polypoid mass
Thromb. - Pw 7 nasal drip ⊕
DAR e? CPS

- NCT PNS (Axial / Coronal / Sagittal view)
- FORAMIST A2 nasal spray 1 puff twice daily in each nasal cavity X 3 weeks
- SOLSPRE nasal spray 2 puffs TDS in each nasal cavity X 3 weeks
- Tab R4 CLEAR 1 tab twice daily X 10 days
- Tab BILAZEST-M 1 tab ODS X 20 days

→ Review after 2 weeks or earlier SOS
Dr. Sreemanti Bag
MBBS, MS
Reg. No. - 73883 WBMC, M
Department of ENT
Desun Hospital
05-11-2023

PATIENT NAME & ADDRESS
ATIN KUMAR MONDAL



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8240930702

DRAWN : 09-12-2023 RECEIVED : 09-12-2023 REPORTED : 09-12-2023
 10:45 Hrs. 13:56 Hrs. 17:26 Hrs.

OPD/IPD DOC NO SD01/OPD/BILL/2023-24/OP40468798 PATIENT CODE SD01/PAT/1000152679

REFERRING DOCTOR

ACCESSION NO DHHI-1/2023-24/0006120

AGE 55 Yrs 6 Mths 22 Dys SEX Male



2330952040

Results relate only to the samples tested

TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Glucose - Fasting			
Glucose - Fasting Specimen : Plasma Flouride Methodology : Hexokinase	100	Adult : 74 - 106 Children 60 - 100	mg/dL
Uric Acid			
Uric Acid Specimen : Serum Methodology : Uricase Peroxidase	5.8	Male : 3.5 - 7.2 Female : 2.6 - 6.0	mg/dL
Urea			
Urea Specimen : serum Methodology : Urease, GLDH (UV Method)	33	Adult : 17 - 43 Newborn : 8.4 - 25.8 Infant/Child : 10.8 - 38.4	mg/dL
Creatinine			
Creatinine Specimen : Serum Methodology : Jaffe Method	1.02	Male (<50 years) : 0.84 - 1.25 Male (>50 years) : 0.81 - 1.44 Female : 0.66 - 1.09 Neonate : 0.5 - 1.2 Infant : 0.4 - 0.7 Child : 0.5 - 1.2	mg/dL
LFT (Liver Function Test)			
Total Bilirubin Specimen : Serum Methodology : Diazotization	0.51	Adults : 0.3 - 1.2 Children 0-1 day 1.4 - 8.7 1-2 days 3.4 - 11.5 3-5 days 1.5 - 12.0	mg/dL
Direct Bilirubin Specimen : Serum Methodology : Diazotization	0.10	Adults and Children : < 0.2	mg/dL
Indirect Bilirubin Methodology : Calculated Value	0.41		mg/dL
Total Protein Specimen : Serum Methodology : Biuret	7.1	Adult : 6.6 - 8.3 Children (1 - 18 y) : 5.7 - 8.0 Newborns (1 - 30 d) : 4.1 - 6.3	g/dL



11122023094825

Prerana Mondal
Dr. Prerana Mondal
 MD (Path), WBMC-70606
 Consultant Pathologist

Any investigation has limited significance in terms of sensitivity and specificity of the assay procedure and the quality of the sample received in the laboratory/hospital.
 Any laboratory test results is not the final diagnosis, it has to be interpreted with clinical correlation and other related investigations.

