

CHECK LIST

NAME	Debraj Mishra	PATHOLOGY/PP
OP		ECG/PFT
AGE	53 yrs	ECHO/TMT
DATE	25/3/23	USG / CXR
PACKAGE		URINE / STOOL
REFERRED BY		MAMMO/ PAP
HT	171 cm	EYE/ DENTAL
WT	70 kg	GP CONSULTATION
BP	120/80 mmHg	DIETITION
PULSE	78 bpm	CARDIOLOGIST
WAIST	91 cm	GYNECOLOGIST
HIP	95 cm	DENTAL
RESPIRATORY RATE		
CHEST (INHALE)	88 cm	
CHEST (EXHALE)	86.5 cm	
ABDOMEN	91 cm	

SpO₂ - 98%



ভারত সরকার
Government of India



দেবপ্রসাদ মিস্ত্রী
Debaprasad Mistry
জন্মতারিখ/ DOB: 28/10/1969
পুরুষ / MALE



5154 6001 0208

আমার আধার, আমার পরিচয়



ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ
Unique Identification Authority of India

ঠিকানা:
S/O শৈলেন্দ্র নাথ মিস্ত্রী, জালগাছি,
বৈঞ্চ বেরিয়া, বৈঁচ বেরিয়া, দক্ষিণ ২৪
পর্গনা,
পশ্চিম বঙ্গ - 743375

Address:
S/O Sailendra Nath Mistry,
Jalgachi, Boinch Beria, Bainch
Beria, South 24 Parganas,
West Bengal - 743375

5154 6001 0208



1947



help@uidai.gov.in



www.uidai.gov.in



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. DEBA PRASAD MISTRY	Age/Sex : 53 Year(s)/Male
UHID : NMHK.2307105	Order Date : 25/03/2023 08:44
Episode : OP	Mobile No : 8436313163
Ref. Doctor : NMH	DOB : 28/10/1969
Address : JALGACHI, , ,FALTA,West Bengal ,743375	Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108317	Collection Date : 25/03/23 09:13	Ack Date : 25/03/2023 11:35	Report Date : 27/03/23 11:23

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB) <i>Colorimetric method (Cyn Meth)</i>	14.2	gm/dl	13 - 17
RBC COUNT <i>Electrical Impedance Method</i>	4.9	$\times 10^6/\text{ul}$	4.5 - 5.5
TOTAL WBC COUNT <i>Electrical Impedance Method</i>	7.1	$10^3/\text{cmm}$	4 - 10
PLATELET COUNT <i>Electrical Impedance Method</i>	220	$10^3/\text{cmm}$	150 - 410
PCV <i>RBC pulse ht. detection method</i>	44	%	40 - 50
MCV <i>calculated</i>	91	fl	83 - 101
MCH <i>Calculated</i>	29	pg	27 - 32
MCHC <i>Calculated</i>	32	gm/dl	31.5 - 34.5
ESR <i>Modified Westergren Method</i>	10	%	0 - 12
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS <i>Microscopy</i>	50	%	40 - 80
LYMPHOCYTES <i>Microscopy</i>	31	%	20 - 40
MONOCYTES <i>Microscopy</i>	03	%	2 - 10



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EOSINOPHILS

16 ▲

%

1 - 6

Microscopy

BASOPHILS

00

%

0 - 2

Microscopy

PERIPHERAL BLOOD SMEAR

RBC

Normocytic normochromic

WBC

Eosinophilia

PLATELET

Adequate

End of Report

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

Checked By



LABORATORY INVESTIGATION REPORT

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DOB : 28/10/1969

Facility : NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108317	Collection Date : 25/03/23 09:13	Ack Date : 25/03/2023 12:48	Report Date : 27/03/23 11:23

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	30	ml	
COLOUR	PALE YELLOW		
APPEARANCE	CLEAR		
SPECIFIC GRAVITY	1.010		1.010 - 1.030
REACTION(pH)	ACIDIC (pH-6.0)		

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	2-3/HPF		<5/HPF
EPITHELIAL CELLS	1-2/HPF		<20/HPF
RBC	ABSENT		ABSENT
CAST	ABSENT		ABSENT
CRYSTAL	ABSENT		ABSENT

Please correlate clinically.

