

Narayan Memorial Hospital

(A Unit of Narayan Health Services Pvt. Ltd.)



DIAGNOSTICS REPORT

| | | | |
|--------------|---|-------------|-----------------------------|
| Patient Name | : Mrs. ESTHER HANSDA | Order Date | : 02/12/2023 12:41 |
| Age/Sex | : 32 Year(s)/Female | Report Date | : 03/12/2023 08:54 |
| UHID | : NMHK.2326695 | IP No | : |
| Ref. Doctor | : NMH | Facility | : NARAYAN MEMORIAL HOSPITAL |
| | | Mobile | : 7972404695 |
| Address | : BANK OF BARODA, ,Jharkhand, DELHI, 816107 | | |

ELECTROCARDIOGRAM REPORT (ECG)

| | |
|-------------------|------------------------|
| HR | : 72 bpm |
| Rhythm | : Sinus |
| P wave | : Normal |
| PR Interval | : 130 msec |
| QRS axis | : Normal |
| QRS duration | : 84 msec |
| QRS configuration | : Normal |
| T wave | : Non specific changes |
| ST segment | : Non specific changes |
| QTc | : 409 msec |
| QT | : 372 msec |

IMPRESSION:

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

Dr. Sudip Chakraborty, MBBS, DIP (Preventative Cardiology) fellow Clinical

RegNo: 56285

Behala Manton, 85, (Mail - 601), Diamond Harbour Road, Kolkata - 700034
Ph : 033 6640 0000 | Mob : +91 62921 95051
E : contact@nmh.org.in

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ESTHER HANSON

2326695

Female

32 years

cm / kg

HR 72/min

Intervals:

| | |
|----------|----------|
| RR | 835 ms |
| P | 64 ms |
| PR | 130 ms |
| QRS | 84 ms |
| QT | 372 ms |
| QTc | 409 ms |
| (Bazett) | 10 mm/mV |

P axis: 0°

QRS 76°

T 31°

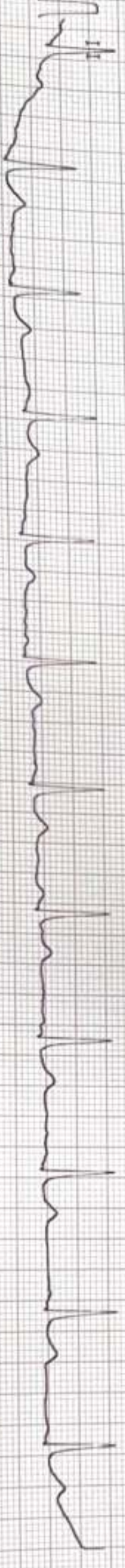
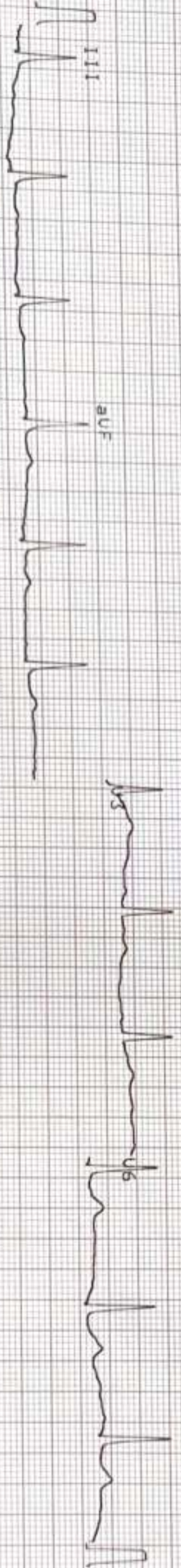
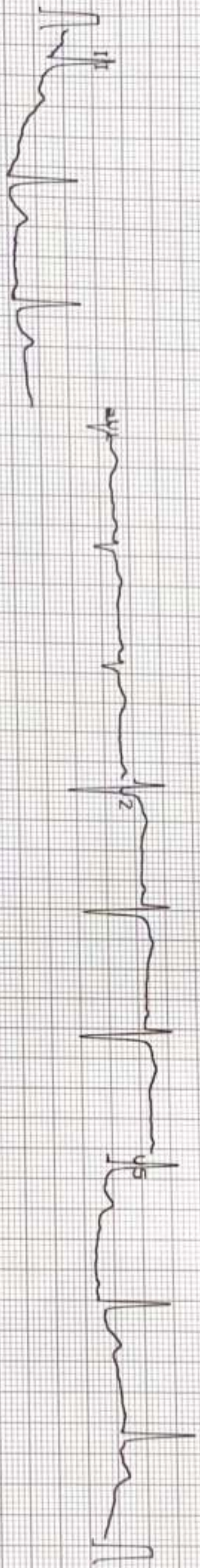
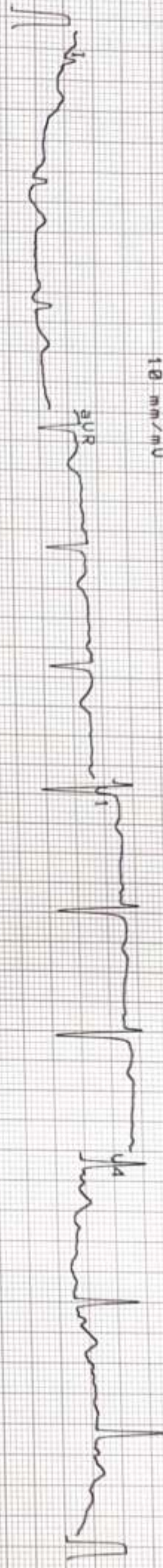
| | |
|--------|----------|
| P (II) | 0.03 mV |
| S (U1) | -1.40 mV |
| R (U5) | 1.42 mV |
| Sokol. | 2.82 mV |

