



ভারত সরকার  
Government of India

ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ  
Indian Identification Authority of India

আধার কার্ডের নম্বর/ Enrolment No.: 2189/68778/00661

To  
শিব শঙ্কর দাস  
Shib Sankar Das  
S/O Ashutosh Das  
MALANCHA  
MALANCHA  
NEAR SWADHIN CLUB  
KHARGAPUR  
Kharagpur (m)  
Paschim Medinipur West Bengal - 721301  
9046040294

Signature valid



আপনার আধার সংখ্যা / Your Aadhaar No. :

**2737 3344 6839**

VID : 9160 7849 0104 4603

আমার আধার, আমার পরিচয়



ভারত সরকার

Government of India



শিব শঙ্কর দাস  
Shib Sankar Das  
জন্মতারিখ/DOB: 29/02/1976  
পুরুষ/ MALE

**2737 3344 6839**

VID : 9160 7849 0104 4603

আমার আধার, আমার পরিচয়

*Shib Sankar Das*

### CHECK LIST

NAME	Chib Chankar		PATHOLOGY/PP
			ECG/PFT
AGE	117 years		ECHO/TMT
	9/2/22		USG / CXR
WEIGHT			URINE / STOOL
REFERRED BY			MAMMO/ PAP
	178.5 cm		EYE/ DENTAL
	85 kg		GP CONSULTATION
	120/90 mmHg		DIETITION
	82 bpm		CARDIOLOGIST
	97.5 cm		GYNECOLOGIST
	101.5 cm		DENTAL
RESPIRATORY RATE			
T (INHALE)	104 cm		
T (EXHALE)	102.5 cm		
WASTEN	100.5 cm		

- 96 %



## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s) / Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	<b>Mobile No</b> : 9046040294
<b>Ref. Doctor</b> : NMH	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA , KHARAGPUR ,PASCHIM MEDINIPUR,West Bengal ,721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

### Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0101158	Collection Date : 09/02/23 09:38	Ack Date : 09/02/2023 12:08	Report Date : 09/02/23 17:12

#### SERUM CREATININE

##### SAMPLE : SERUM

SERUM CREATININE 0.9 mg/dl 0.7 - 1.2  
Method - Jaffe Gen2 Compensated

#### LIVER FUNCTION TEST ( LFT )

##### SAMPLE : SERUM

TOTAL BILIRUBIN	0.5	mg/dl	0 - 1.1
Method - Diazo Method			
DIRECT BILIRUBIN	0.2	mg/dl	0 - 0.2
Method - Diazo Method			
INDIRECT BILIRUBIN	0.3	mg/dl	0.2 - 0.9
Method - Calculated			
SGPT (ALT)	<b>78 ▲</b>	U/L	0 - 34
Method - IFCC Without Pyridoxal Phosphate			
SGOT (AST)	31	U/L	0 - 31
Method - IFCC Without Pyridoxal Phosphate			
ALKALINE PHOSPHATASE	74	U/L	53 - 128
Method - IFCC			
TOTAL PROTEIN	7.8	g/dl	6.4 - 8.2
Method - Biuret			
ALBUMIN	4.7	gm/dl	3.5 - 5.2
Method - Bromocresol Green			
GLOBULIN	3.1	g/dl	2 - 3.5
Method - Calculated			
ALBUMIN:GLOBULIN	1.5	-	1.1 - 2.5
Method - Calculated			
GGT	13	U/L	8 - 61



**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s) / Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	
<b>Ref. Doctor</b> : NMH	<b>Mobile No</b> : 9046040294
	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA , KHARAGPUR ,PASCHIM MEDINIPUR, West Bengal ,721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

