

Government of India



Father: Amulya Kayal অনুপ কয়াল Anup Kayal পিতা: অম্ন্ত্র কয়াল

জন্মতারিখ / DOB: 25/04/1978

পুরুষ / Male



8037 3172 5332

আখার – সাখারণ মানুষের অধিকার

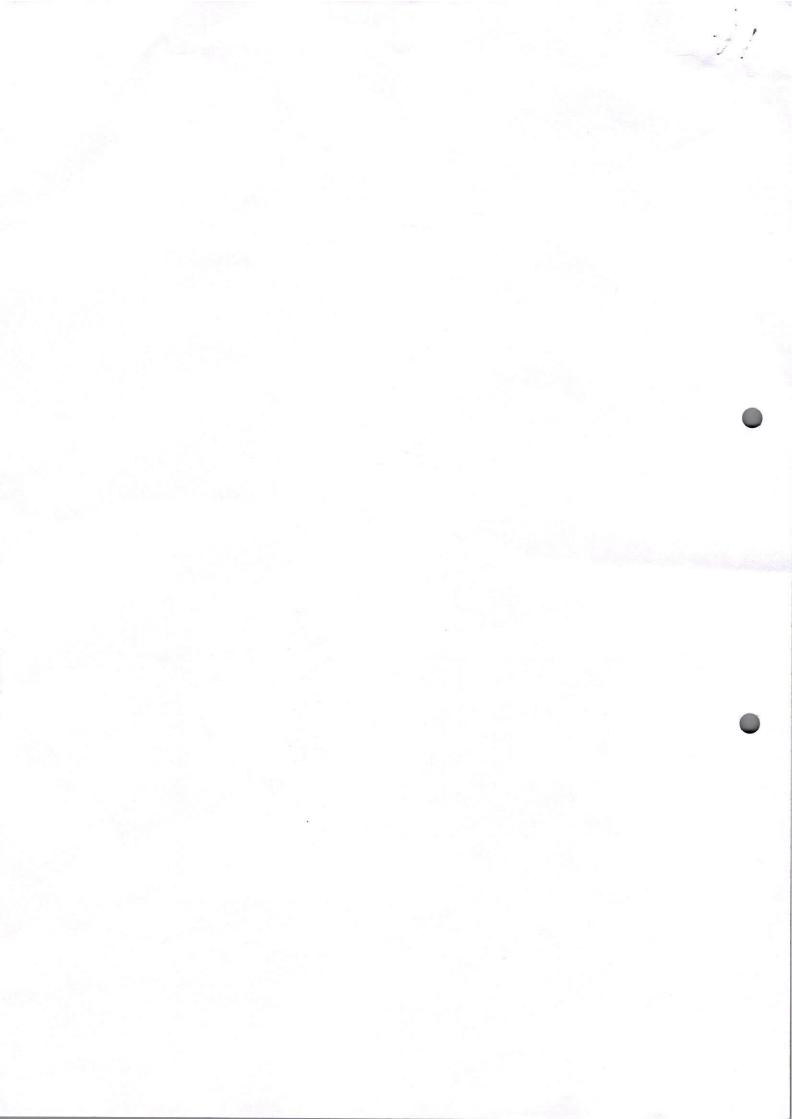
Amp Kaye



ভারতীয় বিশিষ্ট পরিচ্য প্রাধিকরণ Unique Identification Authority of India

Address: MALA, Rasulpur, South 24 Parganas, Mohirampur, West Bengal, 743504

ठिकाता:, साला, त्रजूलशूत्र, सरित्राप्तशूत्र मृष्किल २८ श्रद्रशता, शिक्ति वष,



PACKAGE TRACK SHEET

Package: : Mediwheel Full Body Health Checkup Male Above 40

Name : Mr. ANUP KAYAL / 45 Year(s) /	Male	Date	: 01/06/2023 9:50AM	
UHID No. : NMHK.2312608		Bill No.	: OPCR7384	
		Completion Time		
Start Time : 09:50:58		Completion Time	•	
Corporate Company :		Payer	: ArcoFemi Healthcare	Ltd.
Insurance :				
		Time In	Time Out	Signature/Date Time
itial Assessment				
Height. 166cm	Weight.	okg	вмі.	SP2 - 99
Pulse. 70 Spur	BP. 1108	o mm/Hg	Temp.	
Package Details)	
1. HEALTH CHECKUPS				
GLYCOSYLATED HAEMOGLOBIN (HBA1C)-()				
THYROID FUNCTION TEST-()				No. 2 To an 18
PROSTATE SPECIFIC ANTIGEN (PSA)-()				
BLOOD GROUPING & Rh TYPING-()				
BLOOD SUGAR(PP)-()				
BLOOD SUGAR(F)-()				
COMPLETE HAEMOGRAM (CBC)-()				
LIPID PROFILE-()				
STOOL FOR R/E-()				
LIVER FUNCTION TEST (LFT)-()				
FRUM CREATININE-()				
URIC ACID-()				
BLOOD UREA NITROGEN-()				
URINE FOR R/E-()				
URINE FOR SUGAR FASTING-()				
URINE FOR SUGAR PP-()				
BUN / CREATINE RATIO-()				
X-RAY CHEST PA-()				
USG SCREENING (WHOLE ABDOMEN)-()				
ECG-()				
ECHO SCREENING-()				
STRESS TEST (TREAD MILL)-()				
2. OP Consultation				
General Medicine-(Dr. SELF)				
Dental-(Dr. SELF DENTAL)				
Ophthalmology-(Dr. DIPANKAR RAY (EYE))				



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







LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

UHID : NMHK.2312608

: OP **Episode**

Address

Ref. Doctor : NMH

: MOHIRAMPUR , ,Kolkata,West Bengal ,0

Age/Sex : 45 Year(s)/Male

Order Date : 01/06/2023 09:50

Mobile No : 9875400704

DOB

: 01/01/1978 : NARAYAN MEMORIAL HOSPITAL **Facility**

Hematology

Sample No : 07H0118715 Collection Date : 01/06/23 10:18 Ack Date : 01/06/2023 10:40 Report Date : 01/06/23 16:10	I	NVESTIGATIO	N		RESULT	TS .	UNITS	BIOLOGICAL REF RANGE
SAMPLE : EDTA BLOOD HAEMOGLOBIN (HB) 13.6 gm/dl 13 - 17 Colorimetric method (Cyn Meth) 5.1 x10^6/ul 4.5 - 5.5 RBC COUNT 5.6 10^3/cm 4 - 10 Electrical Impedance Method m 10^3/cm 150 - 410 PLATELET COUNT 200 10^3/cm 150 - 410 Electrical Impedance Method m 6 40 - 50 PCV 42 % 40 - 50 RBC pulse ht. detection method MCV 83 fl 83 - 101 calculated MCH 27 pg 27 - 32		Sample No :	07H0118715	Collection Date :	01/06/23 10:18	Ack Date: 01/06/2023 10:40	Report D	ate: 01/06/23 16:10
HAEMOGLOBIN (HB) 13.6 gm/dl 13 - 17		COMPLETI	E HAEMOGRAM	(CBC)				
Colorimetric method (Cyn Meth) RBC COUNT S.1 x10^6/ul 4.5 - 5.5		SAMPLE:	EDTA BLOOD					
Colorimetric method (Cyn Meth) S.1 x10^6/ul 4.5 - 5.5 Electrical Impedance Method 5.6 10^3/cm 4 - 10 TOTAL WBC COUNT 200 10^3/cm 150 - 410 Electrical Impedance Method m 150 - 410 PCV 42 % 40 - 50 RBC pulse ht. detection method 83 fl 83 - 101 MCV 83 fl 83 - 101 calculated MCH 27 pg 27 - 32 Calculated MCH 27 pg 27 - 32		HAEMOGLO	OBIN (HB)		13.6		gm/dl	13 - 17
Electrical Impedance Method TOTAL WBC COUNT 5.6 10^3/cm 4 - 10 m								
### TOTAL WBC COUNT		RBC COUN	T		5.1		x10^6/ul	4.5 - 5.5
M Electrical Impedance Method 200 10^3/cm 150 - 410 m		Electrical Imp	edance Method					
Electrical Impedance Method 200 10^3/cm 150 - 410 m		TOTAL WB	C COUNT		5.6		10^3/cm	4 - 10
PLATELET COUNT 200 10^3/cm m 150 - 410 m Electrical Impedance Method 42 % 40 - 50 m RBC pulse ht. detection method 83 fl 83 - 101 m MCV calculated 27 pg 27 - 32 m Calculated 27 m pg 27 - 32 m							m	
M Electrical Impedance Method 42 % 40 - 50		Electrical Imp	edance Method					
Electrical Impedance Method 42 % 40 - 50 PCV 83 fl 83 - 101 MCV 83 fl 83 - 101 calculated pg 27 - 32 Calculated Calculated Pg 27 - 32		PLATELET	COUNT		200		A	150 - 410
PCV RBC pulse ht. detection method MCV calculated MCH Calculated PCV RBC pulse ht. detection method RBC pulse ht. dete							m	
## RBC pulse ht. detection method MCV		50	edance Method		42		0/	40 50
MCV 83 fl 83 - 101 calculated 27 pg 27 - 32 Calculated Calculated 27 - 32 27 - 32					42		%	40 - 50
calculated 27 pg 27 - 32 Calculated Calculated			detection method		02		e e	02 101
MCH 27 pg 27 - 32 Calculated					03		II.	83 - 101
Calculated					27		20	27 22
					21		pg	27 - 32
MCIC 32 am/dl 315 - 345		Control of the Contro			32		gm/dl	31.5 - 34.5
MCHC 32 gm/dl 31.5 - 34.5 Calculated				¥	32		giii/di	31.3 - 34.3
ESR 10 % 0 - 10					10		0/0	0 - 10
Modified Westergren Method			targrap Mathad		10		70	0 10
DIFFERENTIAL COUNT								
NEUTROPHILS 57 % 40 - 80					57		0/0	40 - 80
Microscopy			IILS		3,		70	10 00
LYMPHOCYTES 34 % 20 - 40			TEC		34		%	20 - 40
Microscopy			ILS		3,		70	20 10
MONOCYTES 05 % 2 - 10		especial control of the control of t	c		05		%	2 - 10
Microscopy		5000 a 11	-3				70	_ 10
EOSINOPHILS 04 % 1 - 6			II S		04		%	1-6
Microscopy			ico					
BASOPHILS 00 % 0 - 2					00		%	0 - 2
Microscopy			•				(5.5)	· · ·
PERIPHERAL BLOOD SMEAR			RAL BLOOD SM	EAR				

Normocytic normochromic

Page 1 of 2

Behala Manton, 85, (Mail - 601), Diamond Harbour Road, Kolkata - 700034

Ph: 033 6640 0000 | Mob: +91 62921 95051

E: contact@nmh.org.in

RBC









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







LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

UHID

: NMHK.2312608

: MOHIRAMPUR , ,Kolkata,West Bengal ,0

Episode

: OP

Ref. Doctor

: NMH

Age/Sex

: 45 Year(s)/Male

Order Date

: 01/06/2023 09:50

Mobile No

: 9875400704

DOB

: 01/01/1978

Facility

: NARAYAN MEMORIAL HOSPITAL

WBC

Address

PLATELET

Within normal limits

Adequate

End of Report

Angkita. K. Glush.

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

RegNo: 82734

Checked By

Page 2 of 2





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LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL Age/Sex : 45 Year(s)/Male

UHID : NMHK.2312608 **Order Date** : 01/06/2023 09:50

Episode : OP

Mobile No Ref. Doctor : NMH : 9875400704

DOB : 01/01/1978

: MOHIRAMPUR , ,Kolkata,West Bengal ,0 : NARAYAN MEMORIAL HOSPITAL **Address Facility**

Biochemistry

VESTIGATION		RESUL	TS		UNITS BI	OLOGICAL REF RANGE
Sample No: 07H0118715	Collection Date :	01/06/23 10:18	Ack Date :	01/06/2023 11:19	Report Date :	01/06/23 17:34
SERUM CREATININE SAMPLE : SERUM SERUM CREATININE Jaffe Gen2 Compensated URIC ACID SAMPLE : SERUM		0.7			mg/dl	0.7 - 1.2
URIC ACID Enzymatic Colorimetric		5.6			mg/dl	3.4 - 7
Sample No: 07H0118715B	Collection Date :	01/06/23 10:18	Ack Date :	01/06/2023 11:20	Report Date :	01/06/23 17:34
BLOOD SUGAR(F) SAMPLE: PLASMA BLOOD SUGAR FASTING Hexokinase		100			mg/dl	70 - 109
Sample No: 07H0118748B	Collection Date :	01/06/23 13:30	Ack Date :	01/06/2023 16:12	Report Date :	01/06/23 17:34
BLOOD SUGAR(PP) SAMPLE: PLASMA BLOOD SUGAR PP Hexokinase		104			mg/dl	70.00 - 140.00

End of Report

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

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







LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

UHID : NMHK.2312608

Episode

Address

Ref. Doctor : NMH

: OP

: MOHIRAMPUR , ,Kolkata,West Bengal ,0

Age/Sex

: 45 Year(s)/Male

Order Date

: 01/06/2023 09:50

Mobile No

: 9875400704

DOB

: 01/01/1978

Facility

: NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION	RESULTS	INU	ITS BIO	DLOGICAL REF RANGE
Sample No: 07H0118715 Collection Date:	01/06/23 10:18 Ack Date :	01/06/2023 11:19	Report Date :	01/06/23 17:34
LIPID PROFILE				
SAMPLE : SERUM				
TOTAL CHOLESTEROL	244	m	g/dl	Desirable<200 Borderline 200-239
				High >=240
CHOD-PAP				
HDL CHOLESTEROL Homogenous Enzymatic Colorimetric	52	m	g/dl	40 - 60
LDL CHOLESTEROL	169	m	g/dl	Optimal < 100 Borderline 130 159 High>160
Homogenous Enzymatic Colorimetric				
VLDL CALCULATED	23	m	g/dl	0 - 30
CHOLESTEROL-HDL RATIO	4.69	-		
LDL-HDL RATIO	3.25	(- 1)		
TRIGLYCERIDES	215	m	g/dl	Desirable <150 Borderline 150 - 200 High >200
Enzymatic Colorimetric				
	End of Rep	ort		

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

Page 1 of 2

E: contact@nmh.org.in









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LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL Age/Sex : 45 Year(s)/Male

UHID : NMHK.2312608 **Order Date** : 01/06/2023 09:50

: OP **Episode** Ref. Doctor : NMH **Mobile No** : 9875400704 DOB : 01/01/1978

Address : MOHIRAMPUR , ,Kolkata,West Bengal ,0 : NARAYAN MEMORIAL HOSPITAL **Facility**

Biochemistry

IVESTIGATION	RESULTS	UNITS BI	OLOGICAL REF RANG
Sample No: 07H0118715 Collection Date:	01/06/23 10:18 Ack Date: 01/06/2023 11:19	Report Date :	01/06/23 17:34
LIVER FUNCTION TEST (LFT)			
SAMPLE : SERUM			
TOTAL BILIRUBIN	0.9	mg/dl	0 - 1.1
Diazo Method		5,	
DIRECT BILIRUBIN	0.3 🛦	mg/dl	0 - 0.2
Diazo Method		14	.*
INDIRECT BILIRUBIN	0.6	mg/dl	0.2 - 0.9
Calculated		2000 21 1200	
SGPT (ALT)	58 ▲	U/L	0 - 34
IFCC Without Pyridoxal Phosphate			
SGOT (AST)	46 ▲	U/L	0 - 31
IFCC Without Pyridoxal Phosphate			
ALKALINE PHOSPHATASE	101	U/L	53 - 128
IFCC			
TOTAL PROTEIN	7.6	g/dl	6.4 - 8.2
Biuret			
ALBUMIN	5.1	gm/dl	3.5 - 5.2
Bromocresol Green			
GLOBULIN	2.5	g/dl	2 - 3.5
Calculated			
ALBUMIN:GLOBULIN	2.0		1.1 - 2.5
Calculated			
GGT	42	U/L	8 - 61
Enzymatic colorimetric assay			

End of Report

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

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UHID

: NMHK.2312608

Episode

: OP

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Address

: MOHIRAMPUR , ,Kolkata,West Bengal ,0

Age/Sex

: 45 Year(s)/Male

Order Date

: 01/06/2023 09:50

Mobile No

: 9875400704

DOB

: 01/01/1978

Facility

: NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION

RESULTS

UNITS

BIOLOGICAL REF RANGE

Sample No: 07H0118715A

Collection Date:

01/06/23 10:18

Ack Date: 01/06/2023 16:11

Report Date:

01/06/23 17:34

GLYCOSYLATED HAEMOGLOBIN (HBA1C) SAMPLE: EDTA BLOOD

HBA1C

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 fallure 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.

End of Report

Dr.S. Chatterjee MD, MBBS, FAACC

(CONSULTANT BIOCHEMIST)







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LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

: NMHK.2312608

: OP **Episode**

UHID

Ref. Doctor : NMH

Address : MOHIRAMPUR , ,Kolkata,West Bengal ,0 Age/Sex

: 45 Year(s)/Male

Order Date

: 01/06/2023 09:50

Mobile No

: 9875400704

DOB

: 01/01/1978

Facility

: NARAYAN MEMORIAL HOSPITAL

Immunology

INVESTIGATION	RESULTS		UNITS BI	OLOGICAL REF RANGE
Sample No: 07H0118715 Collection Date:	01/06/23 10:18 Ack [Date: 01/06/2023 11:19	Report Date :	02/06/23 13:18
THYROID FUNCTION TEST				
SAMPLE : SERUM				`
T3 ECLIA	0.98		ng/ml	0.60 - 1.80
T4 ECLIA	7.12		ug/dL	5.40 - 11.70
TSH	2.29		uIU/ml	Adult Male – 0.27-5.5 0 Adult Female – 0.27- 5.50 Newborns - <25 Upto 12 years – 0.3-
ECLIA				5

Interpretations:

- 1. For diagnostic purposes, the result should always assessed in conjunction with the patient's medical history, be examinations and other findings.
- 2. The assay is unaffected by icterus (Bilirubun < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (in $tralipid < 1500 \ mg/dL)$, $biotin (<102 \ nmol/L \ or < 25 \ ng/ml)$, $IgG < 2 \ g/dL$ 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 (triglyc erides< 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 \(\mu\text{or}\) < 35 mg/dl), hemolysis (Hb<1.2 mmol/L or < 2.0 g/dl), lipemia (Intrali pid< 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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LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

: NMHK.2312608 UHID

: OP **Episode** : NMH Ref. Doctor

Address

: MOHIRAMPUR , ,Kolkata,West Bengal ,0

: 45 Year(s)/Male Age/Sex

: 01/06/2023 09:50 **Order Date**

: 9875400704 **Mobile No**

: 01/01/1978 DOB

: NARAYAN MEMORIAL HOSPITAL **Facility**

Clinical Pathology

		RESU	LTS		UNITS BIO	LOGICAL KEI KANG	
INVESTIGATION		24 (05/22, 10:18	Ack Date :	01/06/2023 14:49	Report Date :	01/06/23 17:10	
Sample No: 07H0118715	Collection Date :	01/06/23 10:18	Acre Barre				

URINE FOR R/E

Sample No:

SAMPLE: URINE

PHYSICAL EXAMINATION ml

VOLUME PALE YELLOW COLOUR CLEAR

1.010 - 1.030 . **APPEARANCE** 1.005

SPECIFIC GRAVITY ACIDIC (pH-6.0) REACTION(pH)

CHEMICAL EXAMINATION **ABSENT ABSENT**

ABSENT SUGAR ABSENT ABSENT ALBUMIN. **ABSENT ABSENT BLOOD ABSENT ABSENT KETONE ABSENT ABSENT BILE SALT ABSENT**

BILE PIGMENTS MICROSCOPIC EXAMINATION <5/HPF

1-2/HPF <20/HPF **PUS CELLS** 1-2/HPF **EPITHELIAL CELLS**

ABSENT ABSENT RBC ABSENT ABSENT CAST

ABSENT CRYSTAL Please correlate clinically.

End of Report

Angkita. K. glush. Dr.ANGKITA K. GHOSH

MBBS, MD(PATH) (CONSULTANT PATHOLOGIST)

RegNo: 82734

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LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

UHID : NMHK.2312608 : OP **Episode**

Ref. Doctor : NMH

: MOHIRAMPUR , ,Kolkata,West Bengal ,0 **Address**

: 45 Year(s)/Male Age/Sex

: 01/06/2023 09:50 **Order Date**

Mobile No : 9875400704

DOB : 01/01/1978

: NARAYAN MEMORIAL HOSPITAL Facility

Clinical Pathology

UNITS **BIOLOGICAL REF RANGE** RESULTS INVESTIGATION

Report Date : 01/06/23 17:35 Ack Date: 01/06/2023 14:49 Sample No: 07H0118715 Collection Date : 01/06/23 10:18

URINE FOR SUGAR FASTING SAMPLE: URINE

RESULT

ABSENT

End of Report

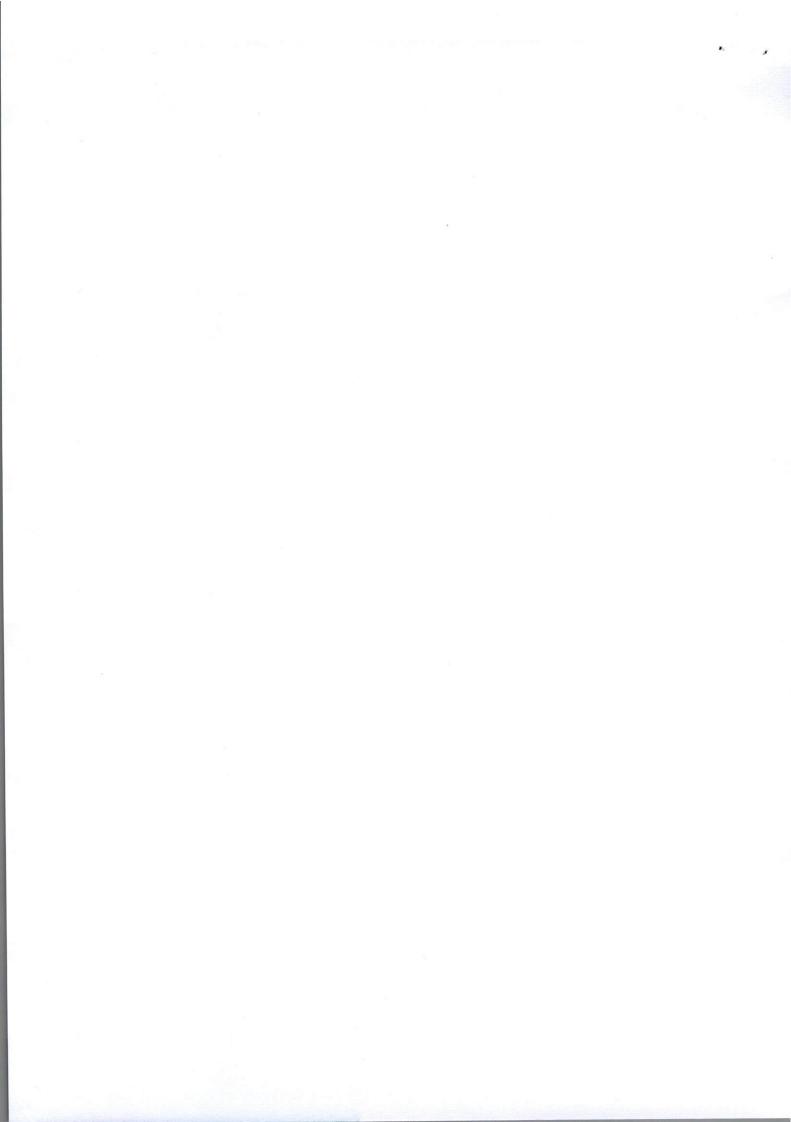
(CONSULTANT BIOCHEMIST)

Dr.S. Chatterjee MD, MBBS, FAACC

Checked By







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







LABORATORY INVESTIGATION REPORT

Patient Name : Mr. ANUP KAYAL

: NMHK.2312608

: OP **Episode**

UHID

Ref. Doctor : NMH

: MOHIRAMPUR , ,Kolkata,West Bengal ,0 **Address**

: 45 Year(s)/Male Age/Sex

: 01/06/2023 09:50 **Order Date**

Mobile No : 9875400704

DOB : 01/01/1978

: NARAYAN MEMORIAL HOSPITAL **Facility**

Clinical Pathology

RESULTS UNITS BIOLOGICAL REF RANGE INVESTIGATION

01/06/23 17:35 Ack Date: 01/06/2023 14:50 01/06/23 13:30 Report Date: Collection Date: 07H0118748 Sample No:

URINE FOR SUGAR PP SAMPLE: URINE

> Dr.S. Chatterjee MD, MBBS, FAACC

RESULT

ABSENT

End of Report

(CONSULTANT BIOCHEMIST)

Checked By

Page 1 of 1

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ANUP KAYAL 2312608

PID NO: P2162300428871 Age: 45.0 Year(s) Sex: Male



Reference: Drist Fedical Labo VID: 230216000393225

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

Registered On: 01/06/2023 04:58 PM Collected On: 01/06/2023 4:58PM Reported On: 01/06/2023 09:32 PM

Investigation

PSA- Prostate Specific Antigen

(Serum, ECLIA)

Observed Value

0.639

Unit ng/mL **Biological Reference Interval**

Conventional for all ages: 0 - 4 40 - 49 yrs: 0 - 2.5

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.

Referance: 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 --



Tests marked with NABL symbol are accredited by NABL vide Certificate no MC-2576



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Registered & Corporate Office: 250 D, Udyog Bhavan, Hind Cycle Marg, Worli, Mumbai - 400 030, CIN: U73100MH2000PLC192798 Tel No.: 8422 801 801 I Email: support@metropolisindia.com I Wesite: www.metropolisindia.com

Global Reference Laboratory: 4th Floor, Commercial Building-1 A, Kohinoor Mall, Vidyvihar (W), Mumbai - 400 070.

Enquiry & Home Visit Booking:

-8422 801 801

- support@metropolisindia.com

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







DIAGNOSTICS REPORT

Patient Name Age/Sex

Ref. Doctor

: Mr. ANUP KAYAL

: 45 Year(s)/Male

UHID

: NMHK.2312608

: NMH

Order Date Report Date : 01/06/2023 09:50

: 01/06/2023 15:10

3000

IP No

Facility

: NARAYAN MEMORIAL

HOSPITAL

Mobile

9875400704

Address

: MOHIRAMPUR, ,Kolkata, West Bengal, 0

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.

CBD: Normal. CBD measures 0.6 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: 10.6 cm & Left kidney measures: 10.5 cm.

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

Behala Manton, 85, (Mail - 601), Diamond Harbour Road, Kolkata - 700034

Ph: 033 6640 0000 | Mob: +91 62921 95051

E: contact@nmh.org.in





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







DIAGNOSTICS REPORT

Patient Name

: Mr. ANUP KAYAL

Age/Sex

: 45 Year(s)/Male

UHID Ref. Doctor : NMHK.2312608 : NMH

Order Date

: 01/06/2023 09:50

Report Date

: 01/06/2023 15:10

IP No

Facility

: NARAYAN MEMORIAL

HOSPITAL

Mobile

9875400704

Address

: MOHIRAMPUR, ,Kolkata, West Bengal, 0

PROSTATE: Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 3.0 cm x 3.5 cm x 3.1 cm. It weight approx 17 gm.

PERITONEUM:: No free fluid is noted.

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

IMPRESSION: Normal study.

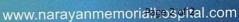
Dr.MADHUSHREE RAY NASKAR, MBBS

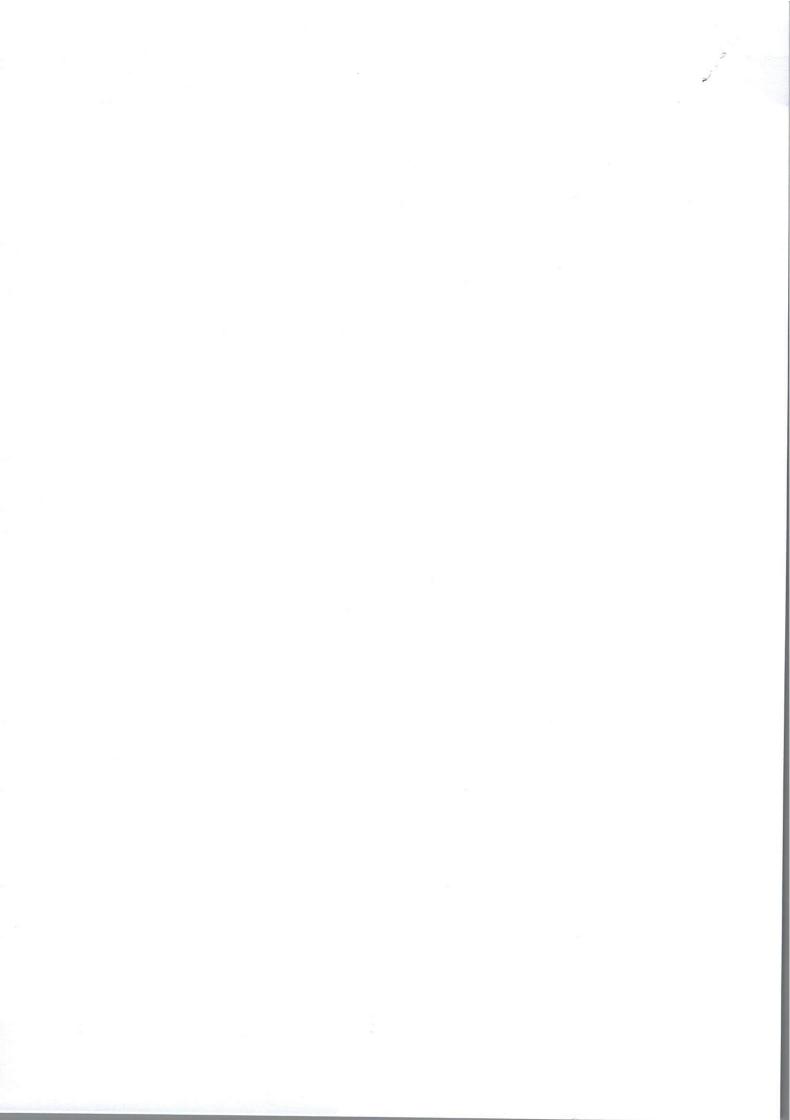
,DMRD

Consultant Radiologist

RegNo: 57032







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







DIAGNOSTICS REPORT

Patient Name

Ref. Doctor

: Mr. ANUP KAYAL

Order Date

: 01/06/2023 09:50

Age/Sex

: 45 Year(s)/Male

: NMH

Report Date

: 01/06/2023 14:20

UHID

: NMHK.2312608

IP No

Facility

: NARAYAN MEMORIAL

HOSPITAL

Mobile

9875400704

Address

: MOHIRAMPUR, ,Kolkata, West Bengal, 0

ECHOCARDIOGRAPHY REPORT (SCREENING)

FINDINGS:

- ·Normal sized cardiac chambers.
- ·No significant wall motion abnormality at rest.
- ·Normal LV systolic function.
- ·LVEF 67 %.
- ·Normal LV diastolic function.
- ·All cardiac valves are normal.
- ·IAS/IVS are intact.
- ·No vegetation or clot seen.
- ·Normal pericardium.
- ·No PAH.

IMPRESSION:

- Normal Study.

Dr.ANKUSH DUTTA, MBBS, DIP CARD, M RCP,FCCP

RegNo: 55979



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







DIAGNOSTICS REPORT

Patient Name

: Mr. ANUP KAYAL

Order Date

: 01/06/2023 09:50

Age/Sex

: 45 Year(s)/Male

Report Date

: 01/06/2023 13:21

UHID

: NMHK.2312608

IP No

Ref. Doctor

Facility

NARAYAN MEMORIAL HOSPITAL

: NMH

Mobile

: 9875400704

Address

: MOHIRAMPUR, ,Kolkata, West Bengal, 0

ELECTROCARDIOGRAM REPORT (ECG)

HR

76 bpm

Rhythm

Low atrial rhythm

P wave

Present

PR Interval

120 msec

QRS axis

Normal (29 Degree)

QRS duration

82 msec

QRS configuration

Incomplete RBBB

T wave

Non specific changes

ST segment

Non specific changes

QTc

411 msec

QT

362 msec

IMPRESSION:

- Low atrial rhythm. Normal QRS axis.

- Incomplete Right Bundle Branch Block (RBBB).

- Non specific ST-T changes. Clinical correlation please.

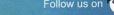
Dr.MUNNA DAS, MD (MEDICINE), DM(C ARDIOLOGY)

Consultant Cardiologist

RegNo: 55696

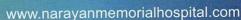
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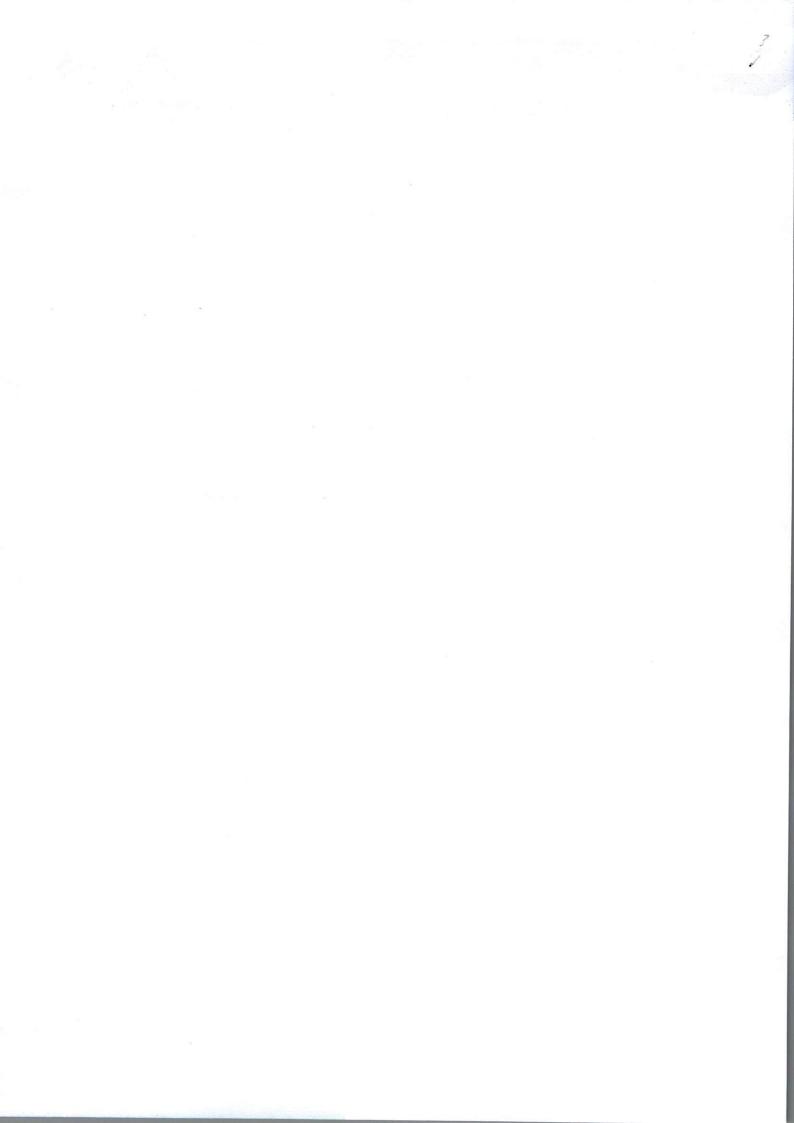
E: contact@nmh.org.in











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