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
LFT (Liver Function Test)			
Albumin	4.6	Adults: 3.5 - 5.2 Newborn (0 - 4 day) : 2.8 - 4.4	g/dL
<i>Specimen : Serum</i>			
<i>Methodology : Bromocresol Green (BCG)</i>			
Globulin	2.5	1.8 - 3.6	g/dL
<i>Methodology : Calculated Value</i>			
Aspartate Aminotransferase (SGOT) (AST)	24	Male (Adult): <50 Female (Adult): <35 Newborn: 25 - 75 Infant: 15 - 60	U/L
<i>Specimen : Serum</i>			
<i>Methodology : IFCC (UV without P5P)</i>			
Alanine Aminotransferase (SGPT) (ALT)	21	Male(Adult): <50 Female(Adult): <35 Newborn/Infant: 13 - 45	U/L
<i>Specimen : Serum</i>			
<i>Methodology : IFCC (UV without P5P)</i>			
Alkaline Phosphatase (ALP)	75	75 - 316	U/L
<i>Specimen : Serum</i>			
<i>Methodology : IFCC (PNPP, AMP buffer)</i>			



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Glucose - PP (Post Prandial)			
Glucose - Post Prandial	113	70.0 - 140.0	mg/dL
Specimen : Plasma Flouride			
Methodology : Hexokinase			
** Sample Drawn : 09.12.2023 13:48 Hrs.	Received : 09.12.2023 14:04 Hrs.	Reported : 09.12.2023 17:26 Hr	



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Dr. Palash Kr Mandal
 Dr. Palash Kr Mandal
 MD (Path), WBMC-51886
 Sr Consultant

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Lipid Profile			
Cholesterol - Total Specimen : Serum Methodology : CHOD-POD	177	<200 : Desirable 200 - 239 : Borderline High ≥240 : High	mg/dL
Cholesterol - HDL Specimen : Serum Methodology : Direct Enzymatic Colorimetric	45	40.0 - 59.0	mg/dL
Cholesterol - LDL Methodology : Calculated Value	115.8	> 160.0 : High Risk 130.0 – 160.0 : Borderline High ≤ 130.0 : Desirable	mg/dL
Cholesterol - VLDL Methodology : Calculated Value	16.2	< 40.0	mg/dL
Triglyceride Specimen : Serum Methodology : GPO POD	81	Normal : <150 Borderline high : 150 - 199 High : 200 - 499 Very high : ≥500	mg/dL



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Lipid Profile			
Cholesterol - Total/HDL ratio <i>Methodology : Calculated Value</i>	3.93	3.4 : 1/2 Average Risk 5.0 : Average Risk 9.6 : 2 x Average Risk 23.4 : 3 x Average Risk	ratio
Cholesterol - HDL/LDL ratio <i>Methodology : Calculated Value</i>	0.39		



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
HbA1c (Glycosylated Haemoglobin)			
Glycosylated Haemoglobin (HBA1C)	6.1	4.6 - 6.2	%
Specimen : Methodology : NGSP			
LFT (Liver Function Test)			
A/G Ratio	1.84	1.1 - 2.2	ratio
Specimen : serum Methodology : Calculated Value			
GGT (Gamma-glutamyltransferase)			
Gamma-glutamyltransferase (GGT)	18	12 - 122	U/L
Specimen : Serum Methodology :			
BUN (Blood Urea Nitrogen)			
Blood Urea Nitrogen (BUN)	15.2	Newborn : 4 - 18 Child : 5 - 18 Adult : 6 - 20	mg/dL
Specimen : Serum Methodology : Urease, GLDH			



Dr. Palash Kr Mandal
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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
CBC (Complete Blood Count)			
Haemoglobin (Hb) <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Colorimetry</i>	13.5	13.0 - 17.0	gm %
RBC Count <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Electrical Impedance</i>	5.22	4.5 - 5.5	million/cmm
Packed Cell Volume (Hematocrit) (PCV) <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Pulse height detection</i>	42.4	40.0 - 50.0	%
Mean Cell Volume (MCV) <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Calculated Value</i>	81.3	83.0 - 101.0	fL
Mean Cell Haemoglobin (MCH) <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Calculated Value</i>	26.0	27 - 32	pg
Mean Cell Haemoglobin Concentration (MCHC) <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Calculated Value</i>	31.8	31.5 - 34.5	g/dL
Platelet Count <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Electrical Impedance</i>	2.18	1.5 - 4.1	lakh/cmm
Total Count			
WBC Count <i>Specimen : Whole Blood - EDTA</i> <i>Methodology : Electrical Impedance</i>	5.2	4.0 - 10.0	thou/cmm
Differential Count (Microscopy)			
Neutrophil	65	40 - 80	%
Lymphocyte	30	20 - 40	%
Monocyte	02	2 - 10	%
Eosinophil	03	1 - 6	%
Basophil	00	<1 - 2	%
Peripheral Blood Smear (Microscopy)			



