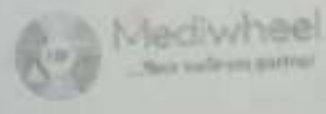


2/14/24 4:36 PM

14 February 2024 at 13:06

Mediwheel <wellness@mediwheel.in>  
To: healthcheckup.nmh@gmail.com  
Cc: customercare@mediwheel.in



011-41195959

Dear - Narayan Memorial Hospital,

We regret to state that following request for Health check up appointment has been Re Scheduled by you. Please let us know if request had not been Re Schedule from your end. We will ask the user to make a fresh request for the same.

- Hospital Package Name : Mediwheel Full Body Health Checkup Male Above 40
- Patient Package Name : MediWheel Full Body Health Checkup Male ~~40-49~~ 50
- Package Code : PKG10000476

Member Information		
Booked Member Name	Age	Gender
GOPAL KRISHNA PANDIT	45 year	Male

- Contact Details : 9932612296
- Email : gpendit2007@rediffmail.com
- Booking Date : 12-02-2024
- Appointment Date : 24-02-2024
- Booking Status : Booking ReSchedule
- Preferred Time : 09:00 am - 09:30 am

gopam@

Please login to your account to confirm the same. Also you mail us for confirmation.

Thanks,  
Mediwheel Team

You have received this mail because your e-mail ID is registered with. This is a random-generated e-mail Arzooani Healthcare Limited, please don't reply to this message.

Please visit to our Terms & Conditions for more information. This email is retrieved because you are register with us. Click here to unsubscribe.

Ascorfemi (credit - 2000)

ECHO (s) OR TMT / USG W/A(S) / X-ray chest PA / ECG.

Gen. Med, eye, Dental.



# PACKAGE TRACK SHEET

Age : : Mediwheel Full Body Health Checkup Male Above 40

Name	: Mr. GOPAL KRISHNA PANDIT / 45 Year(s) / Male	Date	: 24/02/2024 - 9:25AM
UHID No.	: NMHK2214228	Bill No.	: QPCR11259
Start Time	: 09:28:16	Completion Time	:
Corporate Company	:	Payer	: Arofeem Healthcare Ltd.
Insurance	:		

Follow-up meeting fixed	Date
Status	





- आपका पहचान प्रमाण, नस्ल, जाति/जात का प्रमाण नहीं है।
- इसे बिना किसी भी प्रकार के भ्रम/संशय के प्रमाण प्रमाणित करने के लिए प्रयोग नहीं किया जा सकता।
- यह एक इलेक्ट्रॉनिक रूप में उत्पन्न प्रमाण है।

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- Verify identity using Secure QR Code/ Offline XML/ Online Authentication.
- This is electronically generated letter.

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West Bengal - 721625



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1447

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## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> :	Mr. GOPAL KRISHNA RAOCT	<b>Age/Sex</b> :	45 Year(s) / Male
<b>UNID</b> :	NRHKJ214328	<b>Order Date</b> :	24/02/2024 09:28
<b>Episode</b> :	OP	<b>Mobile No</b> :	8524485433
<b>Ref. Doctor</b> :	SPH	<b>DOB</b> :	23/01/1979
<b>Address</b> :	1/10A PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034	<b>Facility</b> :	NARAYAN MEMORIAL HOSPITAL

### Biochemistry

#### SERUM CREATININE

SAMPLE : SERUM

SERUM CREATININE 0.8 mg/dl 0.7 - 1.2  
Method - Jaffe Gnd Compensated

#### LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

TOTAL BILIRUBIN 0.5 mg/dl 0 - 1.1  
Method - Diaz Method

DIRECT BILIRUBIN 0.2 mg/dl 0 - 0.2  
Method - Diaz Method

INDIRECT BILIRUBIN 0.3 mg/dl 0.2 - 0.9  
Method - Calculated

SGPT (ALT) 38 ▲ U/L 0 - 34  
Method - JCT without Pyridoxal Phosphate

SGOT (AST) 25 U/L 0 - 31  
Method - JCT without Pyridoxal Phosphate

ALKALINE PHOSPHATASE 76 U/L 53 - 128  
Method - JCT

TOTAL PROTEIN 7.4 g/dl 6.4 - 8.2  
Method - Buret

ALBUMIN 5.1 g/dl 3.5 - 5.2  
Method - Bromocresol Green

GLOBULIN 2.3 g/dl 2 - 3.5  
Method - Calculated

ALBUMIN:GLOBULIN 2.2 - 1.1 - 2.5  
Method - Calculated

GGT 143 ▲ U/L 8 - 61  
Method - Enzymatic colorimetric assay

BLOOD UREA NITROGEN 7.5 mg/dl 6 - 20  
Method - Calculated

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL 190 mg/dl Desirable <200 | Borderline 200-239 | High ≥240

HDL CHOLESTEROL 43 mg/dl 40 - 60  
Method - Homogenous Enzymatic Colorimetric



## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> :	MR. GOPAL KESHAVA PAIKOTI	<b>Age / Sex</b> :	1.45 Year(s) / Male
<b>UHID</b> :	NMHK_2214228	<b>Order Date</b> :	24/02/2024 09:28
<b>Episode</b> :	OP	<b>Mobile No</b> :	8504485419
<b>Ref. Doctor</b> :	NMHT	<b>DOB</b> :	23/01/1979
<b>Address</b> :	UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034	<b>Facility</b> :	NARAYAN MEMORIAL HOSPITAL

### LDL CHOLESTEROL

Method - Homogenous Enzymatic Colorimetric

122

mg/dl

Optimal < 100 |  
 Borderline 130 - 159  
 High > 160

### VLDL

Method - CALCULATED

33 ▲ (H)

mg/dl

0 - 30

### CHOLESTEROL-HDL RATIO

LDL-HDL RATIO

4.60

mg/dl

### TRIGLYCERIDES

Method - Enzymatic Colorimetric

198 ▲ (H)

mg/dl

< 150

### SAMPLE : SERUM

#### URIC ACID

Method - Enzymatic Colorimetric

6.0

mg/dl

3.4 - 7

#### BUN / CREATINE RATIO

9.3

#### BUN / CREATINE RATIO

#### GLYCOSYLATED HAEMOGLOBIN (HbA1C)

#### SAMPLE : EDTA BLOOD

#### HbA1C

5.4

#### 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 (D101 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.  
**BLOOD SUGAR(F)**





**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b>	: Mr. GOPAL KRISHNA PANJIT	<b>Age/Sex</b>	: 43 Year(s) / Male
<b>UHID</b>	: NHK-2214228	<b>Order Date</b>	: 24/02/2024 09:28
<b>Episode</b>	: OP	<b>Mobile No</b>	: 8504482419
<b>Ref. Doctor</b>	: NPH	<b>DOB</b>	: 23/01/1979
<b>Address</b>	: UNA PALLY, MAANTON, BEHALA, Kolkata, West Bengal 700034	<b>Facility</b>	: NARAYAN MEMORIAL HOSPITAL

<b>SAMPLE : PLASMA</b>			
<b>BLOOD SUGAR FASTING</b>	<b>110 ▲ (H)</b>	mg/dl	70 - 105
<small>Method - Recalibrate</small>			
<b>BLOOD SUGAR (PP)</b>			
<b>SAMPLE : PLASMA</b>			
<b>BLOOD SUGAR PP</b>	<b>95</b>	mg/dl	70 - 140
<small>Method - Recalibrate</small>			

End of Report

Dr. S. Chatterjee  
MD, MBA, FAAC  
(CONSULTANT SURGEON)

Created By



# LABORATORY INVESTIGATION REPORT

<b>Patient Name</b> : Mr. GOPAL KRISHNA PANDIT <b>UHID</b> : NMHK.2214228 <b>Episode</b> : OP <b>Ref. Doctor</b> : NMH <b>Address</b> : UMA PALLY, MANTON , BEHALA ,Kolkata,West Bengal ,700034	<b>Age/Sex</b> : 45 Year(s) / Male <b>Order Date</b> : 24/02/2024 09:28 <b>Mobile No</b> : 8504485419 <b>DOB</b> : 23/01/1979 <b>Facility</b> : NARAYAN MEMORIAL HOSPITAL
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## Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0162497	Collection Date : 24/02/24 09:34	Ask Date : 24/02/2024 10:40	Report Date : 24/02/24 12:33

### BLOOD GROUPING & Rh TYPING

#### SAMPLE : EDTA BLOOD

**BLOOD GROUP** : 'O'  
*Method - Agglutination forward & Reverse*

**RH TYPE** : POSITIVE

### COMPLETE HAEMOGRAM ( CBC )

#### SAMPLE : EDTA BLOOD

<b>HAEMOGLOBIN (HB)</b>	13.9	gm/dl	13 - 17
<i>Method - Colorimetric method (Cyn Meth)</i>			
<b>RBC COUNT</b>	4.4 ▼ (L)	x10 <sup>6</sup> /ul	4.5 - 5.5
<i>Method - Electrical Impedance Method</i>			
<b>TOTAL WBC COUNT</b>	5.3	10 <sup>3</sup> /cmm	4 - 10
<i>Method - Electrical Impedance Method</i>			
<b>PLATELET COUNT</b>	210	10 <sup>3</sup> /cmm	150 - 410
<i>Method - Electrical Impedance Method</i>			
<b>PCV</b>	41	%	40 - 50
<i>Method - RBC pulse ht. detection method</i>			
<b>MCV</b>	95	fl	83 - 101
<i>Method - calculated</i>			
<b>MCH</b>	32	pg	27 - 32
<i>Method - Calculated</i>			
<b>MCHC</b>	34	gm/dl	31.5 - 34.5
<i>Method - Calculated</i>			
<b>ESR</b>	20 ▲ (H)	%	0 - 10
<i>Method - Modified Westergren Method</i>			

### DIFFERENTIAL COUNT

<i>Method - Microscopy</i>			
<b>NEUTROPHILS</b>	50	%	40 - 80
<i>Method - Microscopy</i>			
<b>LYMPHOCYTES</b>	42 ▲ (H)	%	20 - 40
<i>Method - Microscopy</i>			
<b>MONOCYTES</b>	06	%	2 - 10
<i>Method - Microscopy</i>			
<b>EOSINOPHILS</b>	02	%	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 limits.

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 Behala Manton, 85, (Mail - 601)  
 Diamond Harbour Road, Kolkata - 700 034

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**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b>	: Mr. GOPAL KRISHNA PAJDET	<b>Age/Sex</b>	: 45 Year(s) / Male
<b>UHID</b>	: NP9K.2214228	<b>Order Date</b>	: 24/02/2024 09:28
<b>Episode</b>	: OP	<b>Mobile No</b>	: 850485419
<b>Ref. Doctor</b>	: NP9H	<b>DOB</b>	: 23/01/1979
<b>Address</b>	: UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034	<b>Facility</b>	: NARAYAN MEMORIAL HOSPITAL

PLATELET

Adequate.

End of Report

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

Checked By





## LABORATORY INVESTIGATION REPORT

Patient Name : Mr. GOPAL KRISHNA PANDIT

UHID : NMHK.2214228

Episode : OP

Ref. Doctor : NMH

Address : UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034

Age/Sex : 45 Year(s) / Male

Order Date : 24/02/2024 09:28

Mobile No : 8504485419

DOB : 23/01/1979

Facility : NARAYAN MEMORIAL HOSPITAL

### Immunoassays- Tumor Markers

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No: 0716153977	Collection Date: 24/02/24 09:34	Ass Date: 24/02/2024 12:17	Report Date: 24/02/24 12:35

**PROSTATE SPECIFIC ANTIGEN ( PSA )**

PROSTATE SPECIFIC ANTIGEN ( PSA ) 2.75

ng/ml <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*

End of Report

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

Checked By

# LABORATORY INVESTIGATION REPORT



**Patient Name** : Mr. GOPAL KRISHNA PANDIT  
**UHID** : NMHK.2214228  
**Episode** : OP  
**Ref. Doctor** : NMH  
**Address** : UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034

**Age/Sex** : 45 Year(s) / Male  
**Order Date** : 24/02/2024 09:28  
**Mobile No** : 8504485419  
**DOB** : 23/01/1979  
**Facility** : NARAYAN MEMORIAL HOSPITAL

## Clinical Pathology

### INVESTIGATION

Sample No: 2214228

Collection Date: 24/02/24 09:34

Ask Date: 24/02/2024 12:40

Report Date: 24/02/24 15:29

### URINE FOR R/E SAMPLE : URINE

#### PHYSICAL EXAMINATION

TEST	RESULTS	UNITS	BIOLOGICAL REF RANGE
VOLUME	35	ml	
COLOUR	PALE STRAW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.010		
REACTION(pH)	ACIDIC (pH-5.0)		1.010 - 1.030

#### CHEMICAL EXAMINATION

SUGAR	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		
EPITHELIAL CELLS	0-1/HPF		<5/HPF
RBC	ABSENT		<20/HPF
CAST	ABSENT		ABSENT
CRYSTAL	ABSENT		ABSENT

Please correlate clinically.