End of Report

Dr. MAINAK CHAKRABORTY
MBBS, MD(PATH)



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Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0108317	Collection Date : 25/03/23 09:13	Ack Date : 25/03/2023 11:35	Report Date : 25/03/23 16:54

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP ' A '

Method - Agglutinationforward & Reverse

RH TYPE POSITIVE

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	1.01	ng/ml	0.60 - 1.80
Method - ECLIA			
T4	11.17	ug/dL	5.40 - 11.70
Method - ECLIA			
TSH	2.87	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).



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Age/Sex : 53 Year(s) / Male

Order Date : 25/03/2023 08:44

Mobile No : 8436313163

DOB : 28/10/1969

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 : 07H0108317	Collection Date : 25/03/23 09:13	Ack Date : 25/03/2023 10:55	Report Date : 25/03/23 13:35
SERUM CREATININE			
SAMPLE : SERUM			
SERUM CREATININE	1.1	mg/dl	0.7 - 1.2
<i>Method - Jaffe Gen2 Compensated</i>			
LIVER FUNCTION TEST (LFT)			
SAMPLE : SERUM			
TOTAL BILIRUBIN	0.5	mg/dl	0 - 1.1
<i>Method - Diazo Method</i>			
DIRECT BILIRUBIN	0.2	mg/dl	0 - 0.2
<i>Method - Diazo Method</i>			
INDIRECT BILIRUBIN	0.3	mg/dl	0.2 - 0.9
<i>Method - Calculated</i>			
SGPT (ALT)	32	U/L	0 - 34
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
SGOT (AST)	22	U/L	0 - 31
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
ALKALINE PHOSPHATASE	83	U/L	53 - 128
<i>Method - IFCC</i>			
TOTAL PROTEIN	7.5	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	2.8	g/dl	2 - 3.5
<i>Method - Calculated</i>			
ALBUMIN:GLOBULIN	1.7	-	1.1 - 2.5
<i>Method - Calculated</i>			
GGT	37	U/L	8 - 61



LABORATORY INVESTIGATION REPORT

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Address : JALGACHI, , ,FALTA,West Bengal ,743375

Age/Sex : 53 Year(s) / Male

Order Date : 25/03/2023 08:44

Mobile No : 8436313163

DOB : 28/10/1969

Facility : NARAYAN MEMORIAL HOSPITAL

Method - Enzymatic colorimetric assay

BLOOD UREA NITROGEN

BLOOD UREA NITROGEN 11.2 mg/dl 6 - 20

Method - Calculated

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL 249 mg/dl Desirable <200 |
Borderline 200-239 |
High >=240

Method - CHOD-PAP

HDL CHOLESTEROL 56 mg/dl 40 - 60

Method - Homogenous Enzymatic Colorimetric

LDL CHOLESTEROL 165 mg/dl Optimal < 100 |
Borderline 130

Method - Homogenous Enzymatic Colorimetric

VLDL 28 mg/dl 0 - 30

Method - CALCULATED

CHOLESTEROL-HDL RATIO 4.45 -

LDL-HDL RATIO 2.95 -

TRIGLYCERIDES 142 mg/dl Desirable <150 |
Borderline 150 - 200 |
High >200

Method - Enzymatic Colorimetric

URIC ACID

SAMPLE : SERUM

URIC ACID 6.4 mg/dl 3.4 - 7

Method - Enzymatic Colorimetric

SAMPLE : SERUM

RESULT 10.2

Sample No : 07H0108317A

Collection Date : 25/03/23 09:13

Ack Date : 25/03/2023 12:01

Report Date : 25/03/23 13:35

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. DEBA PRASAD MISTRY
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Episode : OP
Ref. Doctor : NMH
Address : JALGACHI, , FALTA, West Bengal ,743375

Age/Sex : 53 Year(s) / Male
Order Date : 25/03/2023 08:44
Mobile No : 8436313163
DOB : 28/10/1969
Facility : NARAYAN MEMORIAL HOSPITAL

HBA1C 5.5

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 : 07H0108317B Collection Date : 25/03/23 09:13 Ack Date : 25/03/2023 12:07 Report Date : 25/03/23 13:35