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
CBC (Complete Blood Count)			
RBC	Predominantly normocytic normochromic.		
WBC	Normal morphology. No immature cell seen.		
Erythrocyte Sedimentation Rate (ESR) Specimen : Whole Blood - EDTA Methodology : Westergren	12	<=15	mm / hr

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Signature
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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<p>ABO Group & RH Type</p> <p>ABO Blood Group Methodology : Tube Agglutination / Slide method</p> <p>Rh Typing Specimen : Whole Blood - EDTA Methodology : Tube Agglutination / Slide method</p> <p>'H' ANTIGEN PRESENT</p>	<p>O</p> <p>POSITIVE</p> <p>Note : Following factors are responsible for discrepancies in ABO Grouping: 1. Patients may fail to express ABO antigens on red cells due to diseases like Leukaemia & lymphoma. 2. Acquired B antigen can occur due to Infections; gram negative septicaemia, carcinoma colon, Blood Group chimera i.e. an individual with two population of cells which may occur as a result of either Bone marrow transplantation or Transfusion of group 'O' blood to 'A' or 'B' patient. 3. Rouleaux formation: It occurs in patients with abnormal Albumin/globulin concentration or in cord blood samples due to Whartons Jelly contamination. 4. Acquired antibodies i.e. Anti -A1 in A2 persons Anti -H in Bombay phenotype Cold auto - antibodies Unexpected allo-antibodies.</p>		



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Urinalysis			
<i>Urinalysis</i>			
<i>Physical Examination</i>			
Volume <i>Methodology : By graduated container</i>	45		mL
Colour	Pale Straw		
Appearance <i>Methodology : Visual</i>	Slightly Hazy		
Specific Gravity <i>Methodology : pKa change</i>	1.015		ratio
<i>Chemical Examination</i>			
Reaction <i>Methodology : Double indicator (Strip)</i>	Acidic		
Protein <i>Methodology : Protein-error-of-indicators</i>	Absent		
Glucose <i>Methodology : Glucose oxidase (Strip) Benedict's Test</i>	Absent		
Ketone Bodies <i>Methodology : Nitroprusside method (Strip)/ Tube</i>	Absent		
Bile Salt <i>Methodology : Hay's Method</i>	Absent		
Bile Pigment <i>Methodology : Diazo Method (Strip)</i>	Absent		
Blood <i>Methodology : Benzidine method (Strip)/ Microscopy</i>	Absent		
<i>Microscopic Examination</i>			
Pus Cells	1-2		/hpf
RB	Not Seen		/hpf
Epithelial Cells	6-8		/hpf



Signature of Dr. Palash Kr Mandal

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Urinalysis			
Casts	Not Seen		
Crystals	Not Seen		
----- End of Report -----			



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LABORATORY REPORT

CLIENT CODE : DHHI-3



DESUN

REFERENCE LAB

AN ISO 9001:2000 ORGANISATION

A Unit of Desun Healthcare & Research Institute Ltd.