SINUS RHYTHM
NORMAL ECG

6.02

UNCONFIRMED REPORT

10 mm/mV



10 mm/mV

MEMORIAL

RT-102plus 1.25 Ct



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ECHOCARDIOGRAPHY (SCREENING)

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 62%).
- * Good RV systolic function (TAPSE = 18 mm).
- * Normal valve morphology.
- * Normal LV diastolic function.
- * No pericardial effusion.
- * No pulmonary arterial hypertension (PASP = 17 mmHg).
- * IVC normal diameter & > 50% respiratory variation.
- * No thrombus, mass, vegetation seen.

Dr. Sudip Chakraborty, MBBS, DIP (Preventative Cardiology) fellow Clinical

RegNo: 56285

Mail

Health Check Up NMH <healthcheckup.nmh@gmail.com>

Health Check up Booking Request(bobS51459), Beneficiary Code-17986

wellness@mediwheel.in> Please collect Advanced Zerox 24 November 2023 at 14:15
 healthcheckup.nmh@gmail.com Copy with BP, Height.
 care@mediwheel.in



 **011-41195959**
 Email:wellness@mediwheel.in

Dear Narayan Memorial Hospital,
 City : Kolkata . Address : 601, Diamond Harbour Rd, Manton, Behala, Kolkata - 700034 ,
 We have received the confirmation for the following booking .

Name : ESTHER HANSDA
 Age : 39
 Gender : Male
 Package Name : Medi-Wheel Metro Full Body Health Checkup Female Below 40
 Contact Details : 8390762392
 Booking Date : 24-11-2023
 Appointment Date : 02-12-2023 @ ram - Arcofemi (2300/- credit)

| Member Information | | | |
|-------------------------|-----|--------|--------------|
| Booked Member Name | Age | Gender | Cost(In INR) |
| ESTHER HANSDA | 32 | Female | Cashless |
| Total amount to be paid | | | Cashless |

We will get back to you with confirmation update shortly. Please find the package details as attached for your reference.