### STOOL FOR R/E

#### SAMPLE : STOOL

#### PHYSICAL EXAMINATION

COLOUR	BROWNISH
CONSISTENCY	SOFT
MUCUS	PRESENT
VISIBLE BLOOD	ABSENT
ADULT PARASITE	ABSENT

#### CHEMICAL EXAMINATION







**LABORATORY INVESTIGATION REPORT**

<b>Patient Name</b>	: Mr. GOPAL KRISHNA PANDIT	<b>Age/Sex</b>	: 45 Year(s) / Male
<b>UHID</b>	: NMHK.2214228	<b>Order Date</b>	: 24/02/2024 09:28
<b>Episode</b>	: OP	<b>Mobile No</b>	: 8504485419
<b>Ref. Doctor</b>	: NMH	<b>DOB</b>	: 23/01/1979
<b>Address</b>	: UMA PALLY, MANTON , BEHALA ,Kolkata,West Bengal ,700034	<b>Facility</b>	: NARAYAN MEMORIAL HOSPITAL

**Immunology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0163497	Collection Date : 24/02/24 09:34	Ack Date : 24/02/2024 12:17	Report Date : 24/02/24 17:58

**THYROID FUNCTION TEST  
 SAMPLE : SERUM**

T3	1.17	ng/ml	0.60 - 1.80
Method - ECLIA			
T4	6.54	ug/dL	5.40 - 11.70
Method - ECLIA			
TSH	10.11	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:**

1. For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
2. 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)
3. There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
4. 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.
5. 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).
6. 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)

Checked By

# Narayan Memorial Hospital

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

CIN No. : U85110WB2005PTC104684

GSTIN No. : 19AACN1707E129



## DIAGNOSTICS REPORT

Patient Name	: Mr. GOPAL KRISHNA PANDIT	Order Date	: 24/02/2024 09:28
Age/Sex	: 45 Year(s)/Male	Report Date	: 25/02/2024 14:58
UHID	: NPMH.2214228	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8504485419
Address	: UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034		

### USG REPORT OF WHOLE ABDOMEN (SCREENING)

**LIVER** : Liver is normal in size. **Parenchymal echogenicity is raised.** Intrahepatic biliary radicles are not dilated. No focal mass lesion is seen.

**PORTA :PV** : Normal.

**CD** : Normal.

**GALL BLADDER** :Gall bladder is normal in size, contour, outline and position. No calculus is seen. Wall thickness is normal.

**Few small echogenic polyps are seen attached to gall bladder walls. They measures 2-3 mm approx in size.**

**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 : 10.0 cm & Left kidney measures : 10.9 cm.

**URINARY BLADDER** : Urinary bladder is normal in contour, outline and distension.

**No vesical lesion is seen.**

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# NARAYAN

## Narayan Memorial Hospital

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

CIN No. : UB511DWB2005PTC104884

GSTIN No. : 19AAACCN1707E1ZS



### DIAGNOSTICS REPORT

Patient Name	: Mr. GOPAL KRISHNA PANDIT	Order Date	: 24/02/2024 09:28
Age/Sex	: 45 Year(s)/Male	Report Date	: 25/02/2024 14:58
UHID	: NMHK.2214228	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8504485419
Address	: UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034		

**PROSTATE** : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 2.7 cm x 4.1 cm x 3.1 cm. It weight approx 18 gm.

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

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

#### IMPRESSION :

- Fatty changes in liver (grade I).
- Gall bladder polyps.

