

Narayan Memorial Hospital

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



DIAGNOSTICS REPORT

Patient Name : Mr. Kamal Shil
Age/Sex : 37 Year(s)/Male
UHID : NMHK.2204175
Ref. Doctor : NMH

Order Date : 26/03/2022 13:53
Report Date : 26/03/2022 17:24
IP No :
Facility :

Address : FLAT-5A, BLOCK-41, GREENFIELD
CITY, Kolkata, West Bengal, 700141

Mobile : 9707690218
NARAYAN MEMORIAL
HOSPITAL

ECHOCARDIOGRAPHY (SCREENING)

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 65 %).
- * Good RV systolic function (TAPSE = 25 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.

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

Board Certified Comprehensive
Echocardiographer (USA)

DIAGNOSTICS REPORT

Patient Name	: Mr. Kamal Shil	Order Date	: 26/03/2022 13:53
Age/Sex	: 37 Year(s)/Male	Report Date	: 26/03/2022 15:59
UHID	: NMHK.2204175	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: FLAT-5A, BLOCK-41, GREENFIELD CITY, Kolkata, West Bengal, 700141	Mobile	: 9707690218

ELECTROCARDIOGRAM REPORT (ECG)

HR : 60 bpm
Rhythm : Sinus
P wave : Normal
PR Interval : 152 msec
QRS axis : Normal (23 Degree)
QRS duration : 86 msec
QRS configuration : Normal
T wave : Non specific changes
ST segment : Non specific changes
QTc : 382 msec
QT : 386 msec

IMPRESSION:

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

Dr.INDIRA BANERJEE ,
MD,DNB,MRCPCH (UK)

Board Certified Comprehensive
Echocardiographer (USA)

