

# AVISHKAR DIAGNOSTIC

Reference No. : 01/21320/012  
 Patient Name : JITENDRA KUMAR SAHU  
 Age : 51 Years  
 Referred by : Dr. AFROJ ALAM

Date of Test : 20.10.2021  
 Gender : Male

## U.S.G OF WHOLE ABDOMEN

Liver is normal in size, having a regular smooth outline and of homogenous increased echopattern. Few simple cysts are seen in the right lobe of the largest one measuring 1.19 x 1.08 cm in segment V/I. Intra-hepatic biliary channels are not dilated. Liver measures : 12.76 cm. in diameter.

The appearance of portal vein is normal, no thrombus is seen. Gall - Bladder is partially distended with normal contour & wall thickness. No calculus or any intraluminal mass is seen.

Common bile duct is not dilated. No calculi opacity or any intraluminal echogenicity could be detected at the visualised portion of common bile duct.

Pancreas is normal in size and of normal echopattern. Pancreatic duct is not dilated. No calcification or any pancreatic collection of fluid could be detected.

Spleen is normal in size and of homogenous echopattern. Splenic vein at hilum is normal. Spleen measures : 7.87 cm.

Both kidneys are enlarged in size.

Cortico-medullary differentiation is normal.

No calculi opacity or any hydronephrotic changes noted.

Multiple cortical cysts are seen in the left kidney, largest one measuring 4.90 lower pole calyx.

Multiple cortical cysts are seen in the right kidney, largest one measuring 2 lower pole calyx.

Rt. Kidney measures : 15.55 cm. in L.A.

Lt. Kidney measures : 15.30 cm. in L.A.

Both ureters are not visualised. Hence it is not dilated.

U. Bladder is normal in size, having a normal wall thickness.

Neither intraluminal lesion nor any calculi opacity could be demonstrated.

Prostate gland is normal in size, with homogeneous echotexture.

No space occupying lesion is seen. Capsule is intact.

Prostatic volume : 18.66 cm<sup>3</sup>.

**DIFFUSE FATTY INFILTRATION OF LIVER, GRADE - I**

**SIMPLE HEPATIC CYSTS.**

**BILATERAL POLYCYSTIC KIDNEY DISEASE.**

Thanks for kind

DR. S.S. PARIHAR  
 MD (RADIOLOGICAL DIAGNOSIS)  
 Consultant [Radiology & Imaging]

Dr. RAKI  
 MBBS, DM  
 Consultant [Radiology]  
 [Regd No. - V]

P.S.....  
 tu

IRI WITH IN BORE EXPERIENCE, 512 SLICE CARDIAC CT SCAN, 4D TVS, COLOUR DOPPLER, ECG, BE  
 COLONOSCOPY, ENDOSCOPY, TMT, EE



# Spandan

Touch Feelings / DIAGNOSTIC CENTRE  
AN ISO 9001:2008 CERTIFIED LABORATORY

21/B, N.S.B.Road, Balaji Bhawan  
Opp:- Marwari Sanatan Vidyalaya,  
Raniganj - 713347  
Ph.: 0341-2443299  
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Raniganj

|                          |                             |                             |            |
|--------------------------|-----------------------------|-----------------------------|------------|
| Patient's Name :         | Mr. Jitendra Kumar Sahu     | Age : 52 Yrs                | Sex : Male |
| Adv. By: Dr. :           | Dr. Subhas Mukherjee, MD    | Reporting Date:- 16.07.2023 |            |
| Collect by: SPR II (Lab) | Lab Code:- LG- 202307016-13 | Specimen:                   | BLOOD      |

| Investigation:-             | Result:- | Unit:- | Normal Range                         | Method             |
|-----------------------------|----------|--------|--------------------------------------|--------------------|
| TOTAL COUNT                 | : 10,400 | /cmm   | (4,100-11,000/cmm)                   |                    |
| DIFF. COUNT: NEUTROPHILLS   | : 70     | %      | ( 40-65% )                           |                    |
| LYMPHOCYTES                 | : 28     | %      | ( 20-40% )                           |                    |
| EOSINOPHILLS                | : 02     | %      | ( 01-04% )                           |                    |
| MONOCYTES                   | : 00     | %      | ( 01-06% )                           |                    |
| BASOPHILLS                  | : 00     | %      | ( 00-03% )                           |                    |
| HAEMOGLOBIN(CMG)            | : 9.0    | gm/dl  | ( F-12-14 gm/dl<br>M-14-16gm/dl )    | Cyanmethaemoglobin |
| E.S.R. 1 <sup>st</sup> Hour | : 60     | mm     | (02-15mm )                           | Westergen          |
| B.UREA                      | : 78**   | mg/dl  | (10-45mg/dl )                        | GLDH               |
| CREATININE                  | : 5.1**  | mg/dl  | F- 0.6-1.2 mg/dl<br>M-0.7-1.4 mg/dl) | Jaffe's            |

-:End of Report:-

\*\*Checked Twice.

Dr. Siddhartha Roy  
MBBS, DCP, MNDAL (MUM) RCGP (UK)

Dr. Swarup Ghosh  
MD (Pathologist)  
Reg.No.- 52140 (W.B.M.C)

Dr. Rupak Chattopadhyay  
MD (Bio-Chemistry)  
Reg.No.- 54633 (W.B.M.C)

All reference ranges mentioned here, are according to the the reference range mentioned in the kit. Reference ranges may be changed with the change of kit or method.  
C.T. Scan ■ 4D USG. ■ Colour Doppler ■ Digital X-Ray ■ ECG ■ EEG ■ Echo Cardiography ■ PET ■ FNAC ■ ...  
UNIT 2 : Beside Seara Park, ...

# E.S.I. HOSPITAL, ASANSOL

## REPORT ON PATHOLOGICAL EXAMINATIONS

35

Name of Patient: Jitenendra Kumar Sahu Age: 52y Sex: M

I.P.No.: 4114044382 Ward: D.U Bed No: 04

Examination Required: B. for EBC, Ur. ex. nat. ut, Lipid Profile, LFT, Uric Acid, FBS, HBsAg, Anti HCV, HIV

Date: 4/1/22

Signature of M.O.  
Medical Officer  
DIALYSIS UNIT  
E.S.I. HOSPITAL ASANSOL

### HAEMATOLOGY AND SEROLOGY

|                                    |                |                     |                  |
|------------------------------------|----------------|---------------------|------------------|
| BLOOD GROUP:                       |                | WIDAL-REACTION:     |                  |
| HAEMOGLOBIN:                       | 13.0 gm%       | T <sub>O</sub> :    | A <sub>H</sub> : |
| ESR (1st Hour):                    | 17 mm          | T <sub>H</sub> :    | B <sub>H</sub> : |
| Total Count(WBC):                  | 8,200 /cumm    | HIV 1 & 2:          | Non React        |
| Neutrophil:                        | 58 %           | HBsAg :             | Non React        |
| Lymphocyte:                        | 30 %           | HCV Antibody:       | Non React        |
| Eosinophil:                        | 02 %           | VDRL:               |                  |
| Monocyte:                          | 01 %           | RA:                 | (Normal:<10)     |
| Basophil:                          | 00 %           | ASO                 | (Normal:<200)    |
| RBC Count:                         | mill/cumm      | CRP:                | (Normal:<0.6)    |
| PCV :                              | %              | <b>BIOCHEMISTRY</b> |                  |
| MCV :                              | fl             | Blood Sugar(F):     | 89               |
| MCH :                              | pg             | Blood Sugar(PP):    |                  |
| MCHC :                             | gm%            | Blood Sugar(R):     |                  |
| Platelet Count :                   | 2.05 Lakh/cumm | Urea :              | 81               |
| BT:                                | Min Sec        | Creatinine :        | 7.35             |
| CT:                                | Min Sec        | Uric Acid :         | 8.1              |
| Malaria Antigen :                  |                | Serum Electrolyte : |                  |
| Dengue : NS <sub>1</sub> Antigen : |                | Sodium:             | 145              |
| IgM : IgG:                         |                | Potassium:          | 4.3              |
|                                    |                | Chloride :          | 106              |
|                                    |                | Amylase :           |                  |
|                                    |                | Lipase :            |                  |

# Speciality

A FULLY AUTOMATED PATHOLOGICAL DIAGNOSTIC UNIT  
N.S.B. ROAD, RANIGANJ, RAMBAGAN, DR'S COLONY  
GOVT. LIC. NO. 34821933

## REPORT

Patient's Name : Mr. Jitu Sahu.

Age : 51 Yrs / M

ID No : SP/21/10

Ref. Name : Self.

Date

### INVESTIGATION

### RESULT

UREA

148 mg/dl.

CREATININE

9.7 mg/dl.

URIC ACID

4.6 mg/dl.

with clinical conditions The reported results are for information and for interpretation of the laboratory to laboratory and also in some parameters from time to time for the same patient. f kits. Instrument breakdown, natural climate, test may not be done as per Schedule. report is not valid for medico-legal purpose. Neither the Speciality nor its employees any loss or damage that may be included by any person as a result of presuming the mea

( Under The Management of - **UTTARPARA KOTRUNG MUNICIPALITY** )

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Regional Diagnostic Laboratory CMDA, IPP - VIII • Ultra Sonography Unit / X-Ray Unit

11/OPD Reg. No. : 202110-231501

Booking Date : 21.10.2021

Name : MRS. JAYA BISWAS

Age : 32 Year 0 Month 0 Day Sex : Female Report Date : 21/10/2021

Referred Doctor : DR. UTTARPARA STATE GENERAL HOSPITAL

Part Examined : USG of Both Breast & Axilla.

HRUSG Examination of Rt. Breast : -

Ill -Defined sol of mixed echotexture in Rt. Periareolar region is suggested.

On color Doppler Examination no obvious vascularity is seen within or around the sol.

Oedema of Rt. Breast ( Periareolar region) is suggested.

Rt. Axilla reveal no obvious abnormality. ✓

Clinical Correlation & Further Studies such as Mammography Examination may be Suggested.

HRSG Examination of Lt. breast reveal normal skin, subcutaneous fat, mammary layer & Retro mammary layer.

Glandular tissue is predominant in mammary layer.

No SOL is seen within Lt. breast.

Lt. Nipple areola complex appear normal.

Lt. Axilla reveal no obvious abnormality.

Impression:-

Normal HRSG Examination of Lt. Breast.

Clinical Correlation is Suggested.

  
**DR. D. LAHIRI**  
M.B.B.S. (Cal), D.M.R.D. (Cal)  
Consultant Radiologist & Sonologist

21.10.21

Ref. No. : 256/25-11-2021  
Patient's Name : JAYA BISWAS.  
Age. : 36 Years.  
Sex. : FEMALE.  
Referred by : SELF.