*Method - Enzymatic colorimetric assay*

**BLOOD UREA NITROGEN**

BLOOD UREA NITROGEN 09 mg/dl 6 - 20

*Method - Calculated*

**LIPID PROFILE**

**SAMPLE : SERUM**

TOTAL CHOLESTEROL 147 mg/dl Desirable <200 |  
Borderline 200-239 |  
High >=240

*Method - CHOD-PAP*

HDL CHOLESTEROL 29 ▼ mg/dl 40 - 60

*Method - Homogenous Enzymatic Colorimetric*

LDL CHOLESTEROL 95 mg/dl Optimal < 100 |  
Borderline 130

*Method - Homogenous Enzymatic Colorimetric*

VLDL 24 mg/dl 0 - 30

*Method - CALCULATED*

CHOLESTEROL-HDL RATIO 5.07 -

LDL-HDL RATIO 3.28 -

TRIGLYCERIDES 121 mg/dl Desirable <150 |  
Borderline 150 - 200 |  
High >200

*Method - Enzymatic Colorimetric*

**URIC ACID**

**SAMPLE : SERUM**

URIC ACID 6.9 mg/dl 3.4 - 7

*Method - Enzymatic Colorimetric*

**SAMPLE : SERUM**

RESULT 10.0





## LABORATORY INVESTIGATION REPORT

**Patient Name** : Mr. SHIB SANKAR DAS

**Age/Sex** : 46 Year(s) / Male

**UHID** : NMHK.2303145

**Order Date** : 09/02/2023 09:26

**Episode** : OP

**Ref. Doctor** : NMH

**Mobile No** : 9046040294

**DOB** : 29/02/1976

**Address** : MALANCHA , KHARAGPUR ,PASCHIM  
MEDINIPUR, West Bengal ,721301

**Facility** : NARAYAN MEMORIAL HOSPITAL

HbA1c

6.0

### Interpretation & Remark:

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
2. HbA1c has been endorsed by clinical groups & American Diabetes Association guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. 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.
5. 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).
6. For known diabetic patients, following values can be considered as a tool for monitoring the glycaemic 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.



**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s) / Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	
<b>Ref. Doctor</b> : NMH	<b>Mobile No</b> : 9046040294
	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA , KHARAGPUR ,PASCHIM MEDINIPUR,West Bengal ,721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

**Hematology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0101158	Collection Date : 09/02/23 09:38	Ack Date : 09/02/2023 10:44	Report Date : 09/02/23 14:41

**COMPLETE HAEMOGRAM ( CBC )**

**SAMPLE : EDTA BLOOD**

HAEMOGLOBIN (HB)	13.6	gm/dl	13 - 17
<i>Method - Colorimetric method (Cyn Meth)</i>			
RBC COUNT	6.0 ▲	x10 <sup>6</sup> /ul	4.5 - 5.5
<i>Method - Electrical Impedance Method</i>			
TOTAL WBC COUNT	6.1	10 <sup>3</sup> /cmm	4 - 10
<i>Method - Electrical Impedance Method</i>			
PLATELET COUNT	210	10 <sup>3</sup> /cmm	150 - 410
<i>Method - Electrical Impedance Method</i>			
PCV	43	%	40 - 50
<i>Method - RBC pulse ht. detection method</i>			
MCV	71 ▼	fl	83 - 101
<i>Method - calculated</i>			
MCH	23 ▼	pg	27 - 32
<i>Method - Calculated</i>			
MCHC	32	gm/dl	31.5 - 34.5
<i>Method - Calculated</i>			
ESR	20 ▲	%	0 - 10
<i>Method - Modified Westergren Method</i>			
<b>DIFFERENTIAL COUNT</b>			
NEUTROPHILS	70	%	40 - 80
<i>Method - Microscopy</i>			
LYMPHOCYTES	22	%	20 - 40
<i>Method - Microscopy</i>			
MONOCYTES	04	%	2 - 10
<i>Method - Microscopy</i>			



### LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s) / Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	<b>Mobile No</b> : 9046040294
<b>Ref. Doctor</b> : NMH	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA , KHARAGPUR ,PASCHIM MEDINIPUR,West Bengal ,721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

EOSINOPHILS	04	%	1 - 6
<i>Method - Microscopy</i>			
BASOPHILS	00	%	0 - 2
<i>Method - Microscopy</i>			

#### **PERIPHERAL BLOOD SMEAR**

RBC	Erythrocytosis seen, Predominantly normocytic normochromic.
WBC	Within normal limits.
PLATELET	Adequate.