KEMRL SHIL

2204175

Male

37 years / 89 kg

HR 59/min

Axis: P 47°

SINUS RHYTHM
OTHERWISE NORMAL ECG

Intervals:
RR 1025 ms

QRS 23°
T 26°

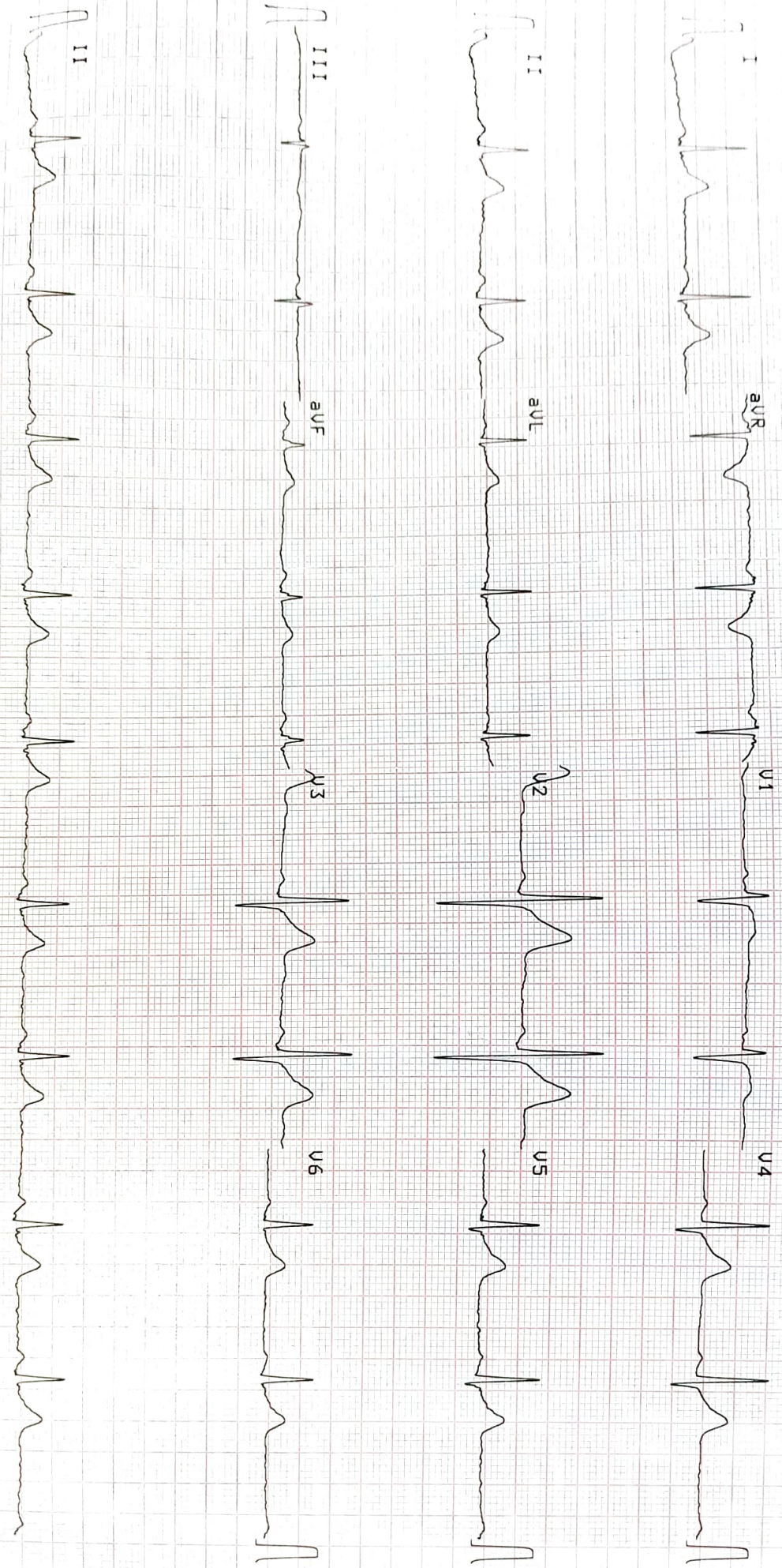
6.02

P 108 ms
PR 152 ms
QRS 86 ms
QT 386 ms
QTc 382 ms
(Bazett)
10 mm/mV

P (II) 0.13 mV
S (V1) -0.94 mV
R (V5) 1.19 mV
Sokol. 3.04 mV

10 mm/mV

UNCONFIRMED REPORT



0.05-25 Hz FS0 SSF 585 26.03.2022 11:39:52

NRRRYAN MEMORIAL
HOSPITAL-BEHALA

AT-102Plus 1.25 CI

Patient Name	: Mr. Kamal Shil	Order Date	: 26/03/2022 13:53
Age/Sex	: 37 Year(s)/Male	Report Date	: 26/03/2022 18:37
UHID	: NMMHK2204175	IP No	:
Ref. Doctor	: NMMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: FLAT-5A, BLOCK-41, GREENFIELD CITY, Kolkata, West Bengal, 700141	Mobile	: 9707690218

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 0.4 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 : 8.5 cm & Left kidney measures : 8.5 cm.

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

PROSTATE : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 2.5 cm x 3.2 cm x 2.5 cm. It weight approx 11 gm.

DIAGNOSTICS REPORT

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UHD	: NMHK.2204175	IP No	:
Ref: Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
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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

DIAGNOSTICS REPORT

Order Date	26/03/2022 13:53	Age/Sex	37 Year(s)/Male	Ref. Doctor	NMH
Report Date	26/03/2022 21:00	UHD	NMHK.2204175	Address	FLAT-5A, BLOCK-41, GREENFIELD CITY, Kolkata, West Bengal, 700141
IP No		Mobile			
Facility					
NARAYAN MEMORIAL HOSPITAL					
9707690218					

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. MADHUSREE RAY NASKAR,
MBBS, DMRD

Consultant Radiologist

RegNo: 57032



R

DATE OF DISCHARGE :

26-03-2022
11:18

2204175. KAMAL SHIL [unclear] years
NARAYAN MEMORIAL HOSPITAL

SERUM CREATININE

SAMPLE : SERUM

SERUM CREATININE 1.0 mg/dl 0.7 - 1.2
Jaffe Gen2 Compensated

BLOOD UREA NITROGEN

BLOOD UREA NITROGEN 8.4 mg/dl 6 - 20
Calculated

URIC ACID

SAMPLE : SERUM

URIC ACID 6.1 mg/dl 3.4 - 7
Enzymatic Colorimetric

SAMPLE : SERUM

RESULT 8.4

Sample No : 07H0060280B Collection Date : 26/03/22 13:54 Ack Date : Report Date : 26/03/22 18:45

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING 76 mg/dl 70 - 109
Hexokinase

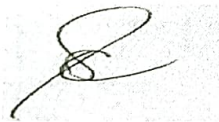
Sample No : 07H0060282B Collection Date : 26/03/22 13:59 Ack Date : Report Date : 26/03/22 18:45

BLOOD SUGAR(PP)

SAMPLE : PLASMA

BLOOD SUGAR PP 93 mg/dl 70 - 140
Hexokinase

End of Report



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

Checked By

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Kamal Shil	Age/Sex : 37 Year(s)/Male
UHID : NMHK.2204175	Order Date : 26/03/2022 13:53
Episode : OP	Mobile No : 9707690218
Ref. Doctor : NMH	Facility : NARAYAN MEMORIAL HOSPITAL
Address : FLAT-5A, BLOCK-41 , GREENFIELD CITY ,Kolkata,West Bengal ,700141	

Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060280A	Collection Date : 26/03/22 13:54	Ack Date :	Report Date : 26/03/22 18:45

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

HBA1C	5.2	%	Non-diabetic : 4-6
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By HPLC

- 1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.*
2. HbA1c has been endorsed by clinical group & 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 in Severe iron deficiency anaemia and hemolytic), chronic renal failure and liver disease. 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.