<<< FINE NEEDLE ASPIRATION CYTOLOGY >>>

Site : Swelling Rt.breast.  
~~~~~

Aspirate was purulent.

MICROSCOPICAL EXAMINATION :  
~~~~~

Smears are highly cellular comprising plenty of polymor-  
phonuclear inflammatory infiltrates along with macrophage  
and cellular debris spreading in the fatty connective  
tissue.

A few clumps of tightly-packed ductal epithelial cells  
arranged scatteredly seen.

Obvious malignant cells not seen.

IMPRESSION : Suggestive of Acute mastitis with abscess-Rt  
~~~~~  
breast; repeat FNAC or H/P/E suggested after controlling  
infection.

● **Answer:** (A)

| Test Name                                                           | Results | Units                | Ref. Interval   |
|---------------------------------------------------------------------|---------|----------------------|-----------------|
| <b>COMPLETE BLOOD COUNT (CBC)*</b><br>(† Technical Impedance & VCS) |         |                      |                 |
| Hemoglobin*                                                         | 9.50    | g/dL                 | 12.00 - 16.00   |
| Packed Cell Volume (PCV)*                                           | 29.40   | %                    | 36.00 - 46.00   |
| RBC Count*                                                          | 3.53    | mill/mm <sup>3</sup> | 3.20 - 4.80     |
| MCV*                                                                | 83.20   | fL                   | 83.00 - 101.00  |
| MCH*                                                                | 26.90   | pg                   | 27.00 - 32.00   |
| MCHC*                                                               | 32.30   | g/dL                 | 31.50 - 34.50   |
| Red Cell Distribution Width (RDW)*                                  | 15.00   | %                    | 11.00 - 14.00   |
| Total Leukocyte Count (TLC)*                                        | 8.20    | thou/mm <sup>3</sup> | 4.00 - 10.00    |
| <b>Differential Leucocyte Count (DLC)</b>                           |         |                      |                 |
| Segmented Neutrophils*                                              | 69.80   | %                    | 40.00 - 80.00   |
| Lymphocytes*                                                        | 20.00   | %                    | 20.00 - 40.00   |
| Monocytes*                                                          | 6.40    | %                    | 2.00 - 10.00    |
| Eosinophils*                                                        | 3.20    | %                    | 1.00 - 5.00     |
| Basophils*                                                          | 0.60    | %                    | <2.00           |
| <b>Absolute Leucocyte Count</b>                                     |         |                      |                 |
| Neutrophils*                                                        | 5.72    | thou/mm <sup>3</sup> | 2.00 - 7.00     |
| Lymphocytes*                                                        | 1.64    | thou/mm <sup>3</sup> | 1.00 - 3.00     |
| Monocytes*                                                          | 0.52    | thou/mm <sup>3</sup> | 0.20 - 1.00     |
| Eosinophils*                                                        | 0.26    | thou/mm <sup>3</sup> | 0.02 - 0.50     |
| Basophils*                                                          | 0.05    | thou/mm <sup>3</sup> | 0.02 - 0.10     |
| Platelet Count*                                                     | 235.0   | thou/mm <sup>3</sup> | 150.00 - 410.00 |
| Mean Platelet Volume*                                               | 9.8     | fL                   | 6.5 - 12.0      |

### Note

1. As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of



Lab No. : DUN/18-11-2021/SR5580290  
Patient Name : JAYA BISWAS  
Age : 36 Y 11 M 27 D  
Gender : F

Lab Add. :  
Ref Dr. : Dr. INDRANIL PAUL  
Collection Date :  
Report Date : 18/Nov/2021 01:15PM



**DEPARTMENT OF RADIOLOGY**  
**MAMMOGRAPHY OF BOTH BREAST**

**PROCEDURE :**

*Mammography of both breasts has been performed using very low radiation dose. Mediolateral oblique & cranio-caudal projections have been obtained, markers are placed in the lateral portion of the breast.*

**FINDINGS :**

Contour of both breast are smooth, regular & symmetrical.

Breast parenchyma show heterogenously dense fibro glandular stroma (Right > Left).

Ill-defined density with obscured margin seen in right central breast effacing nipple -areola complex and thickened, edematous overlying skin. Amorphous calcifications seen in the lesion.

Left Nipple & sub areolar tissues appear unremarkable.

Bilateral axillary enlarged lymph nodes seen (Right > Left).

**IMPRESSION :**

Right breast SOL with axillary adenopathy.

BIRADS Category - 4.

**[ BIARDS CLASSIFICATION ] :**

Category 0 : Need additional imaging evaluation.

Category 1 : Negative.

Category 2 : Benign finding.

Category 3 : Probably benign findings, short interval follows up suggested.

Category 4 : Suspicious abnormality, Biopsy should be considered.

Category 5 : Highly suggestive of malignancy, appropriate action should be taken.

**N.B :**

*Negative mammography does not exclude breast cancer.*

*All imaging must be considered in the context of the clinical findings.*

*In dense breast, an underlying mass lesion may be obscured : FNAC/ biopsy, high resolution sonography may be helpful if clinically indicated.*



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|                 |                 |
|-----------------|-----------------|
| Anteceptor Code | 21              |
| Patient's Name  | MR JIM A HESTON |
| ID Number       | ADP 2543 1-243  |
| Refused By      | DR S MURPHY     |

Received On 05/10/2024  
Reported On 05/10/2024  
Age/Sex 34Y / FEM ALE



### USE OF BOTH BREAST

**RIGHT BREST**

**NUCLE** No abnormalities detected

RETRO-AREOLAR AREA No abnormalities detected

**CHEST MUSCLE** *Myofascial*

**ADULT** No abnormalities detected

**AXILLA LYMPH NODES** No significant lymphadenopathy detected.

### LEFT BREST

**NIPPLE** No abnormalities detected.

**RETRO-ARTICULAR AREA:** No abnormalities detected.

**CHEST MUSCLE** Normal

**AXILLA** No abnormalities detected

**AXILLA LYMPH NODES** No significant lymphadenopathy detected.

**IMPRESSION** → Normal study

When faced with

INTERNATIONAL COLLEGE OF MANAGEMENT  
K. J. Somaiya Institute of Management Studies & Research

**E-mail:** [edward.zhang@mcgill.ca](mailto:edward.zhang@mcgill.ca)

[illegible]

(FACILITY FOR HOME COLLECTION OF BLOOD AVAILABLE)

**Timings:** Sunday to Saturday 7.30 a.m. to 4.30 p.m.

Bed No. 241

1. DISCHARGE CERTIFICATE

Patient's Name: ASHKAR, AS

Age 67. Sex Male

Address: ... Lima, Peru

Date of Admission:

Time

Date of Discharge

Time

### ONE DIMENSION

- One of the most important things in the world is the human mind. It is the only thing that can think, feel, and create. It is the only thing that can love and hate. It is the only thing that can hope and despair. It is the only thing that can make a difference in the world.

Treatment Done

### Condition of Discharge

## Diagnosis

**Advice on discharge:**

Advice on discharge: PMA → upper Renovascularisation.  
 Given medical Comorbidity & discharged &  
 referred to higher Centre for Prosthetics  
 fls → Cholecystectomy.  
 Δ Bone Arm II (amputated). Bone Chaperone  
 Rf:- blood diff.

- 5. Aspirin (15mg) 100 x ml
- 9. Clopidogrel (75) 100 x ml
- 11. Plavix (40) 100 x ml
- 12. Warfarin (2.5) 100 x ml
- 13. Kantron (2-5) 100 x ml
- 14. Co Amoxiclav (625) 100 x ml

• 8. Metoprolol (40mg) 100 x ml  
 • 9. Mometan (40mg) 100 x ml  
 ✓ Referred to Cardiology

■ Not for medical/legal purpose

• If you experience any of the following, stop taking this medicine immediately:

“ចំពោះការប្រកាសប្រកាន់ស្របតាមការស្នើសុំរបស់លោកស្រី”

• Dr. Fournier (200) 1701 & 7th

**វេជ្ជបណ្ឌិត ហ៊ុន ធីត**

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**ULTRASONOGRAPHY DEPARTMENT**

Patient Name: Mr. S. S. S. Age: 45 Sex: M  
 Ref: Dr. S. S. S. Date: 10.10.11  
 Ref: Dr. S. S. S. Date: 10.10.11

CEG - 5  
 PR - 112  
 PR - 154  
 PR - 124  
 PR - 35 gm  
 PR - (76) enlarged G.I. Jct.  
 PR - enlarged  
 GCS - few calculi (5-2mm) in C.S.  
 well thickened & abnormal  
 70 acute calculus cholecystitis.

visualized CEG lumen clear.  
 GCS (HUS) defect noted in GCS wall &  
 surrounding fat & bowel are infl.  
 for CEG perforation.  
 No debris & no features  
 of peritonitis.

Dr. N. P.  
 Sonologist

Science of USG & RAI is interpretation of various shadows produced by both normal and abnormal structures and hence has limitations. Report is meant only to assist a competent medical practitioner to have idea of disease if any report indicates various possibilities that have to be correlated with clinical findings and confirmed with laboratory and other investigations (not for medico legal purposes).