End of Report

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

Checked By





**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s) / Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	
<b>Ref. Doctor</b> : NMH	<b>Mobile No</b> : 9046040294
	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA , KHARAGPUR ,PASCHIM MEDINIPUR,West Bengal ,721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

**Clinical Pathology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0101169	Collection Date : 09/02/23 10:34	Ack Date : 09/02/2023 11:33	Report Date : 10/02/23 11:40

**URINE FOR R/E**

**SAMPLE : URINE**

**PHYSICAL EXAMINATION**

VOLUME	15	ml	
COLOUR	PALE STRAW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.010		1.010 - 1.030
REACTION(pH)	ACIDIC (pH-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	2-4/HPF	<5/HPF
EPITHELIAL CELLS	1-2/HPF	<20/HPF
RBC	OCCASIONAL	
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT

*Please correlate clinically.*

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

**SAMPLE : URINE**

RESULT	ABSENT
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### LABORATORY INVESTIGATION REPORT

<b>Patient Name</b>	: Mr. SHIB BANERJEE	<b>Age/Sex</b>	: 46 Year(s) / Male
<b>Urine</b>	: NONE DETECTED	<b>Order Date</b>	: 09/02/2023 09:26
<b>Examine</b>	: UR	<b>Mobile No</b>	: 9046040294
<b>Ref. Doctor</b>	: NMH	<b>DOB</b>	: 29/02/1976
<b>Address</b>	: MALANCHHA, KHAIRAGPUR, PASCHIM MEDINIPUR, West Bengal, 721301	<b>Facility</b>	: NARAYAN MEMORIAL HOSPITAL

**SAMPLE : URINE**

RESULT

ABSENT

End of Report

**M. MEENAKSHI CHAKRABORTY**  
NMB, NH (PATED)  
(LABORATORY PATHOLOGIST)

Checked By

**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s) / Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	
<b>Ref. Doctor</b> : NMH	<b>Moblie No</b> : 9046040294
	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA , KHARAGPUR ,PASCHIM MEDINIPUR,West Bengal ,721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

**Immunology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0101158	Collection Date : 09/02/23 09:38	Ack Date : 09/02/2023 10:44	Report Date : 09/02/23 11:45

**BLOOD GROUPING & Rh TYPING**

**SAMPLE : EDTA BLOOD**

BLOOD GROUP 'O'  
Method - Agglutinationforward & Reverse

RH TYPE POSITIVE

**THYROID FUNCTION TEST**

**SAMPLE : SERUM**

T3	1.53	ng/ml	0.60 - 1.80
Method - ECLIA			
T4	10.63	ug/dL	5.40 - 11.70
Method - ECLIA			
TSH	3.42	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 (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).

### LABORATORY INVESTIGATION REPORT

**Patient Name** : Mr. SHIB SANKAR DAS

**UHID** : NMHK.2303145

**Episode** : OP

**Ref. Doctor** : NMH

**Address** : MALANCHA , KHARAGPUR ,PASCHIM  
MEDINIPUR,West Bengal ,721301

**Age/Sex** : 46 Year(s) / Male

**Order Date** : 09/02/2023 09:26

**Mobile No** : 9046040294

**DOB** : 29/02/1976

**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

# Test Report



**SHIB SHANKAR DAS**

PID NO: P2162200315681  
Age: 46.0 Year(s) Sex: Male



**Reference: Dr.SELF**  
Sample Collected At:  
Narayan Memorial Hospital  
601 Diamond Harbour Road 700034  
Processing Location:-MHL RAJARHAT  
(KRL) Kolkata: 700136

**VID: 220216000282014**  
Registered On:  
09/02/2023 08:27 PM  
Collected On:  
09/02/2023 8:27PM  
Reported On:  
09/02/2023 10:36 PM