S-16, Phase-II, K. L. Estate, E. M. Bypass, Kolkata-700 107, India

Phone No. : 033 40016355, 033 46006439

Email : care@desunpathology.com

Website : www.desunpathology.com

CLIENT NAME : DESUN HOSPITAL & HEART INSTITUTE
720, Anandapur, Kasba Golpark, E.M Bypass,
Kolkata-700107
Ph. No. : (033)71222000

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REFERRING DOCTOR :

ACCESSION NO. : DHHI-3/2023-24/0012219

AGE : 55 Yrs 6 Mths 22 Dys SEX : Male

Bed No / IPD ID / OPD ID : OPD

PATIENT ID : 152679



2330952040

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
Thyroid Profile - 1 (T3, T4, TSH)			
Triiodothyronine (T3) Specimen : Serum Methodology : Electrochemiluminescence	1.01	0.80 - 2.00	ng/mL
Thyroxine (T4) Specimen : Serum Methodology : Electrochemiluminescence	9.12	5.10 - 14.10	µg/dL
Thyroid Stimulating Hormone (TSH) Specimen : Serum Methodology : Electrochemiluminescence	2.40	0.270 - 4.20	µIU/mL

11122023094930

Dr. Jayati Gupta
Ph.D (Bio.Chem)
Senior Consultant Biochemist

Any investigation has limited significance in terms of sensitivity and specificity of the assay procedure and the quality of the sample received in the laboratory.
Any laboratory test results is not the final diagnosis, it has to be interpreted with clinical correlation and other related investigations.

PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED.

LABORATORY REPORT

CLIENT CODE : DHHI-3

CLIENT NAME : DESUN HOSPITAL & HEART INSTITUTE
720, Anandapur, Kasba Golpark, E.M Bypass,
Kolkata-700107
Ph. No. : (033)71222000



DESUN
REFERENCE LAB

AN ISO 9001:2000 ORGANISATION

A Unit of Desun Healthcare & Research Institute Ltd.

5-16, Phase-III, K. I. Estate, E. M. Bypass, Kolkata-700 107, India

Phone No. : 033 40016355, 033 46006439

Email : care@desunpathology.com

Website : www.desunpathology.com

DRAWN : 09.12.2023
10:45 Hrs.RECEIVED : 09.12.2023
12:39 Hrs.REPORTED : 09.12.2023
16:34 Hrs.

PATIENT NAME : ATIN KUMAR MONDAL

REFERRING DOCTOR :

ACCESSION NO. : DHHI-3/2023-24/0012219

AGE : 55 Yrs 6 Mths 22 Dys SEX : Male



2330952040

Bed No / IPD ID / OPD ID : OPD

PATIENT ID : 152679

Results relate only to the samples tested

TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
PSA (Prostate Specific Antigen) Total			
Prostate-Specific Antigen - Total (PSA - Total)	2.61	<= 4.4	ng/mL
Specimen : Serum			
Methodology : Electrochemiluminescence			
----- End of Report -----			

11122023094930

Dr. Jayati Gupta

Ph.D (Bio.Chem)

Senior Consultant Biochemist

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PATIENT NAME & ADDRESS
ATIN KUMAR MONDAL
8240930702

CARDIOLOGY



PROCEDURE DONE ON : 09.12.2023
OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40468798
REFERRING DOCTOR :
ACCESSION NO : R/DHHI-1/2023-24/0007904