# ANANDALOK CLINICAL LABORATORY

N. K. Chatterjee, Kankarbagh Hospital, 13/3/30  
 RANIGANJ (Paschim Bardhaman) - 731047 (WB) INDIA  
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 OK-7/3, Salt Lake City, Kolkata-700 091 (WB) INDIA (033) 2346-2971-74

## PATHOLOGICAL REPORT

Patient Name : ASHOK DAS  
 Refd. By : Dr. DIBYENDU DAS, MD, DM (CARDIO)  
 Regn No : AH/0234/20-21  
 Report Entered By : VIVEK

Date : 23-04-2020  
 Age : 60 yrs  
 Sex : Male  
 Writer : CCA-241

Source of Specimen : BLOOD

## HAEMATOLOGICAL REPORT

| INVESTIGATION        | VALUE              | NORMAL RANGE             |
|----------------------|--------------------|--------------------------|
| HAEMOGLOBIN          | 13.0 gm%           | M-13-18gm%, F-11-16gm%   |
| W.B.C                | 12,400 /cmm.       | 5,000- 12,000 /cmm.      |
| ESR                  | 15 mm/ 1st hr.     | 05-15 mm/ 1st hr.        |
| PLATELET             | 2,20,000 /cmm.     | 2,50,000 -3,50,000 /cmm. |
| RBC                  | 4.74 Million /cmm. | 4.2-5.2 Million /cmm.    |
| PCV                  | 37.7%              | 37-47%                   |
| MCV                  | 79.5 Cubic Micron  | 82-98 cubic micron       |
| MCH                  | 27.1%              | 26-34%                   |
| MCHC                 | 34.5%              | 32-36%                   |
| DIFFERENTIAL COUNT:- |                    |                          |
| NEUTROPHIL           | 81%                | 60-70%                   |
| LYMPHOCYTE           | 13%                | 20-30%                   |
| EOSINOPHIL           | 12%                | 00-05%                   |
| MONOCYTE             | 05%                | 00-10%                   |
| PLASMA CELL          | 00%                | 00-02%                   |

Reference ranges are age and sex matched. Reference limits mentioned herein are in accordance with the kit which may change with the change in chemistry of the kit.

Dr. Sanjaya Banerjee  
 MBBS, MD (Pathology)  
 (Consultant Pathologist)  
 Regd No : 65227 (WBMC)

Dr. J. K. Sen  
 MBBS, MD  
 (Consultant Pathologist)  
 Regd No : 38890 (WB)

Dr. Ganesh Chandra  
 MBBS, D.C.  
 (Pathologist)  
 Regd No : 350



# ANANDALOK CLINICAL LABORATORY

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## PATHOLOGICAL REPORT

Patient Name : ASHOK DAS  
Refd. By : Dr. DIBYENDU DAS, MD,DM(CARDIO)  
Regn No : AH/0234/20-21  
Report Entered By :

Date : 23-04-20  
Age : 60 yrs  
Sex : Male  
W.No : CCU-241

Source of Specimen : BLOOD.

Blood for HbsAg, HCV, HIV(I)&(II) test.

RESULT : HbsAg :- Negative.  
HCV :- Non-reactive.  
H.I.V (I) & (II) :- Non-reactive.

METHOD by: RAPID.

Comments : Please correlated with the Clinical Condition.

Checked  
&  
Verified

Dr. Soumyee Banerjee  
MBBS, M.D.(Pathology)  
(Consultant Pathologist)  
Regd No : 65227(WBMC)

Dr. A. K. Sen  
MBBS, M.D.  
(Consultant Pathologist)  
Regd No : 38890 (W/B)

Dr. Ganes Ch  
MBBS, D.C.  
(Pathologist &  
Regd No : 3349



Patient Name : ASHOK DAS  
 Refd. By : DR. DISYENDU DAS, MD, DM (CARDIO)

Date : 23-04-2020  
 Age : 60 yrs  
 Sex : Male  
 W.No : CCU-241

**Source of Specimen : BLOOD**

**BIOCHEMICAL REPORT**

| INVESTIGATION | VALUE      | NORMAL RANGE   |
|---------------|------------|----------------|
| POTASSIUM     | 3.9 mmol/L | 3.5-5.0 mmol/L |

N.B. All reference ranges are age and sex matched. Reference limits mentioned herein are in accordance with the literature along with the kit which may change with the change in chemistry or the kit.

Dr. Soumya Dasgupta  
 MBBS, M.D. Pathology  
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Dr. S. S. Das  
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 Dr. Soumya Dasgupta  
 MBBS, M.D. Pathology  
 (Consultant Pathologist)  
 Regd No : 65227 (WB)

# ECHOCARDIOGRAPHY REPORT

## M-MODE & 2D MEASUREMENTS

| PARAMETERS               | OBSERVED | NORMAL RANGE |
|--------------------------|----------|--------------|
| Aortic Root Diameter     | 24       | 20-40 mm     |
| Aortic Cusp Separation   | 18       | 10-20 mm     |
| Left Atrial Diameter     | 42       | 27-38 mm     |
| Inter Ventricular Septum | 9        | 6-11 mm      |
| LVRD                     | 110      | 30-53 mm     |
| LVED                     | 24       | 24-42 mm     |
| LVPW                     | 9        | 6-11 mm      |
| MV E/PSS                 |          | 0-10 mm      |
| LV Ejection Fraction     |          | ≥ 55%        |
| LV Fractional Shortening |          | 27-45 %      |

## DOPPLER MEASUREMENTS

| PARAMETERS                    | OBSERVED | NORMAL RANGE |
|-------------------------------|----------|--------------|
| MVA Velocity                  |          | 0.2-0.7 m/s  |
| MVA Velocity                  |          | 1-2          |
| E/A Ratio                     |          | 160-240 msec |
| MV Deceleration Time          |          | > 220 msec   |
| MVP 1/2 Time                  |          | 1.0-1.7 m/s  |
| Peak Aortic Velocity          |          | < 2.7 m/s    |
| Peak Aortic Pressure Gradient |          | -            |
| Peak TR Velocity              |          | 15-30 mmHg   |
| Peak TR Pressure Gradient     |          |              |
| RVSP / PAOP                   |          |              |

## 2-D ECHO & DOPPLER FINDING :

VALVES : (N)

DIMENSIONS : (N)

ECG : Sinus bradycardia. Rate by ECG 40.

OTHERS : No pericardial effusion (N)

CONCLUSIONS : Mild LV systolic dysfunction

23/4/20  
Dr. Dibyendu Das  
MBBS, MD, DM

# ANANDALOK HOSPITAL

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## ANGIOGRAPHY REPORT

Date: 26/04/2020

Patient Name: Ashok Das.

Admission No: AH/ 0234/20-21

Procedure: CAG

Operator: Dr. Dibyendu Das.

Diagnosis: AWMII.

Diagnostic Catheter: TIG(5F).

Contrast: Omnipaque.

LM: Long & normal.

AD: Type II vessel, 90% lesion in proximal part.

Diagonals: Normal.

CX: Nondominant & normal.

VS: Normal.

LA: Large, dominant & 70%-80% lesion in mid part.

RA: Normal.

LCx: Normal.

Impression: DVCAD.

Intervention: PTCA+ stenting to LAD & RCA.

Age: 60 Y.

Sex: M

File No: 0234

Cath No: 3653/20

Bed No: CCU-241

Referred by: Dr. Dibyendu Das.

Dr. Dibyendu Das DM  
Sr. Consultant Cardiologist  
Interventionist

DEPARTMENT OF HEALTH & FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL  
OPD Patient Card

SURGERY 9

Name : ASHOK D. Age : 60 Yrs. Months : 0 Days : 0  
Sex : Male Ref. From :  
Visit No. : 1 Department : SURGERY Visit Date :  
Doctor/Unit name (DOW) : Entry No. :  
Room No. :

Visit No. : 2  
Visit Date :  
Department :  
Doctor/Unit :  
Entry No. :

Visit No. : 3  
Visit Date :  
Department :  
Doctor/Unit :  
Entry No. :

Visit No. :  
Visit Date :  
Department :  
Doctor/Unit :  
Entry No. :

Clinical Notes

ADVICE

H/O IHD

W/O = 21 / 1.0

LAD, RCA block  
Planned for PICA  
stenting to LAD &  
RCA

USG → suggestive of  
GB perforation

Clearly no signs of  
peritonitis.

3 DAY

Urgent CECT whole abdomen  
To b. Cefuroxime (500mg) BD x 5  
Review & report / 503

H. U. S.  
05/05/2020

05/05/2020 09:20

DEPARTMENT OF HEALTH & FAMILY WELFARE  
GOVERNMENT OF WEST BENGAL  
OPD Patients Card

ARNO 100111

DATE OF VISIT: / /

|                                  |  |                               |  |                               |  |                               |  |                               |  |                               |  |
|----------------------------------|--|-------------------------------|--|-------------------------------|--|-------------------------------|--|-------------------------------|--|-------------------------------|--|
| PATIENT'S NAME: <b>ASHOK DAS</b> |  | AGE: <b>45</b>                |  | SEX: <b>M</b>                 |  | RELIGION: <b>Hindu</b>        |  | Caste: <b>Santhal</b>         |  | Occupation: <b>Farmer</b>     |  |
| No. : <b>1</b>                   |  | Department: <b>General</b>    |  | Visit Date: <b>10/10/2011</b> |  | Entry No.:                    |  | Visit Date: <b>10/10/2011</b> |  | Entry No.:                    |  |
| Visit No. <b>2</b>               |  | Visit Date: <b>10/10/2011</b> |  | Visit Date: <b>10/10/2011</b> |  | Visit Date: <b>10/10/2011</b> |  | Visit Date: <b>10/10/2011</b> |  | Visit Date: <b>10/10/2011</b> |  |
| Department: <b>General</b>       |  | Department: <b>General</b>    |  | Department: <b>General</b>    |  | Department: <b>General</b>    |  | Department: <b>General</b>    |  | Department: <b>General</b>    |  |
| Entry No.:                       |  | Entry No.:                    |  | Entry No.:                    |  | Entry No.:                    |  | Entry No.:                    |  | Entry No.:                    |  |