## Investigation

**PSA- Prostate Specific Antigen**  
(Serum,ECLIA)

**Observed Value**  
1.39

**Unit:**  
ng/mL

**Biological Reference Interval**  
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 overleaf.

† This test was outsourced to Metropolis Healthcare Ltd. Mumbai Page 1 of 1

Dr. Amlrullah Ali  
MBBS, MD ( BIOCHEMISTRY)



**INNER HEALTH REVEALED**



**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b> : Mr. SHIB SANKAR DAS	<b>Age/Sex</b> : 46 Year(s)/Male
<b>UHID</b> : NMHK.2303145	<b>Order Date</b> : 09/02/2023 09:26
<b>Episode</b> : OP	
<b>Ref. Doctor</b> : NMH	<b>Mobile No</b> : 9046040294
	<b>DOB</b> : 29/02/1976
<b>Address</b> : MALANCHA, KHARAGPUR, PASCHIM MEDINIPUR, West Bengal, 721301	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

**Biochemistry**

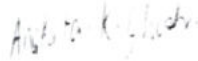
INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H01011698	Collection Date : 09/02/23 10:34	Ack Date : 09/02/2023 13:42	Report Date : 10/02/23 19:10

**BLOOD SUGAR(PP)**

**SAMPLE : PLASMA**

BLOOD SUGAR PP	101	mg/dl	70.00 - 140.00
<small>Hexokinase</small>			

End of Report



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

RegNo: 82734

Checked By

### DIAGNOSTICS REPORT

Patient Name	: Mr. SHIB SANKAR DAS	Order Date	: 09/02/2023 09:26
Age/Sex	: 46 Year(s)/Male	Report Date	: 09/02/2023 14:46
UHID	: NMHK.2303145	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: MALANCHA, KHARAGPUR,PASCHIM MEDINIPUR, West Bengal, 721301	Mobile	: 9046040294

### 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**

MR. SURESH K. S.	Order Date	09/02/2023 09:26
10/10/1978	Report Date	09/02/2023 17:59
10/10/1978	IP No	NARAYAN MEMORIAL HOSPITAL
10/10/1978	Facility	9046040294
MR. SURESH K. S.	Mobile	

**USG REPORT OF WHOLE ABDOMEN (SCREENING)**

**LIVER:** Liver is normal in size and parenchymal echotexture. 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 : 10.6 cm & Left kidney measures : 11.1 cm.

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

**POST VOID BLADDER:** No significant residual urine is seen.



## DIAGNOSTICS REPORT

Patient Name	Mr. SHEB SANKAR DAS	Order Date	19/02/2023 19:26
Age Sex	46 years (s)/Male	Report Date	19/02/2023 17:53
JHD	WASH LUTIC DAS	P No	
Ref. Doctor	WASH	Facility	NARAYAN MEMORIAL HOSPITAL
Address	WALANCHA, KHARAGPUR, PASCHIM MEDINIPUR, West Bengal, 721301	Mobile	9146140254

**PROSTATE :** Prostate is mildly in size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 3.5 cm x 4.0 cm x 3.4 cm. Its weight approx 25.5 gm.

**PERITONEUM :** No free fluid is noted.

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

**IMPRESSION :** Grade I prostatomegaly.

Dr. ANSHUSHREE RAY MANSUR

MBS,DMRD

Consultant Radiologist

Reg No: 5722





## DIAGNOSTICS REPORT

Patient Name	: Mr. SHIB SANKAR DAS	Order Date	: 09/02/2023 09:26
Age/Sex	: 46 Year(s)/Male	Report Date	: 09/02/2023 13:48
UHID	: NMBK.2303145	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: MALANCHIA, KHARAGPUR, PASCHIM MEDINIPUR, West Bengal, 721301	Mobile	: 9046040294

### ECHOCARDIOGRAPHY (SCREENING)

#### Status of Patient :

- \* No regional wall motion abnormality at rest.
- \* Good LV systolic function (EF =62 %).
- \* Good RV systolic function (TAPSE =21 mm).
- \* Mild concentric left ventricular hypertrophy.
- \* Normal valve morphology.
- \* Adequate LV diastolic function.
- \* No pericardial effusion.
- \* No pulmonary arterial hypertension.
- \* IVC normal diameter & > 50% respiratory variation.
- \* No thrombus, mass, vegetation seen.