REPORTED : 09.12.2023
PATIENT CODE : SD01/PAT/1000152879
AGE : 55 Yrs 6 Mths 22 Dys
SEX : M

ECG TEST REPORT NO. 137

SINUS ARRHYTHMIA



Dr. IMRAN AHMED KHAN

Reg No: 64336, MBBS
Dept. of Cardiac Science

Prepared By : Sutapa Checked By : Sumita Bar

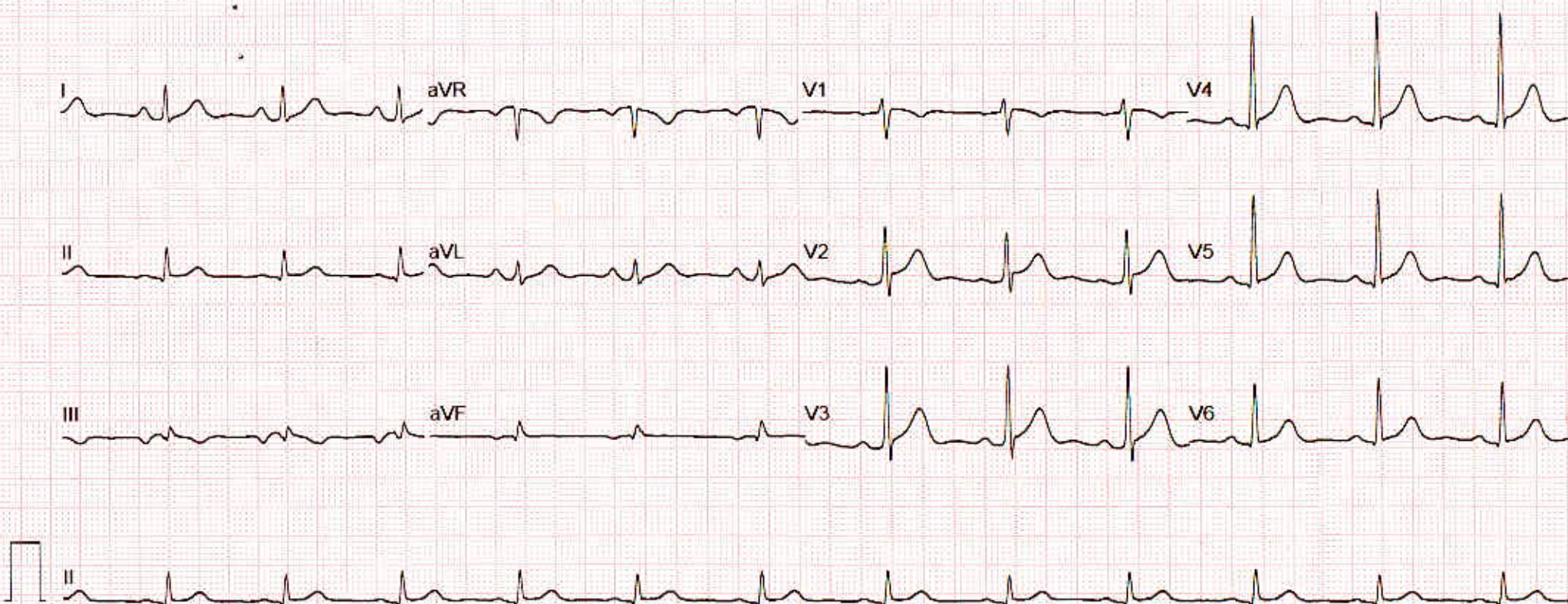
I A K

Male

QRS : 76 ms
QT / QTcBaz : 364 / 406 ms
PR : 164 ms
P : 126 ms
RR / PP : 800 / 800 ms
P / QRS / T : -16 / 27 / 2 degrees

Normal sinus rhythm
ST elevation, probably due to early repolarization
Borderline ECG

Technician:
Ordering Ph:
Referring Ph:
Attending Ph:



PATIENT NAME & ADDRESS
ATIN KUMAR MONDAL
 8240930702

CARDIOLOGY

DESUN
HOSPITAL
A NABH HOSPITAL

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 E-mail : desun@desunhospital.com, Website : www.desunhospital.com
 (A unit of P. H. Memorial Neurocentre & Research Institute Ltd.)

PROCEDURE DONE ON : 09.12.2023
 OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40468798
 REFERRING DOCTOR :
 ACCESSION NO : R/DHHI-1/2023-24/0007890