| Clinical Notes                                                                                               | ADVICE                                                                                                                                                                                                                           |
|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>DO. 1HP -</b><br/><b>ovp -</b><br/><b>no pain, no clots given</b><br/><b>who gave blood 2 days</b></p> | <p><b>Adv</b></p> <ul style="list-style-type: none"> <li>- to continue all medicine</li> <li>- Rest suggested opinion</li> <li>- eat, sleep</li> <li>- plan on P.L.</li> <li>- to attend surgery</li> <li>- <u>PR</u></li> </ul> |

05/10/2012 09:11



*[Faint, illegible handwriting]*

*[Faint, illegible handwriting]*

## ULTRASOUND ABDOMEN AND PELVIS

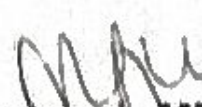
**TECHNIQUE:** B Mode Ultrasound

### **OBSERVATIONS:**

|                     |                                                                                                                                                                                                                                |
|---------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>LIVER</b>        | Normal in size ~ 11 cm<br>Normal in echotexture<br>No focal lesion<br>Portal vein appears normal<br>Intra hepatic biliary radicles (IHBR) appears normal<br>Hepatic veins appear normal                                        |
| <b>GALL BLADDER</b> | Well distended<br>Wall thickness appears normal<br>No calculus                                                                                                                                                                 |
| <b>SPLEEN</b>       | Normal in size ~ 11 cm<br>Normal echotexture<br>No focal lesion                                                                                                                                                                |
| <b>PANCREAS</b>     | Head, body and tail appears normal in size<br>Normal echotexture<br>Main pancreatic duct appears normal. No calcification                                                                                                      |
| <b>RIGHT KIDNEY</b> | Measures ~ 77 x 41 mm<br>Increased renal cortical echotexture<br>Cortico-medullary differentiation is lost<br>Pelvicalyceal system appears normal. No calculus<br>Simple cortical cyst measures ~ 10 x 10 mm seen in mid pole. |
| <b>LEFT KIDNEY</b>  | Measures ~ 68 x 35 mm<br>Increased renal cortical echotexture<br>Cortico-medullary differentiation is lost<br>Pelvicalyceal system appears normal. No calculus<br>Simple cortical cyst measures ~ 8 x 8 mm seen in lower pole. |
| <b>BLADDER</b>      | Partially distended.<br>Diffuse wall thickening measures ~ 8 mm seen.                                                                                                                                                          |
| <b>PROSTATE</b>     | Mildly enlarged in size ~ 41 x 35 x 31 mm [ 24 cc ], Calcification s                                                                                                                                                           |
| <b>SPACES</b>       | No free fluid in peritoneal cavity                                                                                                                                                                                             |

### INTERPRETATION & DIAGNOSIS:

- Bilateral medical renal disease.
- Bilateral renal simple cortical cysts.
- Mild prostatomegaly.

  
**Dr. M. Sathyasree, MB**  
**Radiologist**

#### Note:

\* Patient tolerated the procedure well. Impression is profession opinion, not a final diagnosis. This examination has Clinical correlation is necessary for imaging findings. If there is variance clinically this examination may be repeated or reevaluated by other investigation. Please see your treating physician with this report.

**SRINARAYANI HOSPITAL & RESEARCH CENTER**

*(Established in 1985, Accredited by NABH, ISO 9001:2015)*

Patient: 21/2018 MINITANAL MUNITAL, Age: 70 Years, Sex: M

Ref No: 21141/19 Date: 15/01/21

Ref: LAC/19/19/19/19/19



**CT SCAN CHEST SCREENING**

**Findings:**

**MEDIASTINUM:**

Trachea is normally placed and appears normal in caliber.  
Both major bronchi appear normal.  
Ascending, arch and descending thoracic aorta appear normal.  
Main pulmonary artery and its branches appear normal.  
The pericardium appears normal.

**\* LUNG:**

Tiny nodules seen in posterior segment of right upper lobe, lateral segment of right middle lobe & lingula.  
No ground glass opacities / consolidation.

**LYMPHADENOPATHY:**

There is no evident lymphadenopathy.

**PLEURAL SPACES:**

Pleural cavities on both sides appear normal.

**VISUALISED UPPER ABDOMEN**

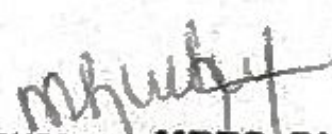
Appears normal.

**VISUALISED BONE:**

Appears normal.  
No obvious sclerotic / lytic focus.

**IMPRESSION:**

- \* Tiny nodules in posterior segment of right upper lobe, lateral segment of right middle lobe & lingula.
- \* No CT evidence of viral pneumonia.

  
**Dr. M. Sathyasree, MBBS, DNB.**  
**Radiologist**

**Note:**

- \* Patient tolerated the procedure well.
- Impression is professional opinion, not a final diagnosis. This examination has its own limitations.
- Clinical correlation is necessary for imaging findings. If there is variance clinically this examination may be repeated or reevaluated by other investigation.
- Please see your treating physician with this report.

Department of Pathology

22-2598

**2009-2010**

標記の付いた項目は、

**NOTE**

2000



1998, 1999, 2000, 2001, 2002, 2003, 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024, 2025, 2026, 2027, 2028, 2029, 2030, 2031, 2032, 2033, 2034, 2035, 2036, 2037, 2038, 2039, 2040, 2041, 2042, 2043, 2044, 2045, 2046, 2047, 2048, 2049, 2050, 2051, 2052, 2053, 2054, 2055, 2056, 2057, 2058, 2059, 2060, 2061, 2062, 2063, 2064, 2065, 2066, 2067, 2068, 2069, 2070, 2071, 2072, 2073, 2074, 2075, 2076, 2077, 2078, 2079, 2080, 2081, 2082, 2083, 2084, 2085, 2086, 2087, 2088, 2089, 2090, 2091, 2092, 2093, 2094, 2095, 2096, 2097, 2098, 2099, 2100, 2101, 2102, 2103, 2104, 2105, 2106, 2107, 2108, 2109, 2110, 2111, 2112, 2113, 2114, 2115, 2116, 2117, 2118, 2119, 2120, 2121, 2122, 2123, 2124, 2125, 2126, 2127, 2128, 2129, 2130, 2131, 2132, 2133, 2134, 2135, 2136, 2137, 2138, 2139, 2140, 2141, 2142, 2143, 2144, 2145, 2146, 2147, 2148, 2149, 2150, 2151, 2152, 2153, 2154, 2155, 2156, 2157, 2158, 2159, 2160, 2161, 2162, 2163, 2164, 2165, 2166, 2167, 2168, 2169, 2170, 2171, 2172, 2173, 2174, 2175, 2176, 2177, 2178, 2179, 2180, 2181, 2182, 2183, 2184, 2185, 2186, 2187, 2188, 2189, 2190, 2191, 2192, 2193, 2194, 2195, 2196, 2197, 2198, 2199, 2200, 2201, 2202, 2203, 2204, 2205, 2206, 2207, 2208, 2209, 2210, 2211, 2212, 2213, 2214, 2215, 2216, 2217, 2218, 2219, 2220, 2221, 2222, 2223, 2224, 2225, 2226, 2227, 2228, 2229, 2230, 2231, 2232, 2233, 2234, 2235, 2236, 2237, 2238, 2239, 2240, 2241, 2242, 2243, 2244, 2245, 2246, 2247, 2248, 2249, 2250, 2251, 2252, 2253, 2254, 2255, 2256, 2257, 2258, 2259, 2260, 2261, 2262, 2263, 2264, 2265, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2273, 2274, 2275, 2276, 2277, 2278, 2279, 2280, 2281, 2282, 2283, 2284, 2285, 2286, 2287, 2288, 2289, 2290, 2291, 2292, 2293, 2294, 2295, 2296, 2297, 2298, 2299, 2300, 2301, 2302, 2303, 2304, 2305, 2306, 2307, 2308, 2309, 2310, 2311, 2312, 2313, 2314, 2315, 2316, 2317, 2318, 2319, 2320, 2321, 2322, 2323, 2324, 2325, 2326, 2327, 2328, 2329, 2330, 2331, 2332, 2333, 2334, 2335, 2336, 2337, 2338, 2339, 2340, 2341, 2342, 2343, 2344, 2345, 2346, 2347, 2348, 2349, 2350, 2351, 2352, 2353, 2354, 2355, 2356, 2357, 2358, 2359, 2360, 2361, 2362, 2363, 2364, 2365, 2366, 2367, 2368, 2369, 2370, 2371, 2372, 2373, 2374, 2375, 2376, 2377, 2378, 2379, 2380, 2381, 2382, 2383, 2384, 2385, 2386, 2387, 2388, 2389, 2390, 2391, 2392, 2393, 2394, 2395, 2396, 2397, 2398, 2399, 2400, 2401, 2402, 2403, 2404, 2405, 2406, 2407, 2408, 2409, 2410, 2411, 2412, 2413, 2414, 2415, 2416, 2417, 2418, 2419, 2420, 2421, 2422, 2423, 2424, 2425, 2426, 2427, 2428, 2429, 2430, 2431, 2432, 2433, 2434, 2435, 2436, 2437, 2438, 2439, 2440, 2441, 2442, 2443, 2444, 2445, 2446, 2447, 2448, 2449, 2450, 2451, 2452, 2453, 2454, 2455, 2456, 2457, 2458, 2459, 2460, 2461, 2462, 2463, 2464, 2465, 2466, 2467, 2468, 2469, 2470, 2471, 2472, 2473, 2474, 2475, 2476, 2477, 2478, 2479, 2480, 2481, 2482, 2483, 2484, 2485, 2486, 2487, 2488, 2489, 2490, 2491, 2492, 2493, 2494, 2495, 2496, 2497, 2498, 2499, 2500, 2501, 2502, 2503, 2504, 2505, 2506, 2507, 2508, 2509, 2510, 2511, 2512, 2513, 2514, 2515, 2516, 2517, 2518, 2519, 2520, 2521, 2522, 2523, 2524, 2525, 2526, 2527, 2528, 2529, 2530, 2531, 2532, 2533, 2534, 2535, 2536, 2537, 2538, 2539, 2540, 2541, 2542, 2543, 2544, 2545, 2546, 2547, 2548, 2549, 2550, 2551, 2552, 2553, 2554, 2555, 2556, 2557, 2558, 2559, 2560, 2561, 2562, 2563, 2564, 2565, 2566, 2567, 2568, 2569, 2570, 2571, 2572, 2573, 2574, 2575, 2576, 2577, 2578, 2579, 2580, 2581, 2582, 2583, 2584, 2585, 2586, 2587, 2588, 2589, 2590, 2591, 2592, 2593, 2594, 2595, 2596, 2597, 2598, 2599, 2600, 2601, 2602, 2603, 2604, 2605, 2606, 2607, 2608, 2609, 2610, 2611, 2612, 2613, 2614, 2615, 2616, 2617, 2618, 2619, 2620, 2621, 2622, 2623, 2624, 2625, 2626, 2627, 2628, 2629, 2630, 2631, 2632, 2633, 2634, 2635, 2636, 2637, 2638, 2639, 2640, 2641, 2642, 2643, 2644, 2645, 2646, 2647, 2648, 2649, 2650, 2651, 2652, 2653, 2654, 2655, 2656, 2657, 2658, 2659, 2660, 2661, 2662, 2663, 2664, 2665, 2666, 2667, 2668, 2669, 2670, 2671, 2672, 2673, 2674, 2675, 2676, 2677, 2678, 2679, 26

