

Gmail

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

Health Check up Booking Request(bobE10855),Package Code(),Beneficiary Code()

1 message

21 February 2024 at 22:33

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



011-41195959

Dear Narayan Memorial Hospital

We have received a booking request for the details are following. Please provide your confirmation by clicking on the yes button.

Are you sure to confirm the booking?

Yes No

Name : Sandip Ganguly
 Package Name : Mediwheel Full Body Health Checkup Male Above 40
 Package Code :
 Location : 601, Diamond Harbour Rd, Manton, Behala, Kolkata, West Bengal
 : 700034
 Contact Details : 8900590045
 E-mail id : sg100156@bankofbaroda.co.in
 Booking Date : 21-02-2024
 Appointment Date : 09-03-2024

Member Information		
Booked Member Name	Age	Gender
MR. GANGULY SANDIP	50 year	Male

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

Hospital Package Name : Mediwheel Full Body Health Checkup Male Above 40
 User Package Name : Mediwheel Full Body Health Checkup Male Above 40
 22 Tests included in this Package :

- Stool Test
- Thyroid Profile
- ESR
- Blood Glucose (Fasting)
- General Physician Consultation
- TMT OR 2D ECHO
- Blood Group
- Blood Glucose (Post Prandial)
- Chest X-ray
- ECG
- USG Whole Abdomen

<https://mail.google.com/mail/u/0/?ik=94f6015d37&view=pt&search=all&permthid=thread-f:1791528808428627265&siml=msg-f:1791528808428627265>

भारत सरकार
Government of India

सदर अग्रिम
SAHILP GANGULY
अवस्था/DOB: 06/12/1973
पुरुष/MALE



5888 2709 1674
जि. 91512764 2625 7456

अतिरिक्त अधिकारी, अतिरिक्त अधिकारी

[Handwritten signature]



DIAGNOSTICS REPORT

Patient Name	: Mr. SANDIP GANGULY	Order Date	: 09/03/2024 09:11
Age/Sex	: 50 Year(s)/Male	Report Date	: 10/03/2024 12:09
UHID	: NMHK.2223542	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8900590045
Address	: HDLI CO-OP SOCIETY, KHARAGPUR, Medinipur, West Bengal, 721306		

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. PV measures 1.0 cm.

CD : Normal . CD measures 0.5 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 : 10.2 cm & Left kidney measures : 11.0 cm.

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





DIAGNOSTICS REPORT

Patient Name	: Mr. SANDIP GANGULY	Order Date	: 09/03/2024 09:11
Age/Sex	: 50 Year(s)/Male	Report Date	: 10/03/2024 12:09
UHID	: NMHK.2223542	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8900590045
Address	: HIJLI CO-OP SOCIETY, KHARAGPUR, Medinipur, West Bengal, 721306		

PROSTATE : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 2.7 cm x 3.5 cm x 2.9 cm. It weight approx 15 gm.

PERITONEUM : : No free fluid is noted.

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

IMPRESSION : Mild fatty changes in liver.

Dr. MADHUSHREE RAY NASKAR
MBBS, DMRD

Consultant Radiologist
RegNo: 57032



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY	Age/Sex : 50 Year(s) / Male
UHID : NMHK.2223542	Order Date : 09/03/2024 09:11
Episode : OP	Mobile No : 8900590045
Ref. Doctor : NMH	DOB : 24/12/1973
Address : HIDLI CO-OP SOCIETY , KHARAGPUR ,Medinipur,W est Bengal ,721306	Facility : NARAYAN MEMORIAL HOSPITAL

Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0155532	Collection Date : 09/03/24 09:35	Ack Date : 09/03/2024 12:23	Report Date : 10/03/24 13:25

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	1.03	ng/ml	0.60 - 1.80
Method - ECLIA			
T4	7.79	ug/dL	5.40 - 11.70
Method - ECLIA			
TSH	3.12	uIU/ml	Adult Male - 0.27-5.50
Method - ECLIA			Adult Female - 0.27-5.50
			Newborns - <25
			Upto 12 years - 0.3-5

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 $\mu\text{mol/L}$ 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 $\mu\text{mol/ml}$.
- 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 $\mu\text{mol/L}$ 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 $\mu\text{mol/L}$ 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





LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY	Age/Sex : 50 Year(s) / Male
UHID : NMHK.2223542	Order Date : 09/03/2024 09:11
Episode : OP	Mobile No : 8900590045
Ref. Doctor : NMH	DOB : 24/12/1973
Address : HIJLI CO-OP SOCIETY , KHARAGPUR ,Medinipur,W est Bengal ,721306	Facility : NARAYAN MEMORIAL HOSPITAL

Immunoassays- Tumour Markers

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0165032	Collection Date : 09/03/24 09:35	Ack Date : 09/03/2024 12:23	Report Date : 10/03/24 13:26

PROSTATE SPECIFIC ANTIGEN (PSA)

PROSTATE SPECIFIC ANTIGEN (PSA)	0.25	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, FAAC
(CONSULTANT BIOCHEMIST)

Checked By



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY	Age/Sex : 50 Year(s) / Male
UHID : NMHK.2223542	Order Date : 09/03/2024 09:11
Episode : OP	
Ref. Doctor : NMH	Mobile No : 8900590045
	DOB : 24/12/1973
Address : HIJLI CO-OP SOCIETY , KHARAGPUR ,Medinipur, West Bengal ,721306	Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0165632	Collection Date : 09/03/24 09:35	Ark Date : 09/03/2024 12:15	Report Date : 09/03/24 15:39

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP : ' O '
 Method - Agglutination forward & Reverse
 RH TYPE : POSITIVE

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB)	14.4	gm/dl	13 - 17
Method - Colorimetric method (Cym Meth)			
RBC COUNT	5.4	x10 ⁶ /ul	4.5 - 5.5
Method - Electrical Impedance Method			
TOTAL WBC COUNT	6.1	10 ³ /cmm	4 - 10
Method - Electrical Impedance Method			
PLATELET COUNT	200	10 ³ /cmm	150 - 410
Method - Electrical Impedance Method			
PCV	46	%	40 - 50
Method - RBC pulse ht. detection method			
MCV	84	fl	83 - 101
Method - calculated			
MCH	27	pg	27 - 32
Method - Calculated			
MCHC	32	gm/dl	31.5 - 34.5
Method - Calculated			
ESR	15 ▲ (H)	%	0 - 10
Method - Modified Westergren Method			

DIFFERENTIAL COUNT

Method - Microscopy			
NEUTROPHILS	55	%	40 - 80
Method - Microscopy			
LYMPHOCYTES	38	%	20 - 40
Method - Microscopy			
MONOCYTES	04	%	2 - 10
Method - Microscopy			
EOSINOPHILS	03	%	1 - 6
Method - Microscopy			
BASOPHILS	00	%	0 - 2
Method - Microscopy			

PERIPHERAL BLOOD SMEAR

RBC : Normocytic normochromic.
 WBC : Within normal limits.



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY	Age/Sex : 50 Year(s) / Male
UHID : NMHK.2223542	Order Date : 09/03/2024 09:11
Episode : OP	Mobile No : 8900590045
Ref. Doctor : NMH	DOB : 24/12/1973
Address : HILTI CO-OP SOCIETY , KHARAGPUR ,Medinipur, West Bengal ,721306	Facility : NARAYAN MEMORIAL HOSPITAL

PLATELET

Adequate.

End of Report

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

Checked By



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY	Age/Sex : 50 Year(s) / Male
UHID : NMHK,2223542	Order Date : 09/03/2024 09:11
Episode : OP	Mobile No : 8900590045
Ref. Doctor : NMH	DOB : 24/12/1973
Address : HILJI CO-OP SOCIETY , KHARAGPUR ,Medinipur,W est Bengal ,721306	Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : DTH0165632	Collection Date : 09/03/24 09:35	Ack Date : 09/03/2024 12:23	Report Date : 09/03/24 16:30