REPORTED : 09.12.2023
 PATIENT CODE : SD01/PAT/1000152679
 AGE : 55 Yrs 6 Mths 22 Dys
 SEX : M

ECHO CARDIOGRAPHY REPORT

ECHO NO : 146

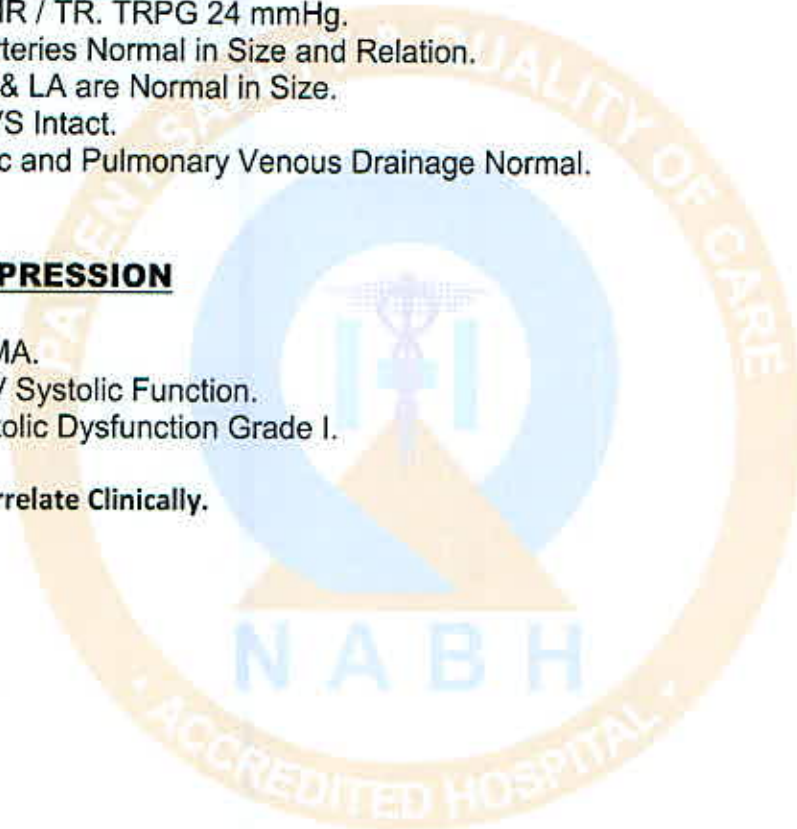
SUMMARY

- >> Normal LV Cavity.
- >> No RWMA.
- >> Good LV Systolic Function. LVEF = 64 %.
- >> LV Diastolic Dysfunction Grade I.
- >> Trivial MR / TR. TRPG 24 mmHg.
- >> Great arteries Normal in Size and Relation.
- >> RA, RV & LA are Normal in Size.
- >> IAS & IVS Intact.
- >> Systemic and Pulmonary Venous Drainage Normal.
- >> No PE.

FINAL IMPRESSION

- >> No RWMA.
- >> Good LV Systolic Function.
- >> LV Diastolic Dysfunction Grade I.

****Please Correlate Clinically.**



Sanjib Kumar Patra

Dr. SANJIB KUMAR PATRA

Reg No: 53571 (WBMC)
 DM CARD
 Dept. of Cardiac Science

Prepared By : Utpal Checked By : A Esai

S K P

PATIENT NAME & ADDRESS

ATIN KUMAR MONDAL
8240930702

CARDIOLOGY



DESUN
HOSPITAL
A NABH HOSPITAL

Desun More, E.M. Bypass, Kasba Golpark, Kolkata-700 107, Ph. 71 222 000, Fax : 2443 9003
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REPORTED : 09.12.2023
PATIENT CODE : SD01/PAT/1000152679
AGE : 55 Yrs 6 Mths 22 Dys
SEX : M

M - mode Measurements Valves :-

Aorta - 2.6 cm LV ed - 4.0 cm
LA - 3.1 cm LV es - 2.5 cm
ACS - cm IVS ed - 1.0 cm
RV ed - cm PW (LV) - 1.0 cm
FS - % LVEF - 64 %

CHAMBERS:-

Left Ventricle : Normal in Size. Walls Normal in Thickness and Motion.

Left Atrium : Normal in Size.

Right Atrium : Normal in Size.

Right Ventricle : Normal in Size.

OTHERS :-

GREAT ARTERIES : Normal in Size and Relation.