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING 98 mg/dl 70 - 109

Method - Hexokinase

Sample No : 07H0108365B Collection Date : 25/03/23 12:18 Ack Date : 25/03/2023 13:34 Report Date : 25/03/23 16:10

BLOOD SUGAR(PP)

SAMPLE : PLASMA

BLOOD SUGAR PP 122 mg/dl 70.00 - 140.00

Method - Hexokinase

End of Report

Dr.S. Chatterjee
MD, MBBS, FAACC



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. DEBA PRASAD MISTRY
UHID : NMHK.2307105
Episode : OP
Ref. Doctor : NMH
Address : JALGACHI, , ,FALTA,West Bengal ,743375

Age/Sex : 53 Year(s) / Male
Order Date : 25/03/2023 08:44
Mobile No : 8436313163
DOB : 28/10/1969
Facility : NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
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Sample No : 07H0108317	Collection Date : 25/03/23 09:13	Ack Date : 25/03/2023 12:48	Report Date : 26/03/23 12:21
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URINE FOR SUGAR FASTING^a

SAMPLE : URINE

RESULT ABSENT

Sample No : 07H0108365	Collection Date : 25/03/23 12:18	Ack Date : 25/03/2023 17:11	Report Date : 26/03/23 12:21
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URINE FOR SUGAR PP

SAMPLE : URINE

RESULT ABSENT

End of Report

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

Checked By



DEBA PRASAD MISTRY

PID NO: P2162200363890
Age: 53.0 Year(s) Sex: Male



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

Medical Laboratory Report

VID: 220216000329488

Registered On:
25/03/2023 06:54 PM
Collected On:
25/03/2023 6:53PM
Reported On:
25/03/2023 10:15 PM

Investigation

PSA- Prostate Specific Antigen
(Serum,ECLIA)

Observed Value

0.909

Unit

ng/mL

Biological Reference Interval

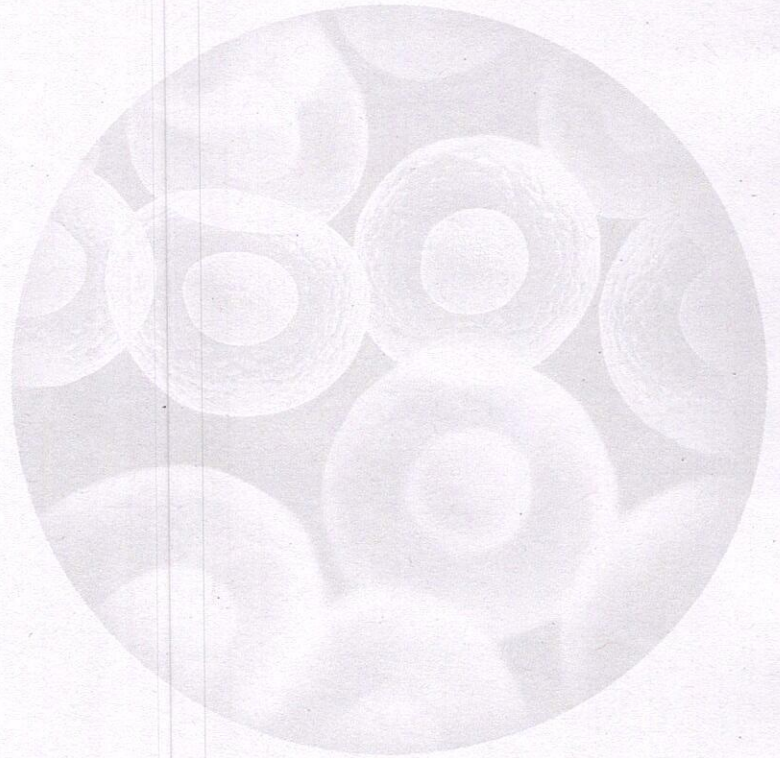
Conventional for all ages: 0 - 4
50 - 59 yrs: 0 - 3.5

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 --



Dr. Anindita Ali



DIAGNOSTICS REPORT

Patient Name : Mr. DEBA PRASAD MISTRY
Age/Sex : 53 Year(s)/Male
UHID : NMHK.2307105
Ref. Doctor : NMH

