

## CHECK LIST

NAME	SUMIT PAZ		<input checked="" type="checkbox"/> PATHOLOGY/PP - <i>BAC</i>
OP	2223549		<input checked="" type="checkbox"/> ECG/PFT
AGE	37/A		<input checked="" type="checkbox"/> ECHO/TMT
DATE	24/12/22	24/12/22	<input checked="" type="checkbox"/> USG / CXR
PACKAGE			URINE / STOOL
REFERRED BY			MAMMO/ PAP
HT	179.8cm		EYE/ DENTAL
WT	81kg		GP CONSULTATION
BP	120/70 mm/hg		DIETITION
PULSE	102b/min		CARDIOLOGIST
WAIST	95.5cm		GYNECOLOGIST
HIP	106 cm		DENTAL
RESPIRATORY RATE			
CHEST (INHALE)	105 cm		
CHEST (EXHALE)	101 cm		
ABDOMEN	101 cm		

SPO<sub>2</sub> - 95%



भारत सरकार  
GOVERNMENT OF INDIA



सुमित कुमार पल

Sumit Kumar Pal

जन्मतिथि / DOB: 01/08/1985

पुरुष / MALE



7145 1463 9808

आधार - आम आदमी का अधिकार

*Sumit Kumar Pal*  
24/12/22



**DIAGNOSTICS REPORT**

24/12

Patient Name	: Mr. SUMIT PAL	Order Date	: 24/12/2022 10:57
Age/Sex	: 37 Year(s)/Male	Report Date	: 24/12/2022 14:40
UHID	: NMHK.2223549	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 21/2, CHANDI CHARAN GHOSH RD., BEHALA,Kolkata, West Bengal, 700008	Mobile	: 8697302190

**ELECTROCARDIOGRAM REPORT (ECG)**

HR : 74 bpm  
Rhythm : Sinus  
P wave : Normal  
PR Interval : 142 msec  
QRS axis : Normal (66 Degree)  
QRS duration : 84 msec  
QRS configuration : Normal  
T wave : Non specific changes  
ST segment : Non specific changes  
QTc : 389 msec  
QT : 350 msec

**IMPRESSION:**

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

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

Consultant Cardiologist

RegNo: 55696



SUMIT PAUL

2223549

Male

37 years CM kg

HR 74/min

Intervals:

RR 816 ms  
 P 112 ms  
 PR 142 ms  
 QRS 84 ms  
 QT 350 ms  
 QTc 389 ms  
 (Bezette)  
 10 mm/mV