SERUM CREATININE			
SAMPLE : SERUM			
SERUM CREATININE	0.8	mg/dl	0.7 - 1.2
<i>Method - Jaffe Gen2 Compensated</i>			
LIVER FUNCTION TEST (LFT)			
SAMPLE : SERUM			
TOTAL BILIRUBIN	0.6	mg/dl	0 - 1.1
<i>Method - Diazo Method</i>			
DIRECT BILIRUBIN	0.2	mg/dl	0 - 0.2
<i>Method - Diazo Method</i>			
INDIRECT BILIRUBIN	0.4	mg/dl	0.2 - 0.9
<i>Method - Calculated</i>			
SGPT (ALT)	33	U/L	0 - 34
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
SGOT (AST)	21	U/L	0 - 31
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
ALKALINE PHOSPHATASE	92	U/L	53 - 128
<i>Method - IFCC</i>			
TOTAL PROTEIN	7.4	g/dl	6.4 - 8.2
<i>Method - Buret</i>			
ALBUMIN	5.2	gm/dl	3.5 - 5.2
<i>Method - Bromocresol Green</i>			
GLOBULIN	2.2	g/dl	2 - 3.5
<i>Method - Calculated</i>			
ALBUMIN:GLOBULIN	2.4	-	1.1 - 2.5
<i>Method - Calculated</i>			
GGT	21	U/L	8 - 61
<i>Method - Enzymatic colorimetric assay</i>			
BLOOD UREA NITROGEN			
BLOOD UREA NITROGEN	13.1	mg/dl	6 - 20
<i>Method - Calculated</i>			
LIPID PROFILE			
SAMPLE : SERUM			
TOTAL CHOLESTEROL	199	mg/dl	Desirable <200 Borderline 200 - 239 High >=240
<i>Method - CHOD-PAP</i>			
	43	mg/dl	40 - 60



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY	Age/Sex : 50 Year(s) / Male
UHID : NMHK.2223542	Order Date : 09/03/2024 09:11
Episode : OP	Mobile No : 8900590045
Ref. Doctor : NMH	DOB : 24/12/1973
Address : HIJLI CO-OP SOCIETY , KHARAGPUR ,Medinipur,W est Bengal ,721306	Facility : NARAYAN MEMORIAL HOSPITAL

LDL CHOLESTEROL <i>Method - Homogenous Enzymatic Colorimetric</i>	126	mg/dl	Optimal < 100 Borderline 130 - 159 High > 160
VLDL <i>Method - CALCULATED</i>	30	mg/dl	0 - 30
CHOLESTEROL-HDL RATIO	4.63	-	-
LDL-HDL RATIO	2.93	-	-
TRIGLYCERIDES <i>Method - Enzymatic Colorimetric</i>	153 ▲ (H)	mg/dl	Desirable < 150 Borderline 150 - 200 High > 200
URIC ACID <u>SAMPLE : SERUM</u>	8.2 ▲ (H)	mg/dl	3.4 - 7
URIC ACID <i>Method - Enzymatic Colorimetric</i>			
BUN / CREATINE RATIO <u>SAMPLE : SERUM</u>	16.4		
BUN / CREATINE RATIO			
GLYCOSYLATED HAEMOGLOBIN (HBA1C) <u>SAMPLE : EDTA BLOOD</u>	6.1		
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 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 glycemic control :

Excellent Control - 6 - 7 %,
Fair to Good Control - 7 - 8 %,
Unsatisfactory Control - 8 - 10 %



LABORATORY INVESTIGATION REPORT

Patient Name : Mr. SANDIP GANGULY
UHID : NMHK.2223542
Episode : OP
Ref. Doctor : NMH
Address : HIJLI CO-OP SOCIETY , KHARAGPUR ,Medinipur,W
est Bengal ,721306

Age/Sex : 50 Year(s) / Male
Order Date : 09/03/2024 09:11
Mobile No : 8900590045
DOB : 24/12/1973
Facility : NARAYAN MEMORIAL HOSPITAL

BLOOD SUGAR(F)
SAMPLE : PLASMA

BLOOD SUGAR FASTING
Method - Hexokinase

109

mg/dl

70 - 109

BLOOD SUGAR(PP)
SAMPLE : PLASMA

BLOOD SUGAR PP
Method - Hexokinase

119

mg/dl

70 - 140

End of Report

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

Checked By



LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. SANDIP GANGULY	Age/Sex	: 50 Year(s) / Male
UHID	: NMHL2223542	Order Date	: 09/03/2024 09:11
Episode	: OP	Mobile No	: 8900590045
Ref. Doctor	: NPH	DOB	: 24/12/1973
Address	: HEJLI CO-OP SOCIETY , KHARAGPUR ,Medinipur, West Bengal ,721306	Facility	: NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

TESTS	RESULTS	UNIT	REFERENCE RANGE
Sample No : 07H0165672	Collection Date : 09/03/24 09:35	Acc Date : 09/03/2024 12:12	Report Date : 09/03/24 14:24

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	40	ml	
COLOUR	PALE STRAW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.005		1.010 - 1.030
REACTION(pH)	ACIDIC (pH - 6.0)		

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	1-2/HPF	<20/HPF
RBC	ABSENT	ABSENT
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT

Please correlate clinically.