Address : JALGACHI,, ,FALTA, West Bengal,
743375

Order Date : 25/03/2023 08:44
Report Date : 26/03/2023 13:18
IP No :
Facility : NARAYAN MEMORIAL
HOSPITAL

Mobile : 8436313163

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. MADHUSHREE RAY NASKAR, MBBS
,DMRD
Consultant Radiologist
RegNo: 57032



DIAGNOSTICS REPORT

Patient Name	: Mr. DEBA PRASAD MISTRY	Order Date	: 25/03/2023 08:44
Age/Sex	: 53 Year(s)/Male	Report Date	: 25/03/2023 15:01
UHID	: NMHK.2307105	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: JALGACHI,, ,FALTA, West Bengal, 743375	Mobile	: 8436313163

ECHOCARDIOGRAPHY (SCREENING)

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 60%).
- * Good RV systolic function (TAPSE = 21 mm).
- * Trivial TR. TR gradient = 15 mmHg.
- * Normal valve morphology.
- * Grade I LV diastolic dysfunction.
- * No pericardial effusion.
- * No pulmonary arterial hypertension.
- * IVC normal diameter & > 50% respiratory variation.
- * No thrombus, mass, vegetation seen.

**Dr.INDIRA BANERJEE , MD,DNB,MRCP
CH (UK)**

Board Certified Comprehensive
Echocardiographer (USA)



DIAGNOSTICS REPORT

Heo

Patient Name	: Mr. DEBA PRASAD MISTRY	Order Date	: 25/03/2023 08:44
Age/Sex	: 53 Year(s)/Male	Report Date	: 25/03/2023 14:28
UHID	: NMHK.2307105	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: JALGACHI,, ,FALTA, West Bengal, 743375	Mobile	: 8436313163

ELECTROCARDIOGRAM REPORT (ECG)

HR : 77 bpm
Rhythm : Sinus
P wave : Normal
PR Interval : 160 msec
QRS axis : Normal (67 Degree)
QRS duration : 86 msec
QRS configuration : Normal
T wave : Non specific changes
ST segment : Non specific changes
QTc : 393 msec
QT : 346 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

DEBA PRASAD MISTRY

HR 77/min

Axis: P 56°

SINUS RHYTHM
OTHERWISE NORMAL ECG

UNCONFIRMED REPORT

2307105

Male

53 years

..... cm / kg

Intervals:
RR 777 ms

P 102 ms
T 59°

PR 160 ms

QR5 86 ms

QT 346 ms

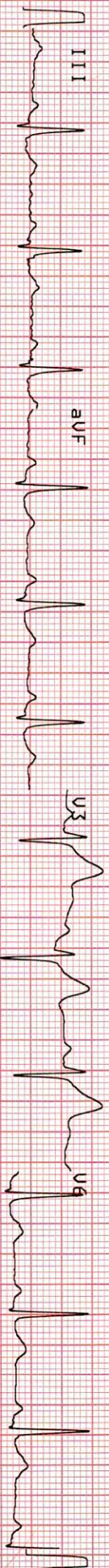
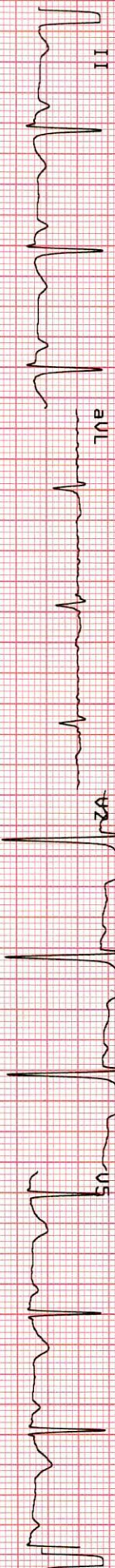
QTc 393 ms

(Bazett)

10 mm/mV

P (II) 0.22 mV
S (V1) -1.27 mV
R (V5) 1.54 mV
Sokol. 3.59 mV

10 mm/mV



10 mm/mV

25 mm/s

0.05-25 Hz FS0 55F 585 25.03.2023 11:19:32

NARAYAN MEMORIAL HOSPITAL, BEHALA

RT-102plus 1.25 ct