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

Board Certified Comprehensive  
Echocardiographer (USA)



## DIAGNOSTICS REPORT

Patient Name	: Mr. SHIB SANKAR DAS	Order Date	: 09/02/2023 09:26
Age/Sex	: 46 Year(s)/Male	Report Date	: 09/02/2023 13:33
UHID	: NMHK.2303145	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: MALANCHA, KHARAGPUR,PASCHIM MEDINIPUR, West Bengal, 721301	Mobile	: 9046040294

### ELECTROCARDIOGRAM REPORT (ECG)

HR : 65 bpm  
Rhythm : Sinus  
P wave : Normal  
PR Interval : 200 msec  
QRS axis : Left axis ( - 13 Degree)  
QRS duration : 94 msec  
QRS configuration : Normal  
T wave : Non specific changes  
ST segment : Non specific changes  
QTc : 408 msec  
QT : 388 msec

#### IMPRESSION:

- Sinus rhythm with 1st degree AV block.
  - Left QRS axis.
  - Non specific ST-T changes.
- Clinical correlation please.

**Dr. MUNNA DAS , MD**  
**(MEDICINE),DM(CARDIOLOGY)**

Consultant Cardiologist

RegNo: 55696

SHIB SANKAR DR5

HR 65/min

Axis: P 49°

SINUS RHYTHM  
LEFTWARD AXIS

6.02

UNCONFIRMED REPORT

2303145

Male

46 years

..... cm / ..... kg

Intervals:  
RR 920 ms

QRS -13°  
T 43°

P 172 ms

PR 186 ms

QRS 94 ms

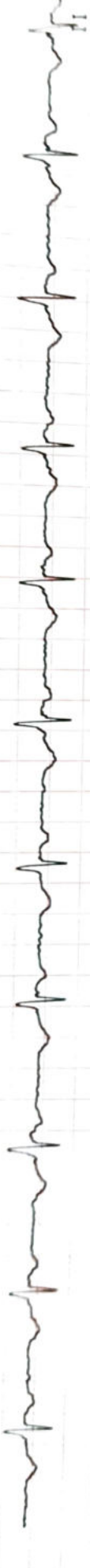
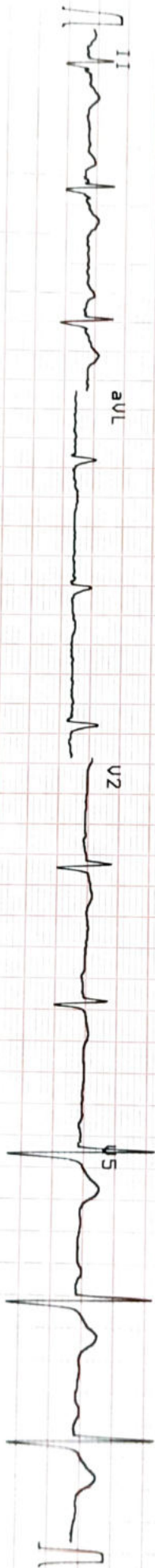
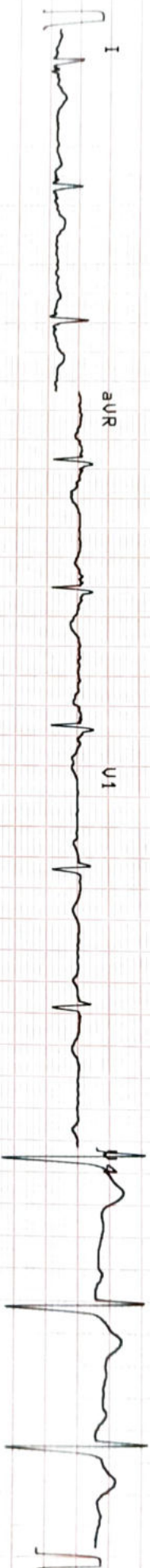
QT 388 ms

QTc 408 ms  
(Bazett)