URINE FOR SUGAR FASTING

SAMPLE : URINE

RESULT

ABSENT

Sample No : 07H0165672	Collection Date : 09/03/24 12:53	Acc Date : 09/03/2024 18:18	Report Date : 10/03/24 13:26
------------------------	----------------------------------	-----------------------------	------------------------------

URINE FOR SUGAR PP

SAMPLE : URINE

RESULT

ABSENT

End of Report



LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. SANDIP GANGULY	Age/Sex	: 50 Year(s) / Male
UHID	: NMHK.2223542	Order Date	: 09/03/2024 09:11
Episode	: OP	Mobile No	: 8900590045
Ref. Doctor	: NMH	DOB	: 24/12/1973
Address	: HILJI CO-OP SOCIETY , KHARAGPUR ,Medinipur, West Bengal ,721306	Facility	: NARAYAN MEMORIAL HOSPITAL

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

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

Checked By

Narayan Memorial Hospital

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



DIAGNOSTICS REPORT

Patient Name	: Mr. SANDIP GARGALY	Order Date	: 09/03/2024 09:11
Age/Sex	: 50 Years(Male)	Report Date	: 09/03/2024 13:52
IPID	: NPWR 2223542	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor		Mobile	: 8900590045
Address	: HILLI CO-OP SOCIETY, KHARAGPUR, Medinipur, West Bengal, 721306		

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 Mazumder

MBBS, MD (Radiodiagnosis)

RegNo: WBMC 48861



DIAGNOSTICS REPORT

Patient Name	: Mr. SANDIP GANGULY	Order Date	: 09/03/2024 09:11
Age/Sex	: 50 Year(s)/Male	Report Date	: 10/03/2024 08:59
UHID	: NMHK.2223542	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8900590045
Address	: HDLI CO-OP SOCIETY, KHARAGPUR, Medinipur, West Bengal, 721306		

ELECTROCARDIOGRAM REPORT (ECG)

HR : 102 bpm
Rhythm : Sinus
P wave : Normal
PR Interval : 148 msec
QRS axis : Leftward
QRS duration : 88 msec
QRS configuration : Normal
T wave : Non specific changes
ST segment : Non specific changes
QTc : 429 msec
QT : 326 msec

IMPRESSION

- Sinus tachycardia.
- Leftward axis.
Clinical correlation please.

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

RegNo: 56285

Narayan Memorial Hospital

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

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1ZS



DIAGNOSTICS REPORT

Patient Name	: Mr. SANDIP GANGULY	Order Date	: 09/03/2024 09:11
Age/Sex	: 50 Year(s)/Male	Report Date	: 09/03/2024 17:49
UHID	: NMHK.2223542	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	:	Mobile	: 8900590045
Address	: HDLI CO-OP SOCIETY, KHARAGPUR, Medinipur, West Bengal, 721306		

REPORT OF ECHO SCREENING

No regional wall motion abnormality at rest.
Normal LV systolic function (LVEF =66 %).
Normal RV systolic function. (TAPSE =2.3 cm, RVS' =0.12 m/s).
Mild concentric left ventricular hypertrophy.
Grade I LV diastolic dysfunction (E/e' =6.23).
No pericardial effusion.
Mild TR. Estimated PASP 26 mmHg.
IVC normal diameter &> 50 % respiratory compressibility.
No thrombus, mass / vegetation.

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

RegNo: 56285

SINUS BRADYCARDIA
 LEFTWARD AXIS
 STANDBY NORMAL ECG

PR	160	ms
QRS	80	ms
QT	360	ms
QTc	38	ms
QTd	42	ms
QTJ	45	ms
QTa	48	ms
QTb	50	ms
QTc	52	ms
QTd	55	ms
QTe	58	ms
QTf	60	ms
QTg	62	ms
QTg	65	ms
QTg	68	ms
QTg	70	ms
QTg	72	ms
QTg	75	ms
QTg	78	ms
QTg	80	ms
QTg	82	ms
QTg	85	ms
QTg	88	ms
QTg	90	ms
QTg	92	ms
QTg	95	ms
QTg	98	ms
QTg	100	ms