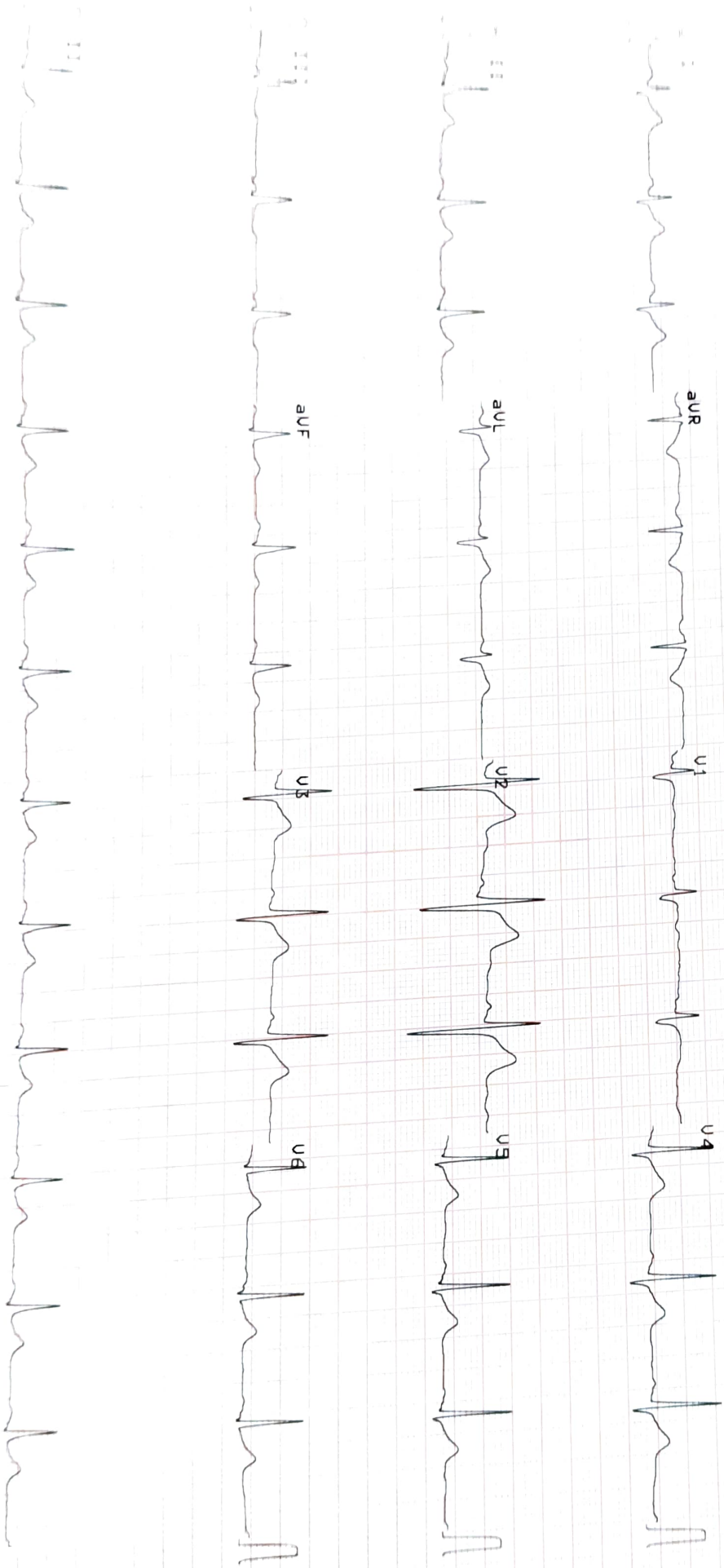
Axis:  
 P 33 °  
 QRS 66 °  
 T 19 °

SINUS RHYTHM  
NORMAL ECG

6.02

UNCONFIRMED REPORT

10 mm/mV



0.05-25 Hz, F50 SSF 585 24.12.2022 12:29:06

NARAYAN MEMORIAL HOSPITAL, BEHALA

AT-102plus 1.25 Ct



## DIAGNOSTICS REPORT

Patient Name	: Mr. SUMIT PAL	Order Date	: 24/12/2022 10:57
Age/Sex	: 37 Year(s)/Male	Report Date	: 24/12/2022 16:47
UHID	: NMHK.2223549	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 21/2, CHANDI CHARAN GHOSH RD., BEHALA, Kolkata, West Bengal, 700008	Mobile	: 8697302190

### ECHOCARDIOGRAPHY (SCREENING)

#### Status of Patient :

- \* No regional wall motion abnormality at rest.
- \* Good LV systolic function (EF = 70 %).
- \* Good RV systolic function (TAPSE = 22 mm).
- \* Normal valve morphology.
- \* Normal LV diastolic function.
- \* No pericardial effusion.
- \* No pulmonary arterial hypertension.
- \* IVC normal diameter & > 50% respiratory variation.
- \* No thrombus, mass, vegetation seen.

*S Roy*

Dr. SAMRAT ROY , MBBS, MRCP (UK)

RegNo: 26344

R

24-12-2022  
11:29

NMHK2223549 X606 SUMIT PAL M 37 years  
NARAYAN MEMORIAL HOSPITAL

Dr

**DIAGNOSTICS REPORT**

Patient Name	Mr. SUMIT PAL	Order Date	: 24/12/2022 10:57
Age Sex	37 Year(s)/Male	Report Date	: 24/12/2022 18:04
UHID	NMHK.2223549	IP No	:
Ref Doctor	NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 21/2, CHANDI CHARAN GHOSH RD., BEHALA, Kolkata, West Bengal, 700008	Mobile	: 8697302190

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

**LIVER** : Liver is enlarged in size (15 cm). Parenchymal echogenicity is raised. Intrahepatic biliary radicles are not dilated. No focal mass lesion is seen.

**PORTA :PV** : Normal. PV measures 0.8 cm.  
**CBD** : Normal.

**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. Spleen measures : 8.2 cm.

**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 : 11.1 cm x 4.3 cm & Left kidney measures : 10.5 cm x 4.7 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. SUMIT PAI	Order Date	24/12/2022 19:57
Age/Sex	37 Year(s)/Male	Report Date	24/12/2022 19:04
UHID	NMHK 2223549	IP No	
Ref. Doctor	NMH	Facility	NARAYAN MEMORIAL HOSPITAL
		Mobile	8697302190
Address	21/2, CHANDI CHARAN GHOSH RD., BEHALA, Kolkata, West Bengal, 700008		

**PROSTATE** : Prostate is normal size. outline and echotexture appear normal. No focal lesion is seen. Prostate measures 3.7 cm x 3.8 cm x 3.4 cm. It weight approx 25.8 gm.