Package Name : Medi-Wheel Metro Full Body Health Checkup Female Below 40 - Includes (37)Tests
 Tests included in this Package : Ecg, TSH, X-ray Chest, Stress Test (tmt)/ 2d Echo, Blood Sugar Postprandial, A:g Ratio, Blood Group, Total Cholesterol, Triglycerides, Fasting Blood Sugar, Ultrasound Whole Abdomen , Glycosylated Haemoglobin (hba1c), Hdl, Vldl, Urine Analysis, LDL, Total Protine, General Consultation, HDL/ LDL ratio, GGT(Gamma-glutamyl Transferase), Eye Check-up consultation, ALP (ALKALINE PHOSPHATASE), Uric Acid, AST/ALT Ratio, Serum Protein, CBC with ESR, Stool Analysis, Urine Sugar Fasting, Urine Sugar PP, T3, T4, Cholesterol Total / HDL Ratio, BUN, BUN/Creatinine Ratio, Bilirubin Total & Direct and Indirect, Albumin, Globulin

भारत सरकार
Government of India



एस्थर हंसदा
Esther Hansda
जन्म तिथि / DOB: 04/06/1991
महिला / FEMALE



73666 83995 2721

भेरा आधार, भेरी पहचान

Print Date: 12/12/2020

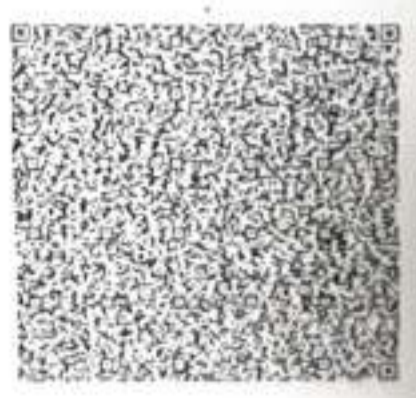


भारतीय विशिष्ट पहचान प्राधिकरण
Unique Identification Authority of India



पता: D/O: रमेश हंसदा, नीमा काला,
तालभटिया, गोड्डा, झारखण्ड,
814165

Address: D/O: Ramesh Hansda, Nima
Kala, Lalmaite, Godda, Jharkhand, 814165



73666 83995 2721



1947



help@uidai.gov.in



www.uidai.gov.in



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. ESTHER HANSDA

UHID : NMHK.2326695

Episode : OP

Ref. Doctor : NMH

Address : BANK OF BARODA , Jharkhand,DELHI ,816107

Age/Sex : 32 Year(s)/Female

Order Date : 02/12/2023 12:41

Mobile No : 7972404695

DOB : 01/01/1991

Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
|------------------------|----------------------------------|-----------------------------|------------------------------|
| Sample No : 07H0150047 | Collection Date : 02/12/23 16:07 | Ack Date : 02/12/2023 16:16 | Report Date : 02/12/23 16:21 |

BLOOD GROUPING & Rh TYPING

Sample- EDTA Whole Blood

SAMPLE : EDTA BLOOD

BLOOD GROUP

Agglutination forward & Reverse

RH TYPE

'B'

POSITIVE

COMPLETE HAEMOGRAM (CBC)

Sample- EDTA Whole Blood

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB)

Colorimetric method (Cym Meth)

RBC COUNT

Electrical Impedance Method

TOTAL WBC COUNT

Electrical Impedance Method

PLATELET COUNT

Electrical Impedance Method

PCV

RBC pulse ht. detection method

MCV

calculated

MCH

Calculated

MCHC

Calculated

ESR

Modified Westergren Method

DIFFERENTIAL COUNT

NEUTROPHILS

Microscopy

LYMPHOCYTES

Microscopy

10.9 ▼

gm/dl

12 - 15

4.6

x10⁶/ul

3.8 - 4.8

6.1

10³/cm³

4 - 10

295

10³/cm³

150 - 410

36

%

36 - 46

78 ▼

fl

83 - 101

24 ▼

pg

27 - 32

30 ▼

gm/dl

31.5 - 34.5

50 ▲

%

0 - 12

54

%

40 - 80

35

%

20 - 40



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| | | | |
|-------------------|----|---|--------|
| MONOCYTES | 05 | % | 2 - 10 |
| <i>Microscopy</i> | | | |
| EOSINOPHILS | 06 | % | 1 - 6 |
| <i>Microscopy</i> | | | |
| BASOPHILS | 00 | % | 0 - 2 |
| <i>Microscopy</i> | | | |

PERIPHERAL BLOOD SMEAR

RBC

Microcytes(+) Hypochromia(+)

WBC

Within normal limits.