Note: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.
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 glycemic control:
Excellent control:- 6 - 7%,
Fair to good control:- 7 - 8%,
Unsatisfactory control:- 8 - 10%
Poor control >10%

End of Report

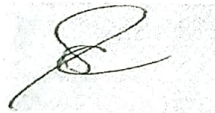


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SAMPLE : SERUM			
TOTAL BILIRUBIN	0.5	mg/dl	0 - 1.1
<i>Diazo Method</i>			
DIRECT BILIRUBIN	0.2	mg/dl	0 - 0.2
<i>Diazo Method</i>			
INDIRECT BILIRUBIN	0.3	mg/dl	0.2 - 0.9
<i>Calculated</i>			
SGPT (ALT)	28	U/L	0 - 34
<i>IFCC Without Pyridoxal Phosphate</i>			
SGOT (AST)	24	U/L	0 - 31
<i>IFCC Without Pyridoxal Phosphate</i>			
ALKALINE PHOSPHATASE	165 ▲	U/L	53 - 128
<i>IFCC</i>			
TOTAL PROTEIN	7.3	g/dl	6.4 - 8.2
<i>Biuret</i>			
ALBUMIN	4.8	gm/dl	3.5 - 5.2
<i>Bromocresol Green</i>			
GLOBULIN	2.5	g/dl	2 - 3.5
<i>Calculated</i>			
ALBUMIN:GLOBULIN	1.9	-	1.1 - 2.5
<i>Calculated</i>			
GGT	42	U/L	8 - 61
<i>Enzymatic colorimetric assay</i>			

End of Report



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

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LABORATORY INVESTIGATION REPORT

Patient Name	Mr. Karan...	Age / Sex	...
UHID	NMHK/2204/...	Order Date	26/03/22
Episode	...	Mob No	...
Ref. Doctor	...	Facility	DIABY PATHOLOGY
Address	HEALTHY BLOCK, GREENFIELD COLONY, Kolkata, West Bengal - 700015		

Biochemistry

INVESTIGATION: **LIPID PROFILE**
 Sample No: 0700060200 Collection Date: 26/03/22 13:54 Ask Date: Report Date: 26/03/22 18:45
 BIOLOGICAL REF RANGE

LIPID PROFILE

SAMPLE : SERUM

TEST	RESULTS	UNITS	BIOLOGICAL REF RANGE
TOTAL CHOLESTEROL	146	mg/dl	Desirable < 200 Borderline 200 - 239 High > 240
<i>CHOD-PAP</i>			
HDL CHOLESTEROL	40	mg/dl	40 - 60
<i>Homogenous Enzymatic Colorimetric</i>			
LDL CHOLESTEROL	87	mg/dl	Optimal < 100 Borderline 130
<i>Homogenous Enzymatic Colorimetric</i>			
VLDL	16	mg/dl	0 - 30
<i>CALCULATED</i>			
CHOLESTEROL-HDL RATIO	3.65	-	
LDL-HDL RATIO	2.17	-	
TRIGLYCERIDES	79	mg/dl	Desirable < 150 Borderline 150 - 200 High > 200
<i>Enzymatic Colorimetric</i>			

End of Report

Dr.S. Chatterjee
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LABORATORY INVESTIGATION REPORT

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UHID	: NMHK.2204175	Order Date	: 26/03/2022 13:53
Episode	: OP	Mobile No	: 9707690218
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Address	: FLAT-5A, BLOCK-41 , GREENFIELD CITY ,Kolkata,West Bengal ,700141		

Immunoassay

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060280	Collection Date : 26/03/22 13:54	Ack Date :	Report Date : 28/03/22 11:09

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	0.89	ng/ml	0.6 - 1.8
ECLIA			
T4	6.92	ug/dL	5.4 - 11.7
ECLIA			
TSH	5.46	uIU/ml	Adult Male – 0.27-5.50 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. MAINAK CHAKRABORTY
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

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COMPLETE HAEMOGRAM (CBC)**SAMPLE : EDTA BLOOD**

HAEMOGLOBIN (HB)	13.4	gm/dl	13 - 17
<i>Colorimetric method (Cyn Meth)</i>			
RBC COUNT	4.45 ▼	x10 ⁶ /ul	4.5 - 5.5
<i>Electrical Impedance Method</i>			
TOTAL WBC COUNT	5.4	10 ³ /cmm	4 - 10
<i>Electrical Impedance Method</i>			
PLATELET COUNT	210	10 ³ /cmm	150 - 410
<i>Electrical Impedance Method</i>			
PCV	40	%	40 - 50
<i>RBC pulse ht. detection method</i>			
MCV	90	fl	83 - 101
<i>calculated</i>			
MCH	30	pg	27 - 32
<i>Calculated</i>			
MCHC	33	gm/dl	31.5 - 34.5
<i>Calculated</i>			
ESR	60 ▲	%	0 - 10
<i>Modified Westergren Method</i>			
<u>DIFFERENTIAL COUNT</u>			
NEUTROPHILS	63	%	40 - 80
<i>Microscopy</i>			
LYMPHOCYTES	33	%	20 - 40
<i>Microscopy</i>			
MONOCYTES	02	%	2 - 10
<i>Microscopy</i>			
EOSINOPHILS	02 ▼	%	1 - 6
<i>Microscopy</i>			
BASOPHILS	00	%	0 - 2
<i>Microscopy</i>			
<u>PERIPHERAL BLOOD SMEAR</u>			
RBC	Normocytic normochromic		
WBC	Within normal limits		
PLATELET	Adequate		

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INVESTIGATION REPORT

Age/Sex : 37 Year(s)/Male

Order Date : 26/03/2022 13:53

Mobile No : 9707690218

Facility : NARAYAN MEMORIAL HOSPITAL



Angkita K. Ghosh

End of Report

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

RegNo: 82734

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SAMPLE : EDTA BLOOD

BLOOD GROUP ' B '
Agglutinationforward & Reverse

RH TYPE POSITIVE

End of Report

Angkita K. Ghosh

Dr.ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)
RegNo: 82734
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SAMPLE : URINE**PHYSICAL EXAMINATION**

VOLUME	40	ml
COLOUR	STRAW	
APPEARANCE	CLEAR	
SPECIFIC GRAVITY	1.015	1.010 - 1.030
REACTION(pH)	ACIDIC (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	1-2 / HPF	<5/HPF
EPITHELIAL CELLS	0-1 / HPF	<20/HPF
RBC	NIL	
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT

Please correlate clinically.

End of Report

Angkita K. Ghosh

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

RegNo: 82734

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URINE FOR SUGAR FASTING**SAMPLE : URINE**

RESULT

ABSENT

URINE FOR SUGAR PP**SAMPLE : URINE**

RESULT

ABSENT

End of Report




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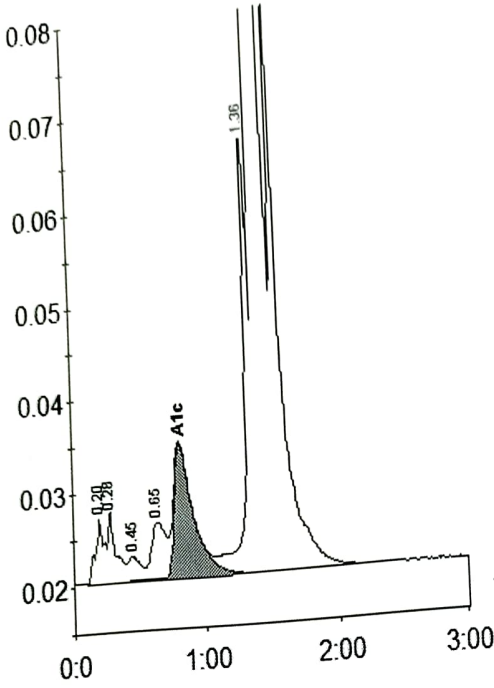
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Patient report

Bio-Rad
 D-10
 S/N: #DJ0A467747
 Sample ID:
 Injection date
 Injection #: 10
 Rack #: ---

DATE: 26/03/2022
 TIME: 16:28
 Software version: 4.30-2
 07H0060280A
 26/03/2022 15:57
 Method: HbA1c
 Rack position: 10

Dr. Kamal Ghil
 (R)NMHK 2204175 37y/ M

 07H0060280A
 EDTA Wh 26-03 13:54



Peak table - ID: 07H0060280A

Peak	R.time	Height	Area	Area %
A1a	0.20	6944	33410	0.9
A1b	0.28	7677	30663	0.8
F	0.45	2636	17211	0.5
LA1c/CHb-1	0.65	6084	47675	1.3
A1c	0.82	14239	143264	5.2
P3	1.36	47008	184501	4.9
A0	1.43	1088188	3317931	87.9
Total Area:		3774655		

Concentration:	%	mmol/mol
A1c	5.2	33