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

**RETROPERITONEUM** : IVC and aorta appear normal.

#### IMPRESSION :

- Hepatomegaly with grade I fatty liver.

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

RegNo 74369





## DIAGNOSTICS REPORT

Patient Name	: Mr. SUMIT PAL	Order Date	: 24/12/2022 10:57
Age/Sex	: 37 Year(s)/Male	Report Date	: 24/12/2022 14:12
UHID	: NMHK.2223549	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
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### CHEST X-RAY REPORT OF PA VIEW

**Elevation of right dome of diaphragm is seen.**

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



## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. SUMIT PAL	<b>Age/Sex</b> : 37 Year(s) / Male
<b>UNID</b> : NMHK 2223549	<b>Order Date</b> : 24/12/2022 10:57
<b>Episode</b> : OP	<b>Mobile No</b> : 8697302190
<b>Ref. Doctor</b> : NMH	<b>DOB</b> : 01/01/1985
<b>Address</b> : 21/2, CHANDI CHARAN GHOSH RD. , BEHALA Kolkata, West Bengal , 700008	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

### Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0094493	Collection Date : 24/12/22 11:26	Ack Date : 24/12/2022 14:03	Report Date : 24/12/22 16:37

#### GLYCOSYLATED HAEMOGLOBIN (HBA1C)

##### SAMPLE : EDTA BLOOD

HBA1C 6.7

##### 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.
  - For HbF > 25%, an alternate platform (Fructosamine) is recommended for testing of HbA1c.
  - Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.
  - 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 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.

#### SERUM CREATININE

##### SAMPLE : SERUM

SERUM CREATININE 1.0 mg/dl 0.7 - 1.2

Method - Jaffe Gen2 Compensated

#### LIVER FUNCTION TEST ( LFT )

##### SAMPLE : SERUM

TOTAL BILIRUBIN 0.9 mg/dl 0 - 1.1

Method - Diazo Method

DIRECT BILIRUBIN 0.3 ▲ mg/dl 0 - 0.2

Method - Diazo Method

# LABORATORY INVESTIGATION REPORT

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Kolkata, West Bengal , 700008

**Age/Sex** : 37 Year(s) / Male

**Order Date** : 24/12/2022 10:57

**Mobile No** : 8697302190

**DOB** : 01/01/1985

**Facility** : NARAYAN MEMORIAL HOSPITAL

INDIRECT BILIRUBIN	0.6	mg/dl	0.2 - 0.9
<i>Method - Calculated</i>			
SGPT (ALT)	<b>73 ▲</b>	U/L	0 - 34
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
SGOT (AST)	<b>36 ▲</b>	U/L	0 - 31
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
ALKALINE PHOSPHATASE	84	U/L	53 - 128
<i>Method - IFCC</i>			
TOTAL PROTEIN	7.4	g/dl	6.4 - 8.2
<i>Method - Biuret</i>			
ALBUMIN	4.7	gm/dl	3.5 - 5.2
<i>Method - Bromocresol Green</i>			
GLOBULIN	2.7	g/dl	2 - 3.5
<i>Method - Calculated</i>			
ALBUMIN:GLOBULIN	1.7	-	1.1 - 2.5
<i>Method - Calculated</i>			
GGT	<b>142 ▲</b>	U/L	8 - 61
<i>Method - Enzymatic colorimetric assay</i>			
<b>BLOOD UREA NITROGEN</b>			
SAMPLE:-	Serum		
BLOOD UREA NITROGEN	7.5	mg/dl	6 - 20
<i>Method - Calculated</i>			
<b>LIPID PROFILE</b>			
<b><u>SAMPLE : SERUM</u></b>			
TOTAL CHOLESTEROL	216	mg/dl	Desirable <200   Borderline 200-239   High ≥240
<i>Method - CHOD-PAP</i>			
HDL CHOLESTEROL	<b>31 ▼</b>	mg/dl	40 - 60
<i>Method - Homogenous Enzymatic Colorimetric</i>			
LDL CHOLESTEROL	135	mg/dl	Optimal < 100   Borderline 130

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**Age/Sex** : 37 Year(s) / Male

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**Facility** : NARAYAN MEMORIAL HOSPITAL