32

2004年12月

विद्यया ऽमृतमश्नुते विदुः

**Abstract**

**Abstract**

食性



Copyright © 2004 John Wiley & Sons, Ltd.

**Keywords:** *Self-esteem, self-esteem threat, self-esteem threat effects, self-esteem threat effects on self-esteem, self-esteem threat effects on self-esteem, self-esteem threat effects on self-esteem*

### References

130000

**References**

作、作、作

5-24-2014

**Keywords:** child sexual abuse; disclosure; social support

**References**

### Reference Range

以上各節

**Abstract**

6.24

25-474

**Training**

## Results

### Reference Fringe

00000000

2000年12月15日

156844

11-12

**TABLE 1**

— END OF THE REPORT —

**Dr. Ratna Sengupta Medin**



### Pathologist & Microbiologist

Visit: [www.hghospital.com](http://www.hghospital.com)

**DEPARTMENT OF PATHOLOGY**  
(INVESTIGATION REPORTS)  
Department of Pathology

Patient Name: Mr. MUKTA RAM MONDAL  
Reg No: 138306  
Age/Sex: 71 Years 8 Months 15 Days / Male  
Ref. Doctor: Dr. BINITA MONDAL  
Type: OPD

Collection Dt & Tm: 23/01/2022 09:25:53 AM  
Uploading Dt & Tm: 23/01/2022 11:12:13 AM  
Printing Dt & Tm: 23/01/2022 11:27:30 AM  
Lab No: 9126

| Haemoglobin (Hb) |                 |       |                       |  |
|------------------|-----------------|-------|-----------------------|--|
| Result           | Reference Range | Unit  | Method                |  |
| 6.5 L            | Male: 13.0-17.0 | gm/dL | (3 Part Cell Counter) |  |

\*\*\*\*\* END OF THE REPORT \*\*\*\*\*

*[Signature]*



CHRISTIAN MEDICAL COLLEGE  
VELLORE - 6  
NEPHROLOGY UNIT II

MEDICAL REPORT

Consultant  
DR. SANTOSH V. KILKINSE  
MD, DM, FRCP  
DR. ANNA I. VALIYON MD, DM,  
DR. ELLENKAL ELIAS PAND  
MD, DM, DMSc,  
DR. RUTH KAREEM LAYEN MD, DM,  
Name: **UTTAM ROY**

Age: 55 Sex: Male  
Address: EASTWORLD BY LAKE 2  
W. 2 & ROAD  
RAVIGANDI MC KATHAMMAN WEST BENGAL

Prof. & Head

Professor

Associate Professor

Asst. Professor

EMER

7.35

URGENTLY REQUIRED - Please call at 98474 12110

Hospital Number

740004

Visit Date: 12/09/2020

Visiting Doctor

DIAGNOSIS: Type 2 diabetes

Systemic hypertension

Bilateral severe NPDR

Peripheral sensory neuropathy

IHD - status post PTCA to LAD in 2017

Probable diabetic nephropathy

HISTORY

July 2020: Creat 2.5 mg/dL, 3.5 g proteinuria, K 4.7 mg/dL. Good dynamic and HT control.

Presenting Complaints:

Diabetic for 15 years. End organ damage in the form of retinopathy and neuropathy. Progression of 12 glycaemic measurements in 2017 at last follow up in Clinic. Progressive increase in creatinine over the last 1 year - 1.7 in Jan 2020, 2 in October 2020, 2.2 in Nov 2020.

No tightness of chest with exertion, and muscle cramps.

ON EXAMINATION

Physical Exam:

Height 159 cm

Weight 58.5 kg

BP 124/73 mm Hg

HR 80 C/O - normal

INVESTIGATIONS

12/12/2020 CBC PROFILE

HEAB, LYAB, WBC, EOB, EAB

|           |      |        |           |
|-----------|------|--------|-----------|
| WBC       | 34.8 | IL     | 80-100    |
| WCH       | 28.9 | DG     | 25-34     |
| WCHC      | 33.0 | %      | 31.4-36.3 |
| RDW       | 15.1 | %      | 11.5-14.5 |
| TOTAL WBC | 8200 | ICUMIA |           |

12/12/2020

Visit Taken on

12/09/2020 09:56

19861G

Issued by the Nephro

|                                               |        |         |           |
|-----------------------------------------------|--------|---------|-----------|
| Hb                                            | 9.2    | g/dL    | M 13-17;F |
| PLATELET COUNT                                | 140000 | /CUMM   |           |
| RBC                                           | 3.20   | MM/cumm | M         |
| HCT(PCV)                                      | 27.8   | %       | M 40-50;F |
| RETICS                                        |        | %       | 0.5-2.5   |
| 07/2021 UREA                                  | 62     | mg%     | 13-43     |
| 07/2021 CREATININE                            | 2.83 R | mg%     | 0.5-1.4   |
| 07/2021 GLUCOSE FASTING                       | 131    | mg/dL   | 70-99     |
| 07/2021 GLUCOSE 2HRS POST FOOD                | 130    | mg/dL   | <140      |
| 07/2021 TSH                                   | 2.364  | µIU/ml  | 0.3-4.5   |
| 07/2021 SERUM ELECTROLYTES                    |        |         |           |
| SODIUM                                        | 140    | m mol/L | 135-145   |
| POTASSIUM                                     | 4.7    | m mol/L | 3.5-5.0   |
| BICARBONATE                                   | 21     | m mol/L | 22-29     |
| 07/2021 CALCIUM AND PHOSPHATE                 |        |         |           |
| CALCIUM                                       | 9.09   | mg%     | 8.3-10.4  |
| PHOSPHORUS                                    | 4.7    | mg%     | 2.5-4.6   |
| 07/2021 LIPID PROFILE - FASTING               |        |         |           |
| CHOLESTROL - TOTAL                            | 124    | mg%     | < 200     |
| TRIGLYCERIDE SERUM                            | 79     | mg%     | <150      |
| CHOLESTROL - HDL                              | 52     | mg%     | 40-60     |
| CHOLESTROL - LDL                              | 59     | mg%     | <100      |
| 07/2021 HBA1 C (GLYCOSYLATED Hb)              | 5.9    | %       | <5.7      |
| 07/2021 URINE (24 HOURS) PROTEIN & CREATININE |        |         |           |
| URN PROT 24H                                  | 3592   | mg      |           |
| URN VOL 24H                                   | 4380   | ml      |           |
| URN CREAT 24H                                 | 718    | mg      |           |
| URN VOL 24H                                   | 4380   | ml      |           |
| RATIO                                         | 5.000  |         |           |

## COMMENDATIONS

Ecosprin AV 75/20 once daily  
Sodium bicarbonate 1g thrice daily  
Repaglinide 1 mg twice daily  
Revelol AM 25/5 once daily  
Jrimax D once daily at bedtime  
Rantac 300 mg once daily when required  
Dytol 5 mg once daily  
ol granules 60,000 units in a glass of milk once a month to continue  
ivogen once daily after lunch  
trapid 6-6-6  
rbepoietin 40 mcg s.c once a month (target Hb 11 g/dL)

at 6 months

## PATIENTS INSTRUCTION :

Patients are advised to periodically monitor blood sugars levels and adjust the medication under the supervision of their Physician. Blood sugars should be checked on an empty stomach (AC sugar) and 2 hours after breakfast (PC sugar) once every month. Patients are advised to note that glucometer reading are to be 15-20 mg% less than the simultaneous lab sugars. So the target values (in glucometer readings should be) will be fasting 80-100 mg% and postprandial 120-140 mg

Target levels are AC <120 mg% and 2 hour PC <180 mg%, on each occasion.  
HbA1-C levels should be monitored once in 3 months. HbA1-C level <7% indicates

Taken on :

02-Nov-2021 09:50

61G

certified by the NABH



CHRISTIAN MEDICAL COLLEGE  
VELLORE - 4  
DEPT. OF ENDOCRINOLOGY, DIABETES & METABOLISM

MEDICAL REPORT

**Consultants**

Dr. NIHAL JACOB THOMAS Prof & HOD  
MD, DNB(Endo), MNAMS(Endo), FRACP(Endo)  
FRCP[Edin], FRCP[Glasg], FRCP[London]  
FACP, PhD(Copenhagen)

Reg.No:43983

Email endocrine@cmevellore.ac.in  
Tel (0416)2282528 / 2282491

Dr. THOMAS V PAUL Prof. & HOD  
MD, DNB(Endo), PhD(Endo)

Reg.No:46073

Dr. ASHA H.S. Professor  
DNB(Gen.Med), DNB(Endo) FRCP[Edin]

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Dr. NITIN KAPOOR Professor  
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(Endo), PhD(Melbourne)

Reg.No:94556

Dr. FELIX JEBASINGH K Associate  
Professor

Reg.No: 78778

MD, DM(Endo), DNB(Endo) PGDMLE(Med.Law)

Dr. AARON CHAPLA  
MSc(Bio-Chem), PhD(Endo)

Scientist Faculty

Dr. KRIPA ELIZABETH CHERIAN Assoc.  
Professor, MD, DM[Endo], DNB(Endo)

Reg.No:112739

**Name : UTTAM ROY**

**Age : 55**

**Sex : Male**

**Address : SASTIGORIA BY LANE 2  
N.S.B.ROAR**

**Hospital Number 769861G**

**Visit Date : 19-Jul-2021**

**RANIGANJ MC BARDHAMAN WEST BENGAL**

**AGNOSIS : TYPE 2 DIABETES MELLITUS [2000]**

**Pincode : 713347**

**HYPERTENSION**

**PERIPHERAL NEUROPATHY**

**ALBUMINURIA**

**WITH CHRONIC KIDNEY DISEASE STAGE 4 [eGFR 23.98 ml/min CK  
EPI]**

**BILATERAL SEVERE NONPROLIFERATIVE DIABETIC RETINOPATHY**

**CORONARY ARTERY DISEASE - AWWMI - POST PTCA JULY 2017**

**ANEMIA OF CHRONIC DISEASE**

**VITAMIN D DEFICIENCY**

**ISTORY**

**UTTAM ROY [CMCH No.:769861G] was seen in Endocrinology OPD.**

**2 DIABETES MELLITUS ~ 2000**  
**nsulin from Dec 2021**

**RTENSION**

**Taken on :**

**361G**

**ited by the NABH**

13-Oct-2021 08:29

PERIPHERAL NEUROPATHY  
ALBUMINURIA - 4.66GM/DAY (2020 Dec) WITH CHRONIC KIDNEY DISEASE STAGE 4 (eGFR 23.90  
ml/min CKD EPI)  
BILATERAL SEVERE NONPROLIFERATIVE DIABETIC RETINOPATHY 2017  
on F/up with ophthalmologist at home town.  
CORONARY ARTERY DISEASE - ANMI - POST PTCA JULY 2017  
NO HISTORY OF CVD / PAD  
ANEMIA OF CHRONIC DISEASE

Currently on

Ins. ACTRAPID

6 units s/c 20 min before breakfast,  
6 units s/c 20 min before LUNCH  
6 units s/c 20 min before dinner

Tab. Revolol AM 25/8mg once daily

Tab. Dytor 5mg once daily

Tab. Grimax D 1 once daily

Tab. Ecosprin AV 75/10mg once daily

Tab. Sodium bicarbonate 1gm thrice daily

Has been taking ayurvedic powder for constipation - 6 months. Took homeopathic  
medications for constipation and fever x 2 months ago.

Exercising- 30 min/day

Regular with diet modification.

No history of UTI, renal calculi, NSAID use

### EXAMINATION

Height: 160 cms. Weight: 59 kgs.  
Ideal body weight: 57.0 kgs.  
BMI : 23.3 kg/m<sup>2</sup>.

No pallor / oedema.

No thyroid enlargement.

Pulse: 78/min. B.P: 130/80 mmHg.

Carotid Bruit : -

Distal pulses: ++

CVS : S1S2 normal. No murmurs.

RESP: Normal vesicular breath sounds.

ABD: Soft, no organomegaly.

CNS:

Ankle jerk : +

Feet:

Hair loss & dry skin: Present

Monofilament: 2 gms.

Vibration sense: ++

### INVESTIGATIONS

|            |                          |        |        |         |
|------------|--------------------------|--------|--------|---------|
| 19/07/2021 | GLUCOSE 2HRS POST FOOD   | 130    | mg/dl  | <140    |
| 19/07/2021 | HBA1 C (GLYCOSYLATED Hb) | 5.9    | %      | <5.7    |
| 19/07/2021 | UREA                     | 62     | mg%    | 13-43   |
| 19/07/2021 | CREATININE               | 2.83 R | mg%    | 0.5-1.4 |
| 19/07/2021 | TSH                      | 2.364  | uIU/ml | 0.3-4.5 |

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|                 |                                |        |         |           |
|-----------------|--------------------------------|--------|---------|-----------|
| 04/01/2021      | SERUM ELECTROLYTES             |        |         |           |
|                 | SODIUM                         | 140    |         |           |
|                 | POTASSIUM                      | 4.7    |         |           |
| 10/7/2021       | BICARBONATE                    | 21     | m mol/L | 138-148   |
|                 | CALCIUM AND PHOSPHATE          | 21     | m mol/L | 2.5-5.0   |
|                 | CALCIUM                        | 9.09   | m mol/L | 22-29     |
| 07/2021         | PHOSPHORUS                     | 4.7    | mg/dL   | 3.3-10.4  |
|                 | LIPID PROFILE - FASTING        | 124    | mg/dL   | 2.3-4.8   |
|                 | CHOLESTROL - TOTAL             | 79     | mg/dL   | < 200     |
|                 | TRIGLYCERIDE SERUM             | 52     | mg/dL   | < 150     |
| 07/2021         | CHOLESTROL - HDL               | 59     | mg/dL   | 40-60     |
| 07/2021         | CHOLESTROL - LDL               | 131    | mg/dL   | < 100     |
|                 | GLUCOSE FASTING                | 84.8   | mg/dL   | 70-99     |
|                 | CBC PROFILE                    | 28.0   | fL      | 80-100    |
|                 | NE:46, LY:40, MO:9, SO:6, BA:0 | 33.0   | PG      | 26-34     |
|                 | MCV                            | 15.1   | f       | 31.4-36.3 |
|                 | MCH                            | 8200   | /CUMM   | 11.5-14.9 |
|                 | MCHC                           | 3.2    | g/dL    | M 13-17/F |
| 00-12,000       | PLATELET COUNT                 | 149000 | /CUMM   |           |
| 15              | RBC                            | 3.28   | MM/cumm | M         |
| 0,000-4,50,000  | HCT(PCV)                       | 27.8   |         | M 40-50/F |
| 1.5-5.5 3.8-5.2 | RETICS                         |        |         | 0.5-2.5   |

### COMMENDATIONS

1400K calorie low fat, low cholesterol Diabetic diet.

Walking / exercise for half an hour daily.

#### Ins. ACTRAPID

- 6 units s/c 20 min before breakfast,
- 6 units s/c 20 min before LUNCH
- 6 units s/c 20 min before dinner

Insulin dosage has to be adjusted according to the blood sugar values. Patient has been educated regarding self monitoring of blood sugars and was advised to check 4 blood sugar monitoring (fasting, 2 hour post breakfast, 2 hour post lunch and 2 hour post dinner) atleast 6 times per week and to keep AC <110mg% and PC <140mg%.

#### Stop Metformin

Calcitriol 60,000 units once a month until review

Continue other medications as advised by NEPHROLOGY/ CARDIOLOGY

Periodically monitor blood sugars and follow up with your family Physician.

To come back for review after 6 MONTHS.

TO BRING GLUCOMETER AND DIARY DURING NEXT VISIT FOR VERIFICATION

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# DIABETES INSTRUCTIONS :

Patients on oral hypoglycemic agents should periodically check their blood sugar on an empty stomach and two hours after their meals. Patients on insulin should check a four point profile with their glucometer and maintain a record of their readings.

For patients checking their blood sugars in the laboratory, target levels are fasting blood sugar (AC) <110 mg/dl and 2 hour postprandial sugars (PC) <180 mg/dl. Glucometer readings are likely to be 15-20 mg/dl less than the lab sugars. So the target values for patients using a glucometer will be fasting (AC) 90-100 mg/dl and postprandial (PC) 100-140 mg/dl. These targets will be different for patients with renal failure, liver disease and older patients.

Target blood sugars levels during pregnancy are fasting plasma glucose (AC) <90 mg/dl and 2 hour post prandial sugar (PC) <140 mg/dl.

HbA1-C levels should be monitored once in 3 months. HbA1-C level <6.5% indicates excellent control of diabetes.

Lipid profile should be monitored once in 6 months

Urine microalbumin should be monitored once a year (normal <30 mg / gram creatinine)

Serum creatinine if <1.2 mg/dl should be repeated once a year and if >1.3 mg/dl should be repeated once every 3 months.

You should have a yearly eye check up.

In case you develop fever / chest pain / breathing difficulty / frequent hypoglycemia / persistently high blood sugars please contact your family Physician immediately.

## STAFF DETAILS

### CONSULTANTS:

Dr. Nihal Thomas, MD, DNB(Endo), MNAMS, FRACP(Endo), FRCP[Edin], FRCP[Glasg], FRCP[London], FACP, PhD[Copenhagen] - Professor & Head of Unit 1  
Dr. Thomas V Paul, MD, DNB(Endo), PhD(Endo) - Professor & Head of Department  
Dr. Asha H.S., DNB(Gen.Med), DNB(Endo), FRCP [Edin] - Professor  
Dr. Nitin Kapoor, MD, F.Endo, DM (Endo) - Associate Professor  
Dr. Felix Jebasingh, MD, DM(Endo), DNB(Endo), PGDMLE (Med.Law) - Associate Professor  
Dr. Kripa Elizabeth Cherian, MD, DM(Endo), DNB(Endo) - Assistant Professor

### SCIENTIST FACULTY:

Dr. Aaron Chapla, MSc (Bio-Chem), PhD(Endo)

### REGISTRARS:

Dr. Jinson Paul, MD  
Dr. Remya Rajan, MD  
Dr. Soumya S.L, MD  
Dr. Lijesh, MD  
Dr. Kelita George, MBBS  
Dr. Johns T. Johnson, MD  
Dr. Krishna Prabha, MD  
Dr. N.Venkata Sandeep, MD  
Dr. Pragya Gupta, MD

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Dr. J. J. Kurian, MBBS  
Dr. Jeffin C Abraham, MBBS  
Dr. Grace Maadhuri John, MD

NON-MEDICAL RESEARCH OFFICER:  
Dr. Shajith Anoop, M.Phil, Ph.D

MOLECULAR LABORATORY RESEARCH OFFICERS:  
Mrs. Deny Varghese, MSc (Bio-Tech)  
Mr. Parthiban.R, MSc (Micro)  
Ms. Lavanya.R, MSc (Biomedical Genetics)  
Mr. Jabasteen J, MSc (Biomedical Genetics)

DIETICIAN: Mrs. Sandhya, M.Sc (DESM)

DIABETES EDUCATORS: Mrs. Vijayalakshmi, BSc / Mrs. Mercy Inbakumari, BSc / Mrs. Bharathi, BSc / Mrs. Ruth Volina, BSc / Ms. Elory Christina BSc / Mrs. Nithya, BSc / Ms. Shirley Jennifer, BSc / Ms. Ilakkiya, RN / Ms. P. Hephzi Anbu Grace, BSc / Ms. Purba Mukherjee, RN / Ms. Sweetha, RN / Ms. Sumathy, BSc / Ms. Poornima, RN

SECRETARIES: Mrs. Anuradha Eswaran, B.Com / Mrs. Vanitha, BSc / Ms. Banu, B.Com / Mrs. Nirmala, B.A / Mrs. Jayalakshmi, BSc, B.Ed / Mr. Vinod, B.Com, MBA [HM]

CLINICAL ASSISTANT: Ms Latha, BSc.

SOCIAL WORKERS: Mr. Ramesh, MSW / Mr. Sathish Kumar, MSW

ADMINISTRATIVE ASSISTANT: Mr. Mohan, MBA (HM), PGDHA

DEXA TECHNICIANS: Mr. Kali, MSW, M.Phil / Mr. Thanikachalam, BSc / Mrs. Sudha, BSc

PHARMACISTS:  
Mrs. Kavitha B.Pharm

HOSPITAL ATTENDANTS: Mr. Thangadurai / Mrs. Elizabeth / Mr. Manivannan

SECURITY: Mr. Venkatesan

#### OUT-PATIENT CLINICS:

|                                 |                                                           |
|---------------------------------|-----------------------------------------------------------|
| Endocrinology OPD               | 8.00AM - 5.00PM (Monday & Thursday)                       |
| Hypothalamic Pituitary Clinic   | 2.00PM - 5.00PM (Monday & Thursday)                       |
| Osteoporosis & Metabolic Clinic | 2.00PM - 5.00PM (Monday & Thursday)                       |
| Thyroid Clinic                  | 2.00PM - 5.00PM (Monday & Thursday)                       |
| Renal - Endo Clinic             | 2.00PM - 5.00PM (Wednesday)                               |
| Geriatric Clinic                | 8.00 AM - 2.00 PM (Saturday)                              |
| Joint procedures                | 2.30PM - 4.30PM (Monday, Wednesday, Thursday & Saturday)  |
| Integrated Foot Clinic          | 1.00PM - 2.30PM (Tuesday) [with PMR and Vascular Surgery] |
| High Risk Eye Clinic            | 2.30PM - 4.30PM (Wednesday) [with Ophthalmology]          |
| Endo - Diabetic Clinic          | 9.00AM - 2.00PM (Wednesdays & Saturdays)                  |

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Maternal & Gestational Diabetes Clinic  
Diabetes Association 9.00AM - 1.00PM (Wednesdays)  
9.30AM - 4.00PM (Monday to Saturday)

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mail:[emeds@cmcvellore.ac.in](mailto:emeds@cmcvellore.ac.in)

Medical Report compiled and prepared by :Mrs. Anuradha Eswaran / 28.12.20.

Dr. ASHA H.S. (Reg: No:S1663)

Professor DNB(Gen.Med),DNB(Endo)FRCP[Edin]

DEPT. OF ENDOCRINOLOGY,DIABETES & METABOLISM

In case of any emergency review in the Accident and Emergency department.(ENDOCRINE ON CALL 8300205075/8300205076)  
In Vellore kindly contact by mail/email ([endocrine@cmcvellore.ac.in](mailto:endocrine@cmcvellore.ac.in)).

**Patient's Details**

UHID : Mr. JOY NETAI NANDI  
 I.P.No./Bill No. : AC01,0004960728  
 DRN : CHMOPP9039424  
 Referring Doctor : 323029028  
 : NARASIMHAN R - RES.MED

**DEPARTMENT OF RADIOLOGY**

AH-QF-RD-04

Ward/Bed No. : OP  
 Received on : 15-Mar-2023  
 Reported On : 16-Mar-2023

| M | 67 Years

**Report:**

**CT SCAN CHEST PLAIN**

Mild focal fibrosis seen involving right apical segment.

There is no endobronchial or endotracheal mass lesion. No lymph node enlargement is seen involving the supraclavicular, axillary, hilar and mediastinal region. There is no pleural or pericardial effusion.

The heart is within normal limits. The pulmonary vessels, aorta and its major branches are normal. The thyroid and the visualised portion of the neck are unremarkable in appearance.

Degenerative changes seen in the visualised spine. Hypodense lesion seen involving segment VIII of liver -- likely hepatic Cyst.

**Impression:**

Mild focal fibrosis seen involving right apical segment may be post infective sequelae.

Please note that this report is a radiological professional opinion. It has to be correlated clinically and interpreted along with other investigations.

---END OF THE REPORT---

*J. Sathya*

Dr. Sathya Ramamurthy MBBS, MRCPCH, FRCP, CCT(UK)  
 Consultant Radiologist,  
 Apollo Teleradiology Reading Centre,  
 Apollo Institute of Interventional Radiology.

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|     |          |            |                      |
|-----|----------|------------|----------------------|
| AGE | 68 YEARS | REF BY     | DR. SUBHAS MUKHERJEE |
| SEX | MALE     | PATIENT ID | 23G17/003            |
|     |          | DATE       | July 17, 2023        |

**USG OF :- WHOLE ABDOMEN**

**Liver** is enlarged in size, showing mild and diffusely raised echogenicity. A simple cyst measuring 3.6 cm X 3.5 cm is seen in the right lobe of liver. IHBRs, portal vein (1.2 cm. in diameter) and hepatic veins are normal in calibre.

**Gallbladder** is normally distended. Wall thickness is normal. Few comet tail artifacts are arising from the wall ---- suggesting cholesterosis. The lumen shows clear fluid. No focal mass lesion or calculus formation is noted. Pericholecystic fluid appears normal.

**Common Bile Duct** is not dilated (0.37 cm in diameter). Visualized lumen is clear.

**Pancreas** is normal in size, shape and position. **Pancreatic parenchyma echogenicity is raised, i.e. steatotic in appearance.** There is no evidence of any mass or peri-pancreatic collection. Main pancreatic duct is not dilated.

**Spleen** is normal (Splenic span is 9.7 cm). in size. Parenchymal echotexture is normal and no focal mass is seen. Splenic vein is not dilated. No collateral formation is obvious.

**Right kidney** is normal in size, shape and position. The corticomedullary differentiation is maintained. No calculus formation or hydronephrotic changes is seen. **One simple cortical cyst measuring 1.4 cm X 1.4 cm is noted at upper pole of right kidney.** kidney measures 9.8 cm. in length.

**Left kidney** is normal in size, shape and position. The corticomedullary differentiation is maintained. No focal mass lesion, calculus or hydronephrotic change is seen. kidney measures 10.0 cm. in length.

Both the **ureters** are not dilated.

**Urinary bladder** is normally distended. Wall thickness is normal. No focal mass or calculus formation is seen.

**Prostate** (16.3 ml. in volume) is of normal size, shape and echotexture.

**IMPRESSION :-** Sonography of whole abdomen reveals -----

1. *Hepatomegaly with Grade I fatty change in liver.*
2. *Steatotic pancreas.*
3. *Cholesterosis of gallbladder.*

  
**DR. A. K. SAHA**  
 MBBS (CAL) DMRD  
 Senior Consultant  
 Regd. No. - 4626

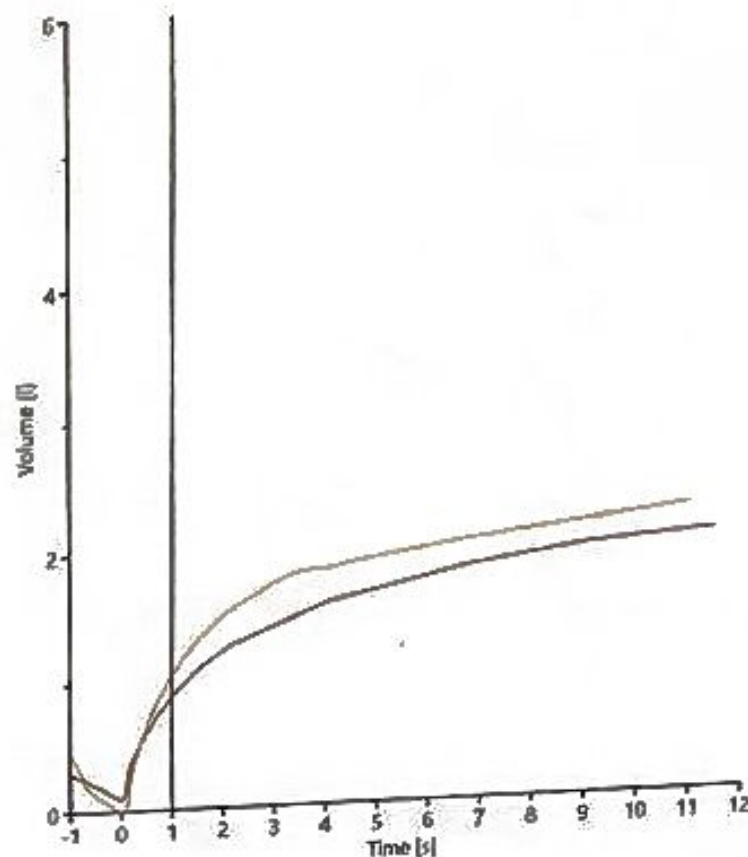
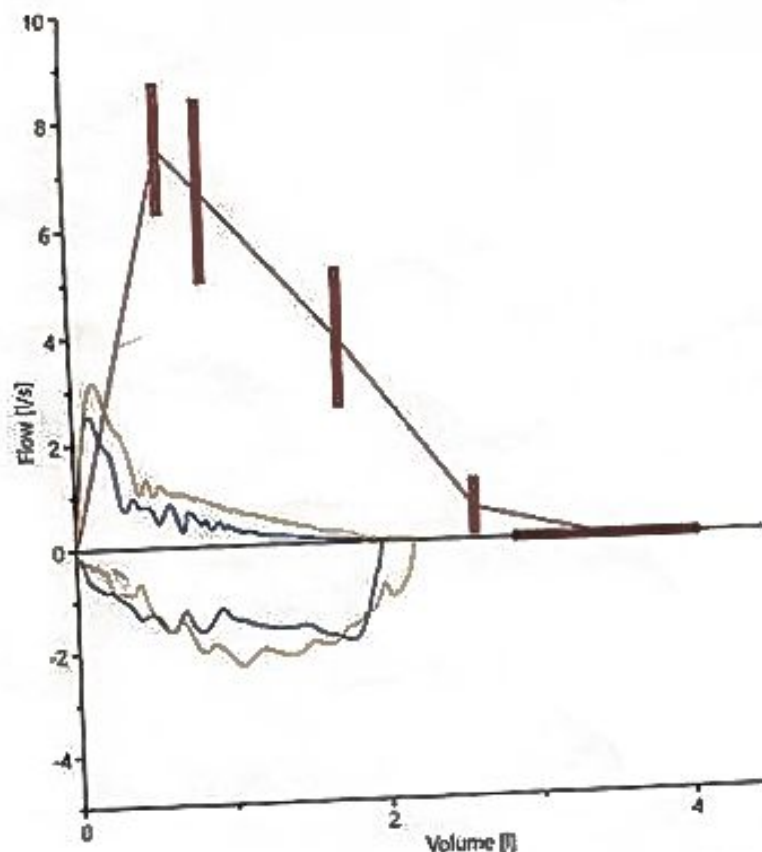
SPECIALITY CLINIC, CT SCAN (16 SLICE), DIGITAL X-RAY, COLOUR DOPPLER ECHO, USG, MAMMOGRAPHY, ECG, THERMOCOAGULATION, LASER SURGERY, ENDOSCOPY, COLONOSCOPY, HEMATOLOGY, CHEMISTRY, RADIOLOGY, HEALTH CHECK-UP (Cardiac, Musculoskeletal, etc.)

# Pulmonology Department

Last name Nandi  
First name Joy Netai  
Date of birth 27-05-1955  
Patient Id 4960728

Age 68 years  
Height 167.0 cm  
Weight 72.0 kg  
Gender male

Physician Dr.S.Moitra  
Technician Trayee Deb  
Smoker NO  
Ward OPD



|          |       | Pred  | Pre   | Pre % Pred | Post  | % Pred | LLN   | % Change |
|----------|-------|-------|-------|------------|-------|--------|-------|----------|
| FEV 1    | [L]   | 2.67  | 0.85  | 32 %       | 1.12  | 42 %   | 1.93  | 31 %     |
| FVC      | [L]   | 3.42  | 1.90  | 56 %       | 2.20  | 64 %   | 2.60  | 16 %     |
| FEV1%FVC | [%]   | 77.86 | 44.91 | 58 %       | 50.85 | 65 %   | 65.67 | 13 %     |
| MEF 25   | [L/s] | 0.60  | 0.13  | 22 %       | 0.22  | 36 %   | 0.24  | 64 %     |
| MEF 50   | [L/s] | 3.87  | 0.35  | 9 %        | 0.60  | 16 %   | 1.71  | 71 %     |
| MEF 75   | [L/s] | 6.68  | 0.78  | 12 %       | 1.19  | 18 %   | 3.87  | 53 %     |
| PEF      | [L/s] | 7.48  | 2.55  | 34 %       | 3.15  | 42 %   | 5.50  | 24 %     |
| MMEF     | [L/s] | 2.17  | 0.30  | 14 %       | 0.51  | 24 %   | 0.96  | 73 %     |

## Interpretation

Date:31.7.23

Severe Obstructive Ventilation  
Pattern.  
Significant Bronchodilator  
Response

Dr.Saibal Moitra  
MBBS,MD,PHD,FCCP(USA)  
FICCI,DAA(CMC)  
FRCP(EDIN) Sr.Consultant

THE RESULTS RELATE ONLY TO THE ITEMS TESTED. PARTIAL REPRODUCTION OF THIS REPORT ITS NOT PERMIT



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|                  |                 |                    |         |            |   |
|------------------|-----------------|--------------------|---------|------------|---|
| Patient's Name   | MR. KAJAL HAZRA | Age                | 41 yrs. | Sex        | M |
| I.D. No. P-19654 | Referred by     | DR. ARUN AGARWALLA | Date    | 07.11.2024 |   |

**MRI OF LUMBO-SACRAL SPINE**

Sequences taken :  
Sagittal - T1, T2, GRE, STIR, Myelo  
Axial - T1, T2  
Coronal - T2, Obi, STIR, Myelo

**FINDINGS**

MRI of lumbo-sacral spine reveals loss of normal curvature with straightening of curvature.  
Schmorl's node noted at multiple lumbar vertebrae.

Inter-vertebral disc at L3 - L4 to L5 - S1 levels show disc dehydration with posterior central disc bulge with left posterior para central disc protrusion with extension at L4 - L5 disc level with compression of anterior thecal space.

Posterior aspect of L4 - L5 disc shows altered intensity hyperintense in T2 suggestive of radial tear.

Lateral recesses are compressed bilaterally at L3 - L4 to L5 - S1 levels with compressed neural foramen above level.

Visualized cord and conus appear normal.  
Neural arch elements appear normal.

Visualized pre/para vertebral soft tissue appear normal  
No ligamentum flavum or facet joint hypertrophy is seen.

AP diameter of spinal canal at different disc levels in mm are :-

D12 - L1 = 17,      L1 - L2 = 15,      L2 - L3 = 14,      L3 - L4 = 13,      L4 - L5 = 09,  
L5 - S1 = 10.

**Impression :**

MRI of L-S spine suggests degenerative disc disease affecting L3 - L4 to L5 - S1 level with secondary spinal canal stenosis at L4 - L5 level.

Suggested other investigations and clinical correlation.

**DR. S. GIRI**  
MD(Radio Diagnosis)  
Prof. Radiodiagnosis, (Reg.No-50857)

**PROF.M. GHOSH**  
MD(Radio Diagnosis)  
Prof. Radiodiagnosis, (Reg.No-53069)

**DR. A. MONDAL**  
MD (Radio Diag.)  
Asst. Prof. Radiodiagnosis

**CIN No. : U70101WB2005PTC105050**

Regd. Office : 516/348, Ward No.-14, Malancha Road, Post : Nimpura, Kharagpur, Dist.- Paschim Midnapore, Pin - 751005.  
Modern machine/procedure have its limitations. If there is a variance clinically, this examination may be repeated or re-evaluated by another experienced radiologist.

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Dr. Subhas Mukherjee  
(Practice in Integrated Medicine)



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Dist. Paschim Bardhaman (W.B.), Pin-713347.

Ph. 0341-2443298, Mob. 6296170664

spandanmg2010@gmail.com

PATIENT NAME : Mr. Kajal Hazra  
AGE : 42 YRS  
REF. PHY : Dr. Subhas Mukherjee, MD

SPR : 22884  
GENDER : Male  
EXAM DATE : 26.03.2025

Thank you for your kind referral.

### X - RAY REPORT OF L - S - SPINE AP/ LAT VIEW

Marginal osteophytes are seen in lumbar vertebrae S/O Early degenerative changes

Vertebral bodies appear normal in height.

Disc spaces appear normal.

Posterior elements appear normal.

Alignments of vertebra appear normal.

Both S. I. Joints are normal.

# RADIO CENTER

PATIENT NAME: ALFABETH ALFABETH  
AGE: 13 YEARS / SEX: FEMALE  
DOB: 10/10/10  
DATE: 10/10/10  
PHYSICIAN: DR. ALFABETH ALFABETH  
FACILITY: 10/10/10

## X-RAY LUMBAR SPINE AP & LAT (VIEWING)

L5-S1 disc space is reduced.

Few anterior osteophytes are noted in the lumbar vertebrae.

Above findings are suggestive of lumbar spondylosis.

Tiny radio-opaque shadow is noted in the pelvis on left side.  
diagnosis: Fecoliths / Calculus.

Few GB clips are noted.

Bodies of the vertebral bodies, laminae, pedicles, transverse processes appear normal.

Bodies of the lumbar vertebrae appear normal.

Intervertebral soft tissues appear normal.

## IMPRESSION:

1. L5-S1 disc space is reduced.
2. Few anterior osteophytes are noted in the lumbar vertebrae.  
Above findings are suggestive of lumbar spondylosis.
3. Tiny radio-opaque shadow noted in the pelvis on left side.  
differential diagnosis: Fecoliths / Calculus.

DR. ALFABETH ALFABETH  
CONSULTANT

|         |                 |        |                      |
|---------|-----------------|--------|----------------------|
| NAME    | MANASHI MONDAL  | DOCTOR | DR. SUBHAS MUKHERJEE |
| AGE/SEX | 42 YEARS/FEMALE | DATE   | October 22, 2024     |

## USG OF :- WHOLE ABDOMEN

Liver 16.3 cm, is enlarged in size with mild to moderately increased echogenicity. Well defined echogenic lesion measures 4.2 cm X 3.3 cm is seen in right lobe with internal calcification. IHBVs, portal vein and hepatic veins are normal in caliber. Gallbladder is not visualized (History of operation). Maximal Common Bile Duct is prominent with smooth tapering at distal end (Proximal part 0.79 cm and Distal part 0.46 cm in diameter). Lumen is clear. Pancreas is normal in size, shape and position. Pancreatic parenchymal echogenicity is normal. There is no evidence of focal mass or peri-pancreatic collection. Pancreatic duct is not dilated. Spleen 12.8 cm, is mildly enlarged in size. Parenchymal echotexture is normal and no focal mass is seen. Splenic vein is not dilated. No collateral formation is obvious. Right kidney 9.9 cm, is normal in size, shape and position. The corticomedullary differentiation is maintained. No focal mass lesion or calculus is seen. No hydronephrosis. Left kidney 11.3 cm, is normal in size, shape and position. The corticomedullary differentiation is maintained. One simple cortical cyst measure 2.6 cm X 2.5 cm is seen at lower inter-polar region. No calculus is seen. No hydronephrosis. Urinary bladder is normally distended. Wall thickness is normal. No focal mass lesion or calculus is seen. Uterus is bulky in size which is anteverted and is placed in midline. The myometrial echotexture is normal. No focal mass lesion is seen. Endometrial cavity is empty. Combined endometrial thickness is 0.8 cm. Cervix is bulky in size with few nabothian cysts; cervix measures 3.6 cm. Uterus measures : 5 cm X 5.9 cm X 5.4 cm. Both the ovaries are normal in size, shape and position showing normal ovarian parenchyma. No obvious focal mass lesion is seen on either side. Left Ovary measure : 2.8 cm X 1.6 cm. Right Ovary measure : 3.2 cm X 2.2 cm. No obvious free fluid is seen in the peritoneal cavity. No obvious mesenteric lymphnodes are seen. No mass or any collection is seen in right iliac fossa.

## IMPRESSION :-

1. Sonography of whole abdomen reveals
2. Hepatomegaly with grade I-II fatty change in liver.
3. Well defined echogenic lesion in right lobe of liver with internal calcification — Likely hemangioma.
4. Mild splenomegaly.
5. Bulky uterus.
6. Bulky cervix with few nabothian cysts within — Likely cervicitis.

DR. NITHIN P. M.  
DMRD. WBMC - 75246  
CONSULTANT RADIOLOGIST

**CHRISTIAN MEDICAL COLLEGE AND HOSPITAL**  
**DEPARTMENT OF CARDIOLOGY**  
**VELLORE - 632 004**  
**0415-2282317**

**PATIENT DEMOGRAPHICS**

|                 |                               |                   |             |
|-----------------|-------------------------------|-------------------|-------------|
| Last Name       | SABHAJIT YADAV                | Physician         |             |
| First Name      |                               | Scanned By        |             |
| Middle Initial  |                               | Reading Physician |             |
| ID Number       | 531535P                       | Test Date         | 14/11/2022  |
| Date Of Birth   |                               | Analysis Date     | 15/11/2022  |
| Sex             | M                             | Hookup Time       | 10:10 AM    |
| Source          |                               | Recording Time    | 23 hr 9 min |
| Billing Code    |                               | Analysis Time     | 23 hr 9 min |
| Recorder Format | Phillips Recorder: US21852397 | User Field #1     |             |
| Reason for Test |                               | User Field #2     |             |
| Medications     |                               |                   |             |

**Ventricular Ectopy**

|                   |                           |
|-------------------|---------------------------|
| Total VE Beats    | : 24362 (25.0%)           |
| Vent Runs         | : 178                     |
| Beats             | : 788                     |
| Longest           | : 10 Beats at 10:36:03 AM |
| Fastest           | : 182 BPM at 07:17:03 AM  |
| Triplets          | : 425 Events              |
| Couplets          | : 744 Events              |
| Single/Interp PVC | : 8454/1051               |
| R on T            | : 0                       |
| Single/Late VE's  | : 181/59                  |
| BI/Trigeminy      | : 10203/263 Beats         |

**Supraventricular Ectopy**

|                 |                          |
|-----------------|--------------------------|
| Total SVE Beats | : 4674 (4.8%)            |
| Atrial Runs     | : 7                      |
| Beats           | : 27                     |
| Longest         | : 6 Beats at 03:02:50 PM |
| Fastest         | : 154 BPM at 06:45:38 AM |
| Atrial Pairs    | : 332 Events             |
| Drop/Late       | : 0/0                    |
| Longest N-N     | : 1.8 sec at 01:58:31 AM |
| Single PAC's    | : 3759                   |
| BI/Trigeminy    | : 191/33 Beats           |

**Heart Rate Data**

|             |                          |
|-------------|--------------------------|
| Total Beats | : 97395                  |
| Min HR      | : 41 BPM at 05:37:03 AM  |
| Avg HR      | : 70 BPM                 |
| Max HR      | : 114 BPM at 07:18:21 AM |

**ST Episode Analysis**

|              | Ch1 | Ch2 | Ch3 |
|--------------|-----|-----|-----|
| Min ST Level | -   | -   | -   |
| Max ST Level | -   | -   | -   |
| ST Episodes  | -   | -   | -   |

**INTERPRETATION**

**BASALINE ECG : SINUS RHYTHM, VPC'S.**

**HOLTER STUDY : MULTIPLE EPISODES OF SLOW NSVT SEEN.**

**LONGEST : 10 Beats at 10:36:03 AM.**

**FASTEST : 182 BPM at 07:17:03 AM.**

**FREQUENT DIFFERENT MORPