



NAME - MR. ABINASH KUMAR GUPTA

AGE - 41 yrs, M

DATE - 23.03.24

Sub - Physical Examination

Height - 170cm

Weight - 81 kg

BP - 150/90 mmHg

SPO<sub>2</sub> - 99% (R.A)

Pulse - 72 b/m

BMI - 28 kg/m<sup>2</sup>



**DESUN HOSPITAL**

(A unit of P N Memorial Neurocentre & Research Institute Ltd.)

CIN - U85110WB2000PLC091118

Regd. Add. : - 8/1A/1 Keyatala Road, Kolkata - 700 029

Hospital Address : Desun More, Kasba Golpark, E. M. Bypass, Kolkata - 700 107

Ph. : 033-71-222-000, Fax : 2443-9003/2443-5050, E-mail : desun@desunhospital.com, Website : www.desunhospital.com

PATIENT NAME & ADDRESS

MR. ABINASH KUMAR GUPTA

PATHOLOGY



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DRAWN : 23-03-2024  
 11:19 Hrs.

RECEIVED : 23-03-2024  
 15:06 Hrs.

REPORTED : 23-03-2024  
 16:33 Hrs.

OPD/IPD DOC NO SD01/OPD/BILL/2023-24/OP40505360

PATIENT CODE SD01/PAT/1000164621



2331470660

REFERRING DOCTOR

ACCESSION NO DHHI-1/2023-24/0009948

AGE 41 Yrs 1 Mths 5 Dys

SEX Male

Results relate only to the samples tested

TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Glucose - Fasting</b>			
Glucose - Fasting	89	Adult: 74 - 106 Children 60 - 100	mg/dL
<i>Specimen : Plasma Flouride</i>			
<i>Methodology : Hexokinase</i>			
<b>Uric Acid</b>			
Uric Acid	5.9	Male : 3.5 - 7.2 Female : 2.6 - 6.0	mg/dL
<i>Specimen : Serum</i>			
<i>Methodology : Uricase Peroxidase</i>			
<b>Creatinine</b>			
Creatinine	1.00	Male (<50 years) : 0.84 - 1.25 Male (>50 years): 0.81 - 1.44 Female: 0.66 - 1.09 Neonate: 0.5 - 1.2 Infant: 0.4 - 0.7 Child: 0.5 - 1.2	mg/dL
<i>Specimen : Serum</i>			
<i>Methodology : Jaffe Method</i>			
<b>LFT (Liver Function Test)</b>			
Total Bilirubin	0.79	Adults: 0.3 - 1.2 Children 0-1 day 1.4 - 8.7 1-2 days 3.4 - 11.5 3-5 days 1.5 - 12.0	mg/dL
<i>Specimen : Serum</i>			
<i>Methodology : Diazotization</i>			
Direct Bilirubin	0.16	Adults and Children: < 0.2	mg/dL
<i>Specimen : Serum</i>			
<i>Methodology : Diazotization</i>			
Indirect Bilirubin	0.63		mg/dL
<i>Methodology : Calculated Value</i>			
Total Protein	7.6	Adult : 6.6 - 8.3 Children (1 - 18 y) : 5.7 - 8.0 Newborns (1 - 30 d) : 4.1 - 6.3	g/dL
<i>Specimen : Serum</i>			
<i>Methodology : Biuret</i>			
Albumin	4.7	Adults: 3.5 - 5.2 Newborn (0 - 4 day) : 2.8 - 4.4	g/dL
<i>Specimen : Serum</i>			
<i>Methodology : Bromocresol Green (BCG)</i>			
Globulin	2.9	1.8 - 3.6	g/dL
<i>Methodology : Calculated Value</i>			



*Prerana Mondal*

Dr. Prerana Mondal  
 MD (Path), WBMC-70606  
 Consultant Pathologist

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>LFT (Liver Function Test)</b>			
<b>Aspartate Aminotransferase (SGOT) (AST)</b>	33	Male (Adult): <50 Female (Adult): <35 Newborn: 25 - 75 Infant: 15 - 60	U/L
<i>Specimen : Serum</i> <i>Methodology : IFCC (UV without P5P)</i>			
<b>Alanine Aminotransferase (SGPT) (ALT)</b>	48	Male(Adult): <50 Female(Adult): <35 Newborn/Infant: 13 - 45	U/L
<i>Specimen : Serum</i> <i>Methodology : IFCC (UV without P5P)</i>			
<b>Alkaline Phosphatase (ALP)</b>	71	75 - 316	U/L
<i>Specimen : Serum</i> <i>Methodology : IFCC (PNPP, AMP buffer)</i>			



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<b>Glucose - PP (Post Prandial)</b>			
<b>Glucose - Post Prandial</b>	102	70.0 - 140.0	mg/dL
Specimen : Plasma Flouride			
Methodology : Hexokinase			
** Sample Drawn : 23.03.2024 14:57 Hrs.			
		Received : 23.03.2024 15:19 Hrs.	Reported : 23.03.2024 16:33 Hr



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Lipid Profile</b>			
<b>Cholesterol - Total</b> Specimen : Serum Methodology : CHOD-POD	177	<200 : Desirable 200 - 239 : Borderline High >=240 : High	mg/dL
<b>Cholesterol - HDL</b> Specimen : Serum Methodology : Direct Enzymatic Colorimetric	42	40.0 - 59.0	mg/dL
<b>Cholesterol - LDL</b> Methodology : Calculated Value	113.4	> 160.0 : High Risk 130.0 - 160.0 : Borderline High <= 130.0 : Desirable	mg/dL
<b>Cholesterol - VLDL</b> Methodology : Calculated Value	21.6	< 40.0	mg/dL
<b>Triglyceride</b> Specimen : Serum Methodology : GPO POD	108	Normal : <150 Borderline high : 150 - 199 High : 200 - 499 Very high : >=500	mg/dL



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<b>Lipid Profile</b>			
Cholesterol - Total/HDL ratio <i>Methodology : Calculated Value</i>	4.21	3.4 : 1/2 Average Risk 5.0 : Average Risk 9.6 : 2 x Average Risk 23.4 : 3 x Average Risk	ratio
Cholesterol - HDL/LDL ratio <i>Methodology : Calculated Value</i>	0.37		



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>HbA1c (Glycosylated Haemoglobin)</b>			
Glycosylated Haemoglobin (HBA1C)	5.3	4.6 - 6.2	%
Specimen : Methodology : NGSP			
<b>BUN (Blood Urea Nitrogen)</b>			
Blood Urea Nitrogen (BUN)	9	Newborn : 4 - 18 Child : 5 - 18 Adult : 6 - 20	mg/dL
Specimen : Serum Methodology : Urease, GLDH			
<b>LFT (Liver Function Test)</b>			
A/G Ratio	0	1.1 - 2.2	ratio
Specimen : serum Methodology : Calculated Value			
<b>GGT (Gamma-glutamyltransferase)</b>			
Gamma-glutamyltransferase (GGT)	24.3	12 - 122	U/L
Specimen : Serum Methodology :			



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>CBC (Complete Blood Count)</b>			
<b>Haemoglobin (Hb)</b> Specimen : Whole Blood - EDTA Methodology : Colorimetry	14.3	13.5 - 17.5	gm %
<b>RBC Count</b> Specimen : Whole Blood - EDTA Methodology : Electrical Impedance	5.14	4.5 - 5.5	million/cmm
<b>Packed Cell Volume (Hematocrit) (PCV)</b> Specimen : Whole Blood - EDTA Methodology : Pulse height detection	44.3	40.0 - 50.0	%
<b>Mean Cell Volume (MCV)</b> Specimen : Whole Blood - EDTA Methodology : Calculated Value	86.1	83 - 101	fL
<b>Mean Cell Haemoglobin (MCH)</b> Specimen : Whole Blood - EDTA Methodology : Calculated Value	27.8	27 - 32	pg
<b>Mean Cell Haemoglobin Concentration (MCHC)</b> Specimen : Whole Blood - EDTA Methodology : Calculated Value	32.3	31.5 - 34.5	g/dL
<b>Platelet Count</b> Specimen : Whole Blood - EDTA Methodology : Electrical Impedance	1.92	1.5 - 4.1	lakh/cmm
<b>Total Count</b>			
<b>WBC Count</b> Specimen : Whole Blood - EDTA Methodology : Electrical Impedance	6.9	4 - 10	thou/cmm
<b>Differential Count (Microscopy)</b>			
<b>Neutrophil</b>	65	40 - 80	%
<b>Lymphocyte</b>	31	20 - 40	%
<b>Monocyte</b>	02	2 - 8	%
<b>Eosinophil</b>	02	1 - 6	%
<b>Basophil</b>	00	<1 - 2	%
<b>Peripheral Blood Smear (Microscopy)</b>			



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>CBC (Complete Blood Count)</b>			
RBC	Normocytic Normochromic		
WBC	Normal morphology. No immature cell seen.		
<b>Erythrocyte Sedimentation Rate (ESR)</b> Specimen : Whole Blood - EDTA Methodology : Westergren	05	<=15	mm / hr



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<p><b>ABO Group &amp; RH Type</b></p> <p><b>ABO Blood Group</b>                      Methodology : Tube Agglutination / Slide method</p> <p><b>Rh Typing</b>                      Specimen : Whole Blood - EDTA                      Methodology : Tube Agglutination / Slide method</p> <p>'H' ANTIGEN PRESENT.</p>	<p>O</p> <p>POSITIVE</p> <p>Note : Following factors are responsible for discrepancies in ABO Grouping:                      1. Patients may fail to express ABO antigens on red cells due to diseases like Leukaemia &amp; lymphoma.                      2. Acquired B antigen can occur due to Infections; gram negative septicaemia, carcinoma colon, Blood Group chimera i.e. an individual with two population of cells which may occur as a result of either Bone marrow transplantation or Transfusion of group 'O' blood to 'A' or 'B' patient.                      3. Rouleaux formation: It occurs in patients with abnormal Albumin/globulin concentration or in cord blood samples due to Whartons Jelly contamination.                      4. Acquired antibodies i.e.                      Anti -A1 in A2 persons                      Anti -H in Bombay phenotype                      Cold auto - antibodies                      Unexpected allo-antibodies.</p>		



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Urinalysis</b>			
<i>Urinalysis</i>			
<i>Physical Examination</i>			
<b>Volume</b> <i>Methodology : By graduated container</i>	40		mL
<b>Colour</b>	Pale Yellow		
<b>Appearance</b> <i>Methodology : Visual</i>	Slightly Hazy	Clear	
<b>Specific Gravity</b> <i>Methodology : pKa change</i>	1.015	1.000 - 1.030	ratio
<i>Chemical Examination</i>			
<b>Reaction</b> <i>Methodology : Double indicator (Strip)</i>	Acidic		
<b>Protein</b> <i>Methodology : Protein-error-of-indicators</i>	Absent	Absent	
<b>Glucose</b> <i>Methodology : Glucose oxidase (Strip) Benedict's Test</i>	Absent	Absent	
<b>Ketone Bodies</b> <i>Methodology : Nitroprusside method (Strip)/ Tube</i>	Absent	Absent	
<b>Bile Salt</b> <i>Methodology : Hay's Method</i>	Absent	Absent	
<b>Bile Pigment</b> <i>Methodology : Diazo Method (Strip)</i>	Absent	Absent	
<b>Blood</b> <i>Methodology : Benzidine method (Strip) Microscopy</i>	Absent	Absent	
<i>Microscopic Examination</i>			
<b>Pus Cells</b>	1-2	0 - 5	/hpf
<b>RBC</b>	Not Seen	Nil	/hpf
<b>Epithelial Cells</b>	1-2	0 - 1	/hpf



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Urinalysis</b>			
Casts	Not Seen		
Crystals	Not Seen		



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<b>Urinalysis</b>			
<i>Chemical Examination</i>			
<b>Urobilinogen</b>	Absent	Absent	
<i>Methodology : Modified Ehrlich reaction (Strip)</i>			
----- End of Report -----			



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BED NO : OPD

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11:19 Hrs.RECEIVED : 23-03-2024  
12:02 Hrs.REPORTED : 23-03-2024  
15:51 Hrs.

PATIENT CODE 164621

OPD/IPD DOC NO OP40505360

REFERRING DOCTOR

ACCESSION NO DHHI-3/2023-24/0018537

AGE 41 Yrs 1 Mths 5 Dys

SEX Male



2331470660

Results relate only to the samples tested

TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Thyroid Profile - 1 (T3, T4, TSH)</b>			
<b>Triiodothyronine (T3)</b> Specimen : Serum Methodology : Electrochemiluminescence	1.68	0.80 - 2.00	ng/mL
<b>Thyroxine (T4)</b> Specimen : Serum Methodology : Electrochemiluminescence	8.78	5.10 - 14.10	µg/dL
<b>Thyroid Stimulating Hormone (TSH)</b> Specimen : Serum Methodology : Electrochemiluminescence	1.94	0.270 - 4.20	µIU/mL

**Dr. Jayati Gupta**  
Ph.D (Bio.Chem)  
Senior Consultant Biochemist

Any investigation has limited significance in terms of sensitivity and specificity of the assay procedure and the quality of the sample received in the laboratory.  
Any laboratory test results is not the final diagnosis, it has to be interpreted with clinical correlation and other related investigations.

PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED.

PATIENT NAME & ADDRESS

MR. ABINASH KUMAR GUPTA

PATHOLOGY



AN ISO 9001:2000 ORGANISATION

A Unit of Desun Healthcare & Research Institute Ltd.

S-10, Phase-III, K. I. Estate, E. M. Bypass, Kolkata-700 107, India

Phone No. : 033 40016355, 033 46006439

Email : care@desunpathology.com

Website : www.desunpathology.com

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2331470660

Results relate only to the samples tested

TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>PSA (Prostate Specific Antigen) Total</b>			
Prostate-Specific Antigen - Total (PSA - Total)	0.995	<= 4.4	ng/mL
Specimen : Serum			
Methodology : Electrochemiluminescence			
----- End of Report -----			

Dr. Jayati Gupta  
Ph.D (Bio.Chem)  
Senior Consultant Biochemist

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26032024132254

PATIENT NAME &amp; ADDRESS

CARDIOLOGY

MR. ABINASH KUMAR GUPTA

**DESUN**  
**HOSPITAL**  
**A NABH HOSPITAL**

Desun More, E.M. Bypass, Kasba Golpark, Kolkata-700 107, Ph: 71 222 050, Fax: 2443 9003

REPORT DATE: 23.03.2024 E-mail: desun@desunhospital.com Website: www.desunhospital.com

(A Unit of P. N. Memorial Neurocentre &amp; Research Institute Ltd.)

PROCEDURE DONE ON : 23.03.2024

OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40505360

REFERRING DOCTOR :

ACCESSION NO : R/DHHI-1/2023-24/0015451

PATIENT CODE : SD01/PAT/1000164621

AGE : 41 Yrs 1 Mths 5 Dys

SEX : M

**REPORT OF ELECTROCARDIOGRAM**

Standardization : 10 mm/mv.  
Rhythm : Regular/Sinus.  
Rate : 69 bpm  
QRS Axis : Normal.  
QRS : Normal.  
QTC : Normal.  
'P' Wave : Normal.  
P.R : Normal.  
QRS Complex : Normal.  
'Q' Wave : III.  
ST Segment : Isoelectric.  
'T' Wave : ↓ III, V1  
'U' Wave : Absent.  
**IMPRESSION** : **SINUS RHYTHM.**



Dr. IMRAN AHMED KHAN

Reg No: 64336, MBBS  
Dept. of Cardiac Science

Prepared By : Utpal Checked By : Sumita Bar

I A K



69 bpm  
- / - mmHg

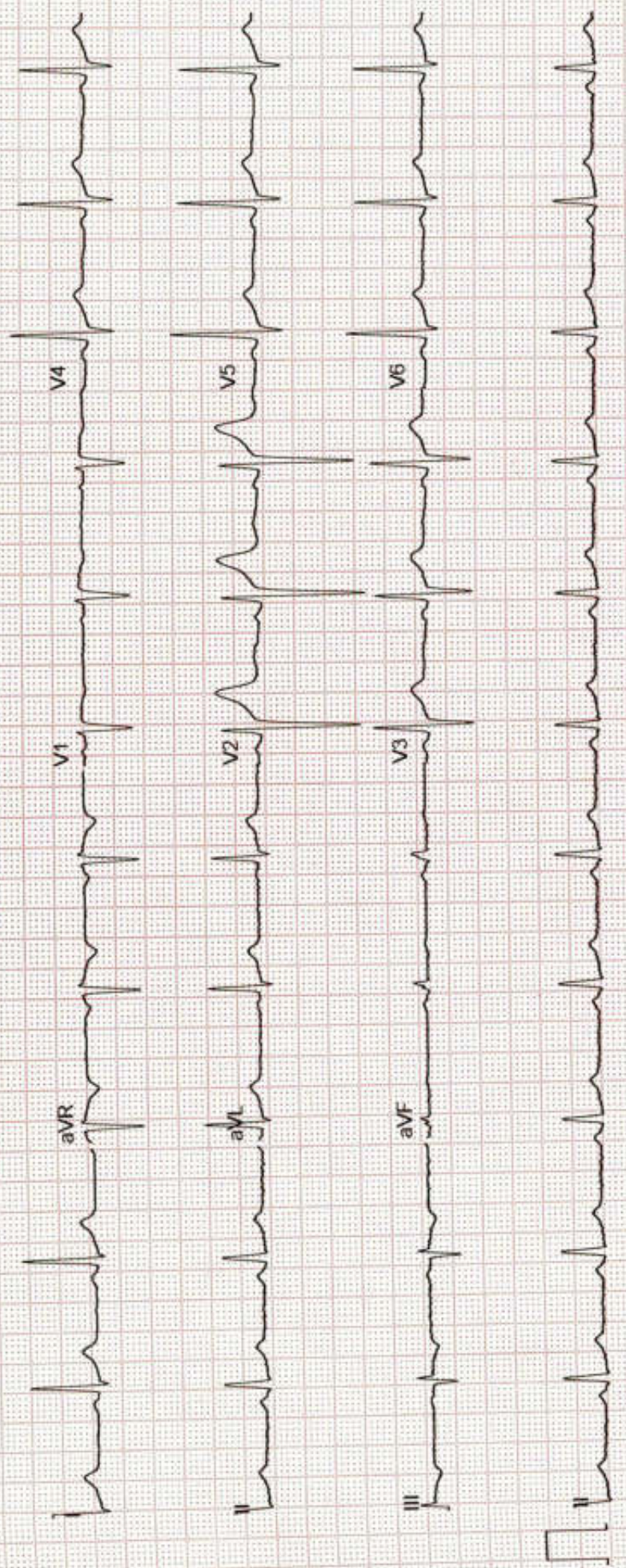
23.03.2024 11:28:41  
DESU HOSPITAL  
E M Baisas, Kasba Golpark  
Kolkata - 700107