Dr. MADHUSHREE RAY NASKAR  
MBBS,DMRD

Consultant Radiologist

RegNo: 57032

Registered Office :  
582, Diamond Harbour Road  
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Print Date: 27/02/2024 15:44:34  
Ph: 033-26610000, 26610001, 26610002, 26610003, 26610004, 26610005, 26610006, 26610007, 26610008, 26610009, 26610010, 26610011, 26610012, 26610013, 26610014, 26610015, 26610016, 26610017, 26610018, 26610019, 26610020, 26610021, 26610022, 26610023, 26610024, 26610025, 26610026, 26610027, 26610028, 26610029, 26610030, 26610031, 26610032, 26610033, 26610034, 26610035, 26610036, 26610037, 26610038, 26610039, 26610040, 26610041, 26610042, 26610043, 26610044, 26610045, 26610046, 26610047, 26610048, 26610049, 26610050, 26610051, 26610052, 26610053, 26610054, 26610055, 26610056, 26610057, 26610058, 26610059, 26610060, 26610061, 26610062, 26610063, 26610064, 26610065, 26610066, 26610067, 26610068, 26610069, 26610070, 26610071, 26610072, 26610073, 26610074, 26610075, 26610076, 26610077, 26610078, 26610079, 26610080, 26610081, 26610082, 26610083, 26610084, 26610085, 26610086, 26610087, 26610088, 26610089, 26610090, 26610091, 26610092, 26610093, 26610094, 26610095, 26610096, 26610097, 26610098, 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# Narayan Memorial Hospital

(A Unit of Narayan Health Services Pvt. Ltd.)  
CIN No. : U85110WB2005PTC104934  
GSTIN No. : 19AACCH1707E1Z5



Gopal Krishna Pandit, DSY/Im

## DIAGNOSTICS REPORT

Subject Name	Mr. GOPAL KRISHNA PANDIT	Order Date	24/02/2024 09:28
Age/Sex	43 Year(M)/Male	Report Date	24/02/2024 13:41
PHONO	1981612214228	Facility	NARAYAN MEMORIAL HOSPITAL
Ref. Doctor		Mobile	8554485119
Address	UMA HALL, HADITON, BEHOLA SUKATA, VIVEK BEHOLA, 700034		

### 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. Arun Kumar Mazumdar

MBBS, MD (General Medicine)  
MBBS, MD (CCU), MD (CC)

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## DIAGNOSTICS REPORT

Patient Name	Mr. GOPAL KODISHA HADOT	Order Date	24/02/2024 09:28
Age/Sex	45 Years/Male	Report Date	24/02/2024 11:44
LAND	NONE_2214228	Facility	NARAYAN MEMORIAL HOSPITAL
Ref. Docu		Mobile	8504485419
Address	UDA PALLY, MANTON, BEHALA, KOLKATA, West Bengal, 700034		

### ELECTROCARDIOGRAM REPORT (ECG)

HR : 87 bpm  
Rhythm : Sinus  
P wave : Normal  
PR interval : 150 msec  
QRS axis : Normal  
QRS duration : 88 msec  
QRS configuration : Normal  
T wave : Non specific changes  
ST segment : Non specific changes  
QTc : 384 msec  
QT : 382 msec

### IMPRESSION

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

*J. Banerjee*

Dr. INDIRA BANERJEE  
MD, DM, FNB, MRCPCH (UK)  
Board Certified Comprehensive  
Electrodiagnostic (USA)

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UNCOMPLETED REPORT

SINUS RHYTHM  
NORMAL ECG

6.82

HR 57/min

RR 105/min

P 188 ms

PR 158 ms

QRS 88 ms

QT 192 ms

QTc 184 ms

(Bazett)

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

18 mm/mV

25 mm/s

SCHLICK

P (mV) 0.10  
R (mV) 2.22  
S (mV) -1.23  
T (mV) 0.51  
QTc (ms) 184  
QT (ms) 192  
QTd (ms) 184

18 mm/mV

18 mm/mV

18 mm/mV

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NARAYAN MEMORIAL  
HOSPITAL, BEHALA

24.02.2024 09:59:35

R.05-25 Hz FSQ 55F 585

91-1824104 1 25 2





## DIAGNOSTICS REPORT

Patient Name	: Mr. GOPAL KRISHNA PANDIT	Order Date	: 24/02/2024 09:28
Age/Sex	: 45 Year(s)/Male	Report Date	: 24/02/2024 16:29
UHID	: NMHK.221422B	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8504485419
Address	: UMA PALLY, MANTON, BEHALA, Kolkata, West Bengal, 700034		

### ECHO SCREENING

No regional wall motion abnormality at rest.  
Normal LV systolic function (LVEF = 65%).  
Normal RV systolic function. ( TAPSE = 1.6 cm).  
Adequate diastolic compliance ( $E/e' = 12.8$ ).  $E/A = 1.48$ .  
No pericardial effusion.  
Trivial TR. Estimated PASP 33 mmHg.  
IVC normal diameter & > 50 % respiratory compressibility.  
No thrombus, mass / vegetation.  
Thickened mitral leaflets. Trivial MR.

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

RegNo: 56285