PLATELET

Adequate.

End of Report

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

Checked By



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Order Date : 02/12/2023 12:41
Mobile No : 7972404695
DOB : 01/01/1991
Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
|------------------------|----------------------------------|-----------------------------|------------------------------|
| Sample No : 07H0150047 | Collection Date : 02/12/23 16:07 | Ack Date : 02/12/2023 16:16 | Report Date : 02/12/23 20:18 |

SERUM CREATININE

Sample- Serum

SAMPLE : SERUM

SERUM CREATININE 0.5 mg/dl 0.5 - 0.9

Jaffe Gen2 Compensated

LIVER FUNCTION TEST (LFT)

Sample- Serum

SAMPLE : SERUM

TOTAL BILIRUBIN 0.7 mg/dl 0 - 1.1

Diazo Method

DIRECT BILIRUBIN 0.2 mg/dl 0 - 0.2

Diazo Method

INDIRECT BILIRUBIN 0.5 mg/dl 0.2 - 0.9

Calculated

SGPT (ALT) 42 ▲ U/L 0 - 34

IFCC Without Pyridoxal Phosphate

SGOT (AST) 31 U/L 0 - 31

IFCC Without Pyridoxal Phosphate

ALKALINE PHOSPHATASE 132 ▲ U/L 53 - 128

IFCC

TOTAL PROTEIN 7.6 g/dl 6.4 - 8.2

Biuret

ALBUMIN 4.6 gm/dl 3.5 - 5.2

Bromocresol Green

GLOBULIN 3.0 g/dl 2 - 3.5

Calculated

ALBUMIN:GLOBULIN 1.5 - 1.1 - 2.5

Calculated

GGT 109 ▲ U/L 5 - 36

Enzymatic colorimetric assay

BLOOD UREA NITROGEN

Sample- Serum

BLOOD UREA NITROGEN 07 mg/dl 6 - 20



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Facility : NARAYAN MEMORIAL HOSPITAL

Calculated

LIPID PROFILE

Sample- Serum

SAMPLE : SERUM

TOTAL CHOLESTEROL

145

mg/dl

Desirable <200 |
Borderline 200-239 |
High >=240

CHOD-PAP

HDL CHOLESTEROL

28 ▼

mg/dl

40 - 60

Homogenous Enzymatic Colorimetric

LDL CHOLESTEROL

79

mg/dl

Optimal < 100 |
Borderline 130 - 159 |
High >160

Homogenous Enzymatic Colorimetric

VLDL

38 ▲

mg/dl

0 - 30

CALCULATED

CHOLESTEROL-HDL RATIO

5.18

-

LDL-HDL RATIO

2.82

-

TRIGLYCERIDES

192

mg/dl

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

Enzymatic Colorimetric

URIC ACID

Sample- Serum

SAMPLE : SERUM

URIC ACID

3.7

mg/dl

2.4 - 5.7

Enzymatic Colorimetric

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

Sample- EDTA Whole Blood A

SAMPLE : EDTA BLOOD

HBA1C

6.6



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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 glyceimic 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.

BLOOD SUGAR(PP)

Sample- Plasma

SAMPLE : PLASMA

BLOOD SUGAR PP

140

mg/dl

70.00 - 140.00

Hexokinase

BLOOD SUGAR(F)

Sample- Plasma

SAMPLE : PLASMA

BLOOD SUGAR FASTING

127 ▲

mg/dl

70 - 109

Hexokinase

End of Report

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



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Biochemistry

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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BUN / CREATINE RATIO

Sample- Serum

SAMPLE : SERUM

BUN / CREATINE RATIO

14.0

End of Report

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

Checked By



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Immunology

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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THYROID FUNCTION TEST

Sample- Serum

SAMPLE : SERUM

| | | | |
|-------------|------|--------|---|
| T3 ECLIA | 1.29 | ng/ml | 0.6 - 1.8 |
| T4 ECLIA | 9.47 | ug/dL | 5.4 - 11.7 |
| TSH | 1.88 | uIU/ml | Adult Male – 0.27-5.5 0 Adult Female – 0.27- 5.50 Newborns - <25 Upto 12 years – 0.3- 5 |

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).

End of Report

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



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Clinical Pathology

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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| Sample No : 07H0150047 | Collection Date : 02/12/23 16:07 | Ack Date : 02/12/2023 16:16 | Report Date : 03/12/23 11:24 |

URINE FOR R/E

Sample- Urine

SAMPLE : URINE

PHYSICAL EXAMINATION

| | | | |
|------------------|-------------------|----|---------------|
| VOLUME | 40 | ml | |
| COLOUR | REDDISH | | |
| APPEARANCE | SLIGHTLY HAZY | | |
| SPECIFIC GRAVITY | 1.015 | | 1.010 - 1.030 |
| REACTION(pH) | ALKALINE (pH-7.5) | | |

CHEMICAL EXAMINATION

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

MICROSCOPIC EXAMINATION

| | | |
|------------------|---------|---------|
| PUS CELLS | 2-4/HPF | <5/HPF |
| EPITHELIAL CELLS | 4-6/HPF | <20/HPF |
| RBC | PLENTY | |
| CAST | ABSENT | ABSENT |
| CRYSTAL | ABSENT | ABSENT |

Please correlate clinically.

End of Report

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



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Clinical Pathology

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| Sample No : 07H0150047 | Collection Date : 02/12/23 16:07 | Ack Date : 02/12/2023 16:16 | Report Date : 02/12/23 20:18 |

URINE FOR SUGAR FASTING

Sample- Urine

SAMPLE : URINE
RESULT

ABSENT

End of Report

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

Checked By



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Clinical Pathology

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|---------------|---------|-------|----------------------|

Sample No : 07H0150047

Collection Date : 02/12/23 16:07

Ack Date : 02/12/2023 17:10

Report Date : 02/12/23 20:18

URINE FOR SUGAR PP

Sample- Urine

SAMPLE : URINE

RESULT

ABSENT

End of Report

Dr.S. Chatterjee
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X-RAY CHEST PA VIEW

No active lung parenchymal lesion is seen.
Both hila are normal in position, size and density.
Cardiothoracic ratio appear normal.
Trachea and mediastinum are normal in position.
Both costo-phrenic angles are clear.
Domes of diaphragm are normal in position and outlines are well delineated.
Bony thorax appears unremarkable .

Needs clinical correlation.

Dr.SUBRATA NAG , MBBS,DNB,Fellow
intervention/endovascular surgery

RegNo: 66718



DIAGNOSTICS REPORT

| | | | |
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| Age/Sex | : 32 Year(s)/Female | Report Date | : 02/12/2023 13:40 |
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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 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. Spleen measures : 10.9 cm.

KIDNEYS :Both kidneys are normal in size, shape, outline, position and parenchymal echogenicity. Cortico medullary differentiation maintained.
No evidence of any calculus/ mass / hydronephrosis is seen.
Right kidney measures : 10.6 cm & Left kidney measures : 10.8 cm.

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

UTERUS : Anteverted normal in size, shape, outline, position and parenchymal echogenicity. Cavity is empty. Uterus measures 7.5 cm x 3.6 cm x 3.2 cm.

OVARIES : Both ovaries are normal in size, shape and echopattern.
Right ovary : measures 2.1 cm x 1.5 cm. Left ovary : measures 2.4 cm x 1.1 cm.



DIAGNOSTICS REPORT

| | | | |
|--------------|--|-------------|-----------------------------|
| Patient Name | : Mrs. ESTHER HANSDA | Order Date | : 02/12/2023 12:41 |
| Age/Sex | : 32 Year(s)/Female | Report Date | : 02/12/2023 13:40 |
| UHID | : NMHK.2326695 | IP No | : |
| Ref. Doctor | : NMH | Facility | : NARAYAN MEMORIAL HOSPITAL |
| | | Mobile | : 7972404695 |
| Address | : BANK OF BARODA, Jharkhand, DELHI, 816107 | | |

PERITONEUM : :No free fluid is noted.

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

IMPRESSION : Normal study.

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