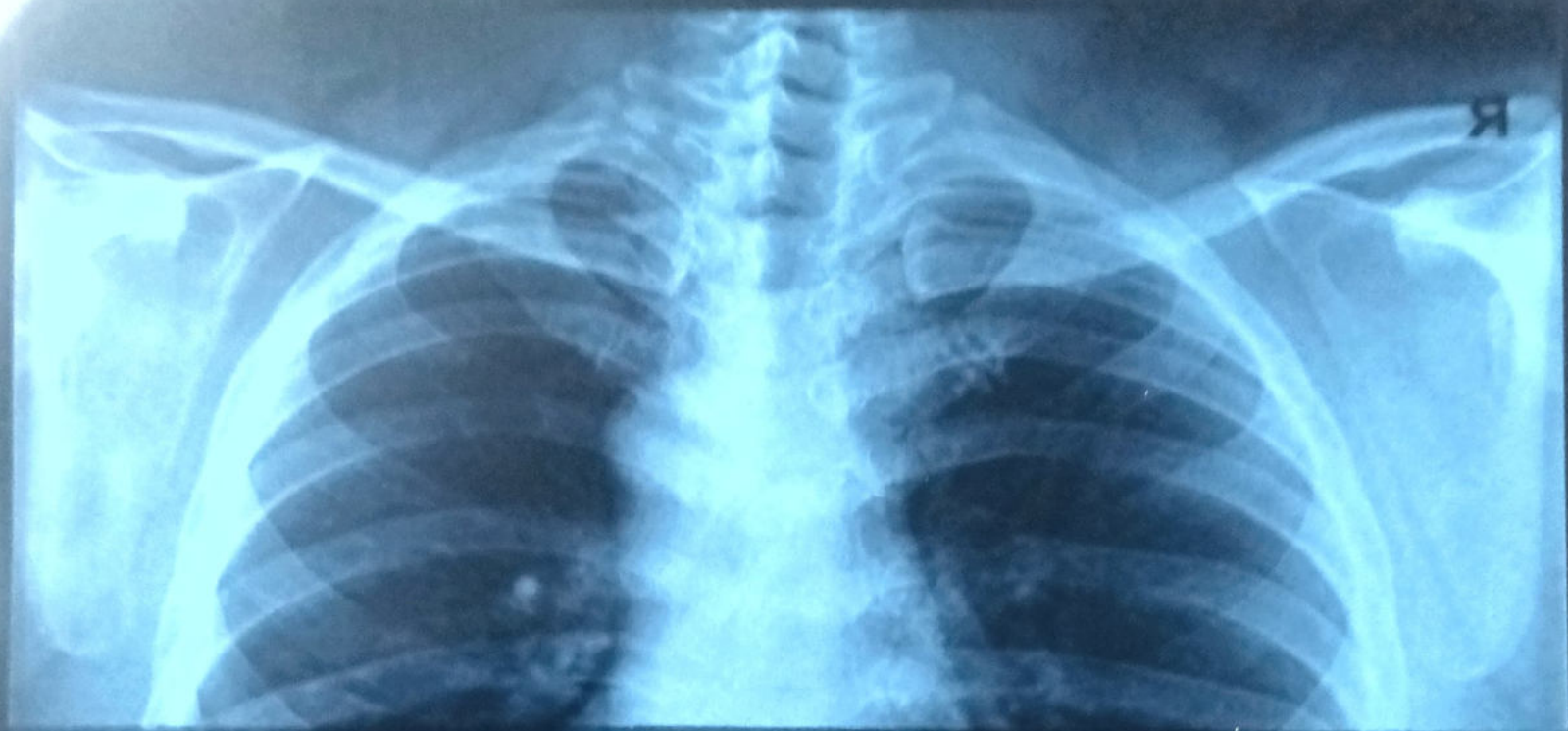
P (II) 0.13 mV  
S (V1) -0.50 mV  
R (V5) 1.56 mV  
Sokol. 2.20 mV

10 mm/mV

10 mm/mV







09-05-2023  
14:23