Sanjib Kumar Patra
Dr. SANJIB KUMAR PATRA

Reg No: 53571 (WBMC)
DM CARD
Dept. of Cardiac Science

Prepared By : Utpal Checked By : A Esai

S K P

PATIENT NAME & ADDRESS
ATIN KUMAR MONDAL
 8240930702

CARDIOLOGY

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REPORTED : 09.12.2023
 PATIENT CODE : SD01/PAT/1000152679
 AGE : 55 Yrs 6 Mths 22 Dys
 SEX : M

PERICARDIUM : Normal.

VALVES :-

MITRAL VALVE

Morphology : Normal
 Doppler : **Mitral** Regurgitation : Trivial

TRICUSPID VALVE

Morphology : Normal
 Doppler : TRPG : 24 mmHg
 Tricuspid Regurgitation : Trivial

AORTIC VALVE

Morphology : Normal
 Doppler : Normal

PULMONARY VALVE

Morphology : Normal
 Doppler : Normal



Sanjib Kumar Patra

Dr. SANJIB KUMAR PATRA

Reg No: 53571 (WBMC)
 DM CARD
 Dept. of Cardiac Science

Prepared By : Utpal Checked By : A Esai

S K P

PATIENT NAME & ADDRESS

ATIN KUMAR MONDAL
8240930702

RADIOLOGY

DESUN
HOSPITAL
A NABH HOSPITAL

PROCEDURE DONE ON : 09.12.2023

OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40468798

REFERRING DOCTOR :

ACCESSION NO : R/DHHI-1/2023-24/0007865

REPORTED : 09.12.2023

PATIENT CODE : SD01/PAT/1000152679

AGE : 55 Yrs 6 Mths 22 Dys

SEX : M

(US-8118) USG OF WHOLE ABDOMEN

LIVER

Shows normal homogeneous echotexture. Intrahepatic biliary ducts and hepatic vein tributaries are not dilated. No obvious focal lesion seen.

GALL BLADDER

Physiologically distended. Wall thickness is normal. No evidence of any intraluminal lesion seen.

C.B.D.

0.11 cm. in diameter. No obvious intraluminal lesion seen in visible parts.

PORTAL VEIN

1.1 cm in diameter.

PANCREAS

Normal in size, shape and echotexture. No obvious focal lesion or intraparenchymal calcification seen. Main pancreatic duct is not dilated. No peripancreatic fluid collection seen.

SPLEEN

Spleen is normal in size (7.6 cm. in long axis) shape and echotexture. No focal lesion seen. Spleno-portal axis is normal.

KIDNEYS

Both the kidneys are normal in size, shape and axis. Cortical echotexture and cortico-medullary differentiation are normal in both sides. No evidence of any focal lesion seen in either kidneys. No hydronephrosis detected.

Right Kidney measures : 10.6 cm

Left Kidney measures : 9.6 cm

URETERS

Pelvi-ureteric junction and vesico-ureteric junctions are normal. No obvious intraluminal lesion seen in visible part.

URINARY BLADDER

Optimally distended, normal in shape and wall thickness. No evidence of any intraluminal lesion seen.

PATIENT NAME & ADDRESS
ATIN KUMAR MONDAL
 8240930702

RADIOLOGY

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A NABH HOSPITAL

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 REFERRING DOCTOR :
 ACCESSION NO : R/DHHI-1/2023-24/0007865

Desun Med. E.M. Bypass, Kashi Colony, Kolkata-700 107, Ph: 71 222 000, Fax: 2443 9003
 E-mail: desunhospital@gmail.com Website: www.desunhospital.com
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 PATIENT CODE : SD01/PAT/1000152679
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 SEX : M

PROSTATE

Normal echotexture. No obvious enlargement of median lobe seen. Inner glandular zone appear normal. Capsule is intact sonologically.
 Prostate measures : 2.7 cm x 4.9 cm x 3.5 cm
 Prostate weight : 25 gms (approx.)

RETROPERITONEUM

No obvious sonological evidence of any retroperitoneal mass lesion or lymphadenopathy seen in visible part. Aorta and I.V.C. appear normal.

PERITONEUM

No free fluid seen in the peritoneal cavity. Mesenteric echogenicity appears normal.

LOWER PLEURAL SPACES

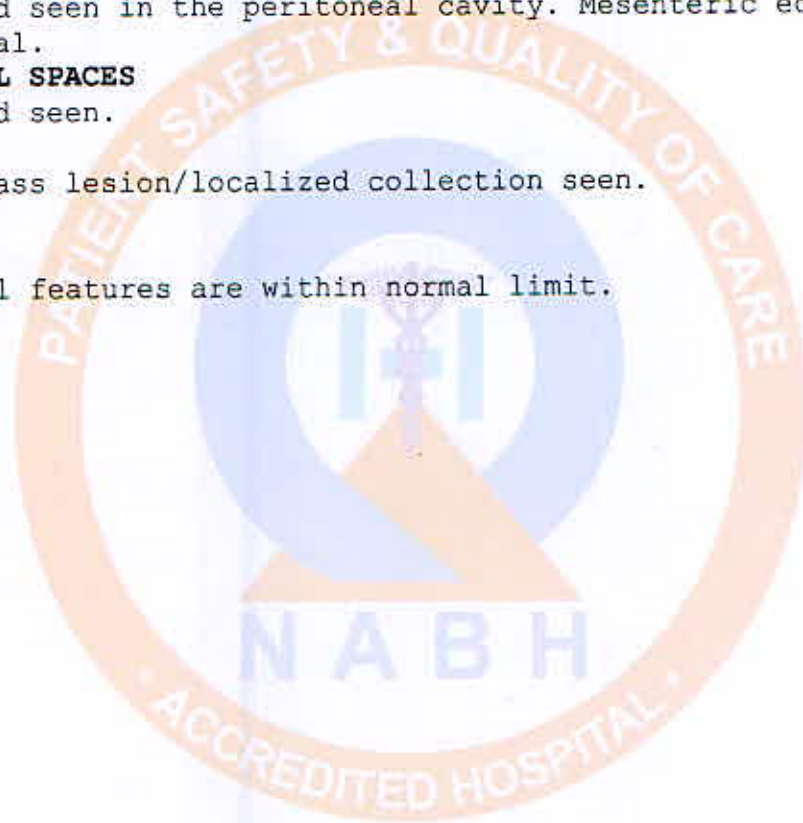
No free fluid seen.

R.I.F

No obvious mass lesion/localized collection seen.

IMPRESSION:

* Sonological features are within normal limit.



Dr. AMIT BHOWMIK

WBMC-61178
 MBBS, MEM(US), MRCPS(GLASGOW), CBAT, MBA
 Consultant Sonologist

Prepared By : Buddha Checked By : A B

A B

Patient Name:	ATIN KR MONDAL 55 Y OPD	Study Date/Time:	09-12-2023 11:20 AM
Sex/Age/Modality:	M/55Y/CR	Report Date/Time:	09-12-2023 05:09 PM
Patient ID:	14188	Report:	CHEST
Ref. Physician:	DESUN HOSPITAL & HEART INSTITUTE,KOLKATA	Report ID:	1158746D1236

X-RAY CHEST PA VIEW

FINDINGS :-

The lungs on the either side show equal translucency.
The peripheral pulmonary vasculature is normal.
No focal lung lesion is seen.
Bilateral CP angles are normal.
Both hila are normal in size, have equal density and bear normal relationship.
The heart and trachea are central in position and no mediastinal abnormality is visible.
The cardiac size is normal.
The domes of the diaphragms are normal in position, and show smooth outline.

IMPRESSION :- No significant abnormality detected.

ADVICE :- Clinical correlation and follow up.



Dr. Santosh Bharat Rathod
Consultant Radiologist
MBBS, DMRD, DNB
Reg no: MMCI-4060



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