Male

Normal sinus rhythm  
Minimal voltage criteria for LVH, may be normal variant  
Borderline ECG

QRS : 86 ms  
QT/QTc/Baz : 388 / 415 ms  
PR : 134 ms  
P : 110 ms  
RR/PP : 874 / 869 ms  
P/ORS/T : 55 / 12 / 15 degrees

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:



PATIENT NAME &amp; ADDRESS

CARDIOLOGY

MR. ABINASH KUMAR GUPTA

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**HOSPITAL**  
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PROCEDURE DONE ON : 23.03.2024  
OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40505380  
REFERRING DOCTOR :  
ACCESSION NO : R/DHHI-1/2023-24/0015430

REPORTED : 23.03.2024  
PATIENT CODE : SD01/PAT/1000164621  
AGE : 41 Yrs 1 Mths 5 Dys  
SEX : M

**ECHO CARDIOGRAPHY SCREENING REPORT****ECHO NO : 521****SUMMARY**

- >> Normal LV Cavity.
- >> No RWMA.
- >> Good LV Systolic Function. LVEF = 66 %.
- >> LV Diastolic Dysfunction Grade I.
- >> Great arteries Normal in Size and Relation.
- >> IAS & IVS Intact.
- >> Systemic and Pulmonary Venous Drainage Normal.
- >> No PE.

**FINAL IMPRESSION**

- >> No RWMA.
- >> Good LV Systolic Function.
- >> LV Diastolic Dysfunction Grade I.

**\*\*Please Correlate Clinically.**

*Sanjib Kumar Patra*  
Dr. SANJIB KUMAR PATRA

Reg No: 53571 (WBMC)  
DM CARD  
Dept. of Cardiac Science

Prepared By : Sutapa Checked By : A Esai

S K P

PATIENT NAME &amp; ADDRESS

CARDIOLOGY

MR. ABINASH KUMAR GUPTA

**DESUN**  
**HOSPITAL**  
**A NABH HOSPITAL**

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REFERRING DOCTOR :  
ACCESSION NO : R/DHHI-1/2023-24/0015430

REPORTED : 23.03.2024  
PATIENT CODE : SD01/PAT/1000164621  
AGE : 41 Yrs 1 Mths 5 Dys  
SEX : M

**M - mode Measurements Valves :-**

Aorta - 2.8 cm      LV ed - 4.9 cm  
LA - 3.2 cm      LV es - 2.9 cm  
ACS - cm      IVS ed - 1.2 cm  
RV ed - cm      PW (LV) - 1.1 cm  
FS - %      LVEF - 66 %

**CHAMBERS:-**

Left Ventricle : Normal in Size. Walls Normal in Thickness and Motion.

Left Atrium : Normal in Size.

Right Atrium : Normal in Size.

Right Ventricle : Normal in Size.

**OTHERS :-**

GREAT ARTERIES : Normal in Size and Relation.

*Sanjib Kumar Patra*

Dr. SANJIB KUMAR PATRA

Reg No: 53571 (WBMC)  
DM CARD  
Dept. of Cardiac Science

Prepared By : Sutapa      Checked By : A Esai

S K P

PATIENT NAME &amp; ADDRESS

MR. ABINASH KUMAR GUPTA

CARDIOLOGY

**DESUN**  
**HOSPITAL**  
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 REFERRING DOCTOR :  
 ACCESSION NO : R/DHHI-1/2023-24/0015430

REPORTED : 23.03.2024  
 PATIENT CODE : SD01/PAT/1000164621  
 AGE : 41 Yrs 1 Mths 5 Dys  
 SEX : M

PERICARDIUM : Normal.

**VALVES :-****MITRAL VALVE**

Morphology : Normal  
 Doppler : Normal

**TRICUSPID VALVE**

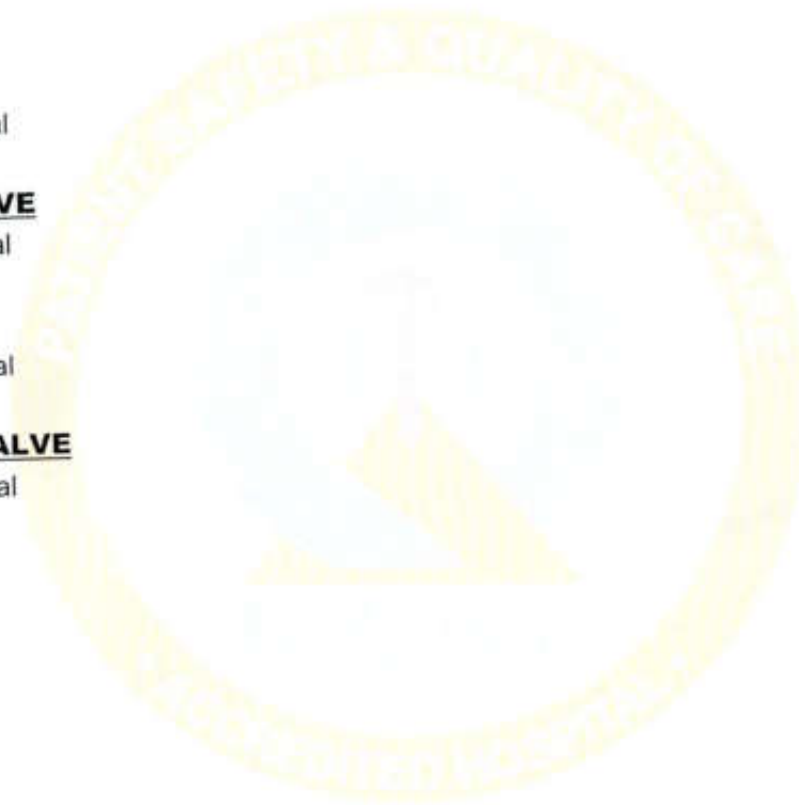
Morphology : Normal  
 Doppler : Normal

**AORTIC VALVE**

Morphology : Normal  
 Doppler : Normal

**PULMONARY VALVE**

Morphology : Normal  
 Doppler : Normal



*Sanjib Kumar Patra*  
 Dr. SANJIB KUMAR PATRA

Reg No: 53571 (WBMC)  
 DM CARD  
 Dept. of Cardiac Science

Prepared By : Sutapa Checked By : A Esai

S K P

PATIENT NAME &amp; ADDRESS

RADIOLOGY

MR. ABINASH KUMAR GUPTA



**DESUN**  
**HOSPITAL**  
**A NABH HOSPITAL**

PROCEDURE DONE ON : 23.03.2024  
 OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40505360  
 REFERRING DOCTOR :  
 ACCESSION NO : R/DHHI-1/2023-24/0015474

REPORTED : 23.03.2024  
 Desun More, E.M. Bypass, Kasba Golpark, Kolkata-700 107, Ph: 71 222 000, Fax : 2443 9003  
 PATIENT CODE : SD01/PAT/1000154621  
 (A unit of P. N. Memorial Neurocentre & Research Institute Ltd.)  
 sunhospital.com  
 AGE : 41 Yrs 1 Mths 5 Dys  
 SEX : M

## (US-13131) USG OF WHOLE ABDOMEN

### LIVER

Fatty infiltration of liver. Intrahepatic biliary ducts and hepatic vein tributaries are not dilated. No obvious focal lesion seen.

### GALL BLADDER

Physiologically distended. Wall thickness is normal. No evidence of any intraluminal lesion seen.

### C.B.D.

Normal for age. No obvious intraluminal lesion seen in visible parts.

### PORTAL VEIN

Normal for age.

### PANCREAS

Normal in size, shape and echotexture. No obvious focal lesion or intraparenchymal calcification seen. Main pancreatic duct is not dilated. No peripancreatic fluid collection seen.

### SPLEEN

Spleen is normal in size (9.7 cm. in long axis) shape and echotexture. No focal lesion seen. Spleno-portal axis is normal.

### KIDNEYS

Both the kidneys are normal in size, shape and axis. Cortical echotexture and cortico-medullary differentiation are normal in both sides. No evidence of any focal lesion seen in either kidneys. No hydronephrosis detected.

Right Kidney measures : 9.4 cm

Left Kidney measures : 9.8 cm

### URETERS

Pelvi-ureteric junction and vesico-ureteric junctions are normal. No obvious intraluminal lesion seen in visible part.

### URINARY BLADDER

Optimally distended, normal in shape and wall thickness. No evidence of any intraluminal lesion seen.

Prepared By : TAMAY Checked By : A K Dey

PP5

PATIENT NAME &amp; ADDRESS

RADIOLOGY

MR. ABINASH KUMAR GUPTA



**DESUN**  
**HOSPITAL**  
**A NABH HOSPITAL**

PROCEDURE DONE ON : 23.03.2024  
 OPD / IPD DOC NO : SD01/OPD/BILL/2023-24/OP40505360  
 REFERRING DOCTOR :  
 ACCESSION NO : R/DHHI-1/2023-24/0015474

REPORTED : 23.03.2024  
 PATIENT CODE : SD01/PAT/100616462  
 AGE : 41 Yrs 1 Mths 5 Dys  
 SEX : M

Desun More, E.M. Bypass, Kasba Golepark, Kolkata-700 107, Ph: 71 222 000, Fax: 2443 9003  
 desunhospital.com  
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**PROSTATE**

Normal echotexture. No obvious enlargement of median lobe seen. Inner glandular zone appear normal. Capsule is intact sonologically.  
 Prostate weight : 20 gms (approx.)

**RETROPERITONEUM**

No obvious sonological evidence of any retroperitoneal mass lesion or lymphadenopathy seen in visible part. Aorta and I.V.C. appear normal.

**PERITONEUM**

No free fluid seen in the peritoneal cavity. Mesenteric echogenicity appears normal.

**LOWER PLEURAL SPACES**

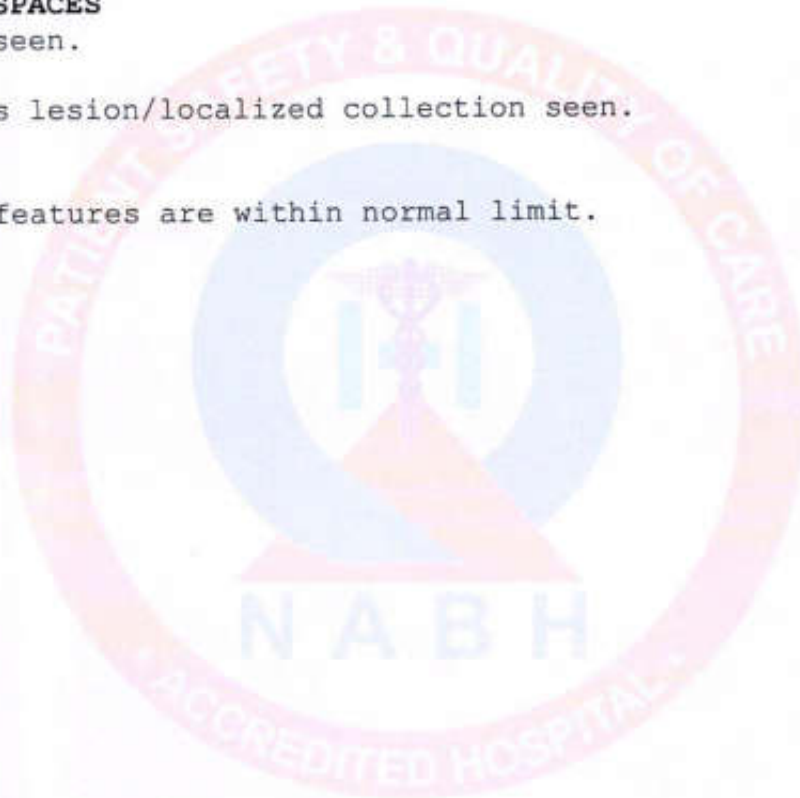
No free fluid seen.

**R.I.F**

No obvious mass lesion/localized collection seen.

**IMPRESSION:**

\* Sonological features are within normal limit.




Dr. PARTHA P. SAMUI

WBMC-54155

MD(Radiodiagnosis), Senior Consultant  
Diagnostic & Interventional Radiology

Patient Name:	<b>ABINASH KR GUPTA 41Y OPD</b>	Study Date/Time:	23-03-2024 11:16 AM
Sex/Age/Modality:	M/41Y/CR	Report Date/Time:	23-03-2024 01:00 PM
Patient ID:	20998	Report:	CHEST PA
Ref. Physician:	DESUN HOSPITAL & HEART INSTITUTE,KOLKATA	Report ID:	1302717D1236

**X-RAY CHEST PA VIEW**

**FINDINGS :-**

The lungs on the either side show equal translucency.  
The peripheral pulmonary vasculature is normal.  
No focal lung lesion is seen.  
Bilateral CP angles are normal.  
Both hila are normal in size, have equal density and bear normal relationship.  
The heart and trachea are central in position and no mediastinal abnormality is visible.  
The cardiac size is normal.  
The domes of the diaphragms are normal in position, and show smooth outline.

**IMPRESSION :-** No significant abnormality detected.

**ADVICE :-** Clinical correlation and follow up.



**Dr. Santosh Bharat  
Rathod**  
Consultant Radiologist  
MBBS, DMRD, DNB  
Reg no: MMCI-4060



**Disclaimer:** The report is prepared based on the image and patient information provided by the origin. In no event shall Radisky Labs Private Limited be liable for any special, direct, indirect, consequential, or any damages, arising out of or in connection with the use of the service. Patient identification in online reporting is not established, so this report cannot be used for any medicolegal purpose/certifications.



Name : Mn. Abinash kuman Gupta  
U / Doctor : Dr. Anish Chakraborty

Date : 23.03.24  
Age : 41y Sex : M

Doctor's Prescription

Rx

c/c

Bad breath, bleeding from gum

Feb

① mouth Rinse Residin SR (0.2% Chlor)

take 20ml of med. → without dilution if needed

↓  
Rinse 3 times/day x 2 weeks

② Intraoral Ointment Metrozyl Dyfoste Gel.

apply topically on areas of gingival bleeding,  
apply 3 times/day → for 2 weeks.



*[Handwritten signature]*  
23/3/24

DR. ANISH CHAKRABORTY  
(BDS)  
DENTISTRY  
REGN. NO. 6648 A  
DESUN HOSPITAL





NAME - Mr. Abinash Kumari Gupta  
AGE - 41y, M  
DATE - 23/03/24

Refraction Done.  
Old.  
VSE Existing of Now

VA 26/6  
Aided



Dr. Soumyadeep Majumder  
MBBS MS  
Reg. No. 68358 WPMC  
Department of Ophthalmology



Name : Mr. Abinash Kumar Gupta

Date : 23.03.24

U / Doctor : DR. S. Dasg.

Age : 41y Sex : M

Doctor's Prescription

Recd wr. - 81 yrs.

Rx

advise

Occasional  
nose  
nasal obstruction  
(left side  
nasal cavity)  
Snoring (+) (+)  
Daytime sleepiness (+)  
Le therapy (+)  
Xray PNS →  
Harzies nitel  
at B/L maxillary  
sinuses  
nasal septum →  
midline  
on Examination  
B/L nasal cavity  
wye 7 IH  
Bulky hypertrophied  
Bulky palate  
D?OSA

→ Body weight reduction  
→ Blood for: T3, T4, TSH,  
TgE, capite allergy profile

→ CT scan of nose & PNS  
(Axial/ Coronal/ Sagittal view)

→ BUONASE nasal spray  
1 puff twice daily each  
nasal cavity X 2 weeks.

→ NASOCLEAR nasal  
wash 2 times daily  
1/2 by each nasal cavity X 2 weeks

↓  
Solisore nasal spray  
1 puff twice daily each  
nasal cavity X 2 weeks



Poly Somnography /  
Sleep studies  
& CPAP map

---

→ Tab Munch ~~by~~ 1 tab ODTS  
FX X 2 weeks.

→ Tabs ~~to~~ AB Flo-ny  
1 tab twice daily X 1 week

→ Review after 3 weeks  
& reports



S. Bag

**Dr. Sreemanti Bag**  
MBBS, MS  
Reg. No. - 73883 WBMC  
Department of ENT  
Desun Hospital