*Method - Homogenous Enzymatic Colorimetric*

**VLDL**

**53 ▲**

*Method - CALCULATED*

mg/dl

0 - 30

**CHOLESTEROL-HDL RATIO**

6.97

**LDL-HDL RATIO**

4.35

**TRIGLYCERIDES**

264

mg/dl

Desirable <150 |  
Borderline 150 - 200 |  
High >200

*Method - Enzymatic Colorimetric*

**URIC ACID**

**SAMPLE : SERUM**

**URIC ACID**

7.0

*Method - Enzymatic Colorimetric*

mg/dl

3.4 - 7

**SAMPLE : SERUM**

**RESULT**

7.4

Sample No : 07H0094493A

Collection Date : 24/12/22 11:26

Ack Date : 24/12/2022 12:52

Report Date : 24/12/22 16:37

**BLOOD SUGAR(F)**

**SAMPLE : PLASMA**

**BLOOD SUGAR FASTING**

**117 ▲**

*Method - Hexokinase*

mg/dl

70 - 109

Sample No : 07H0094543A

Collection Date : 24/12/22 15:32

Ack Date : 24/12/2022 16:54

Report Date : 25/12/22 11:00

**BLOOD SUGAR(PP)**

**SAMPLE : PLASMA**

**BLOOD SUGAR PP**

87

*Method - Hexokinase*

mg/dl

70.00 - 140.00

End of Report



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

### LABORATORY INVESTIGATION REPORT

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<b>UHID</b> : NMHK.2223549	<b>Order Date</b> : 24/12/2022 10:57
<b>Episode</b> : OP	<b>Mobile No</b> : 8697302190
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<b>Address</b> : 21/2, CHANDI CHARAN GHOSH RD. , BEHALA Kolkata, West Bengal ,700008	<b>Facility</b> : NARAYAN MEMORIAL HOSPITAL

### Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0094493	Collection Date : 24/12/22 11:26	Ack Date : 24/12/2022 11:38	Report Date : 26/12/22 11:15

#### BLOOD GROUPING & Rh TYPING

##### SAMPLE : EDTA BLOOD

**BLOOD GROUP** ' AB '

*Method - Agglutination forward & Reverse*

**RH TYPE** POSITIVE

#### THYROID FUNCTION TEST

##### SAMPLE : SERUM

<b>T3</b>	1.28	ng/ml	0.6 - 1.8
<i>Method - ECLIA</i>			
<b>T4</b>	7.02	ug/dL	5.4 - 11.7
<i>Method - ECLIA</i>			
<b>TSH</b>	10.51	uIU/ml	Adult Male – 0.27-5.50 Adult Female – 0.27-5.50 Newborns - <25 Upto 12 years – 0.3-5
<i>Method - ECLIA</i>			

#### 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).

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**Facility** : NARAYAN MEMORIAL HOSPITAL

End of Report



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

Checked By



**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b>	: Mr. SUMIT PAL	<b>Age/Sex</b>	: 37 Year(s) / Male
<b>UNITD</b>	: NMHK.2223549	<b>Order Date</b>	: 24/12/2022 10:57
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**Hematology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0094493	Collection Date : 24/12/22 11:26	Ack Date : 24/12/2022 11:38	Report Date : 25/12/22 10:49

**COMPLETE HAEMOGRAM ( CBC )**

**SAMPLE : EDTA BLOOD**

HAEMOGLOBIN (HB) <i>Method - Colorimetric method (Cyn Meth)</i>	16.0	gm/dl	13 - 17
RBC COUNT <i>Method - Electrical Impedance Method</i>	6.29 ▲	x10 <sup>6</sup> /ul	4.5 - 5.5
TOTAL WBC COUNT <i>Method - Electrical Impedance Method</i>	6.8	10 <sup>3</sup> /cmm	4 - 10
PLATELET COUNT <i>Method - Electrical Impedance Method</i>	150	10 <sup>3</sup> /cmm	150 - 410
PCV <i>Method - RBC pulse ht. detection method</i>	51 ▲	%	40 - 50
MCV <i>Method - calculated</i>	82 ▼	fl	83 - 101
MCH <i>Method - Calculated</i>	25 ▼	pg	27 - 32
MCHC <i>Method - Calculated</i>	31 ▼	gm/dl	31.5 - 34.5
ESR <i>Method - Modified Westergren Method</i>	05	%	0 - 10

**DIFFERENTIAL COUNT**

NEUTROPHILS <i>Method - Microscopy</i>	56	%	40 - 80
LYMPHOCYTES <i>Method - Microscopy</i>	39	%	20 - 40
MONOCYTES <i>Method - Microscopy</i>	02	%	2 - 10





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Kolkata, West Bengal ,700008

<b>EOSINOPHILS</b>	03	%	1 - 6
<i>Method - Microscopy</i>			
<b>BASOPHILS</b>	00	%	0 - 2
<i>Method - Microscopy</i>			

#### **PERIPHERAL BLOOD SMEAR**

**RBC** Normocytic normochromic  
**WBC** Within normal limit  
**PLATELET** Adequate

End of Report

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

Checked By







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**SAMPLE : URINE**

RESULT

ABSENT

End of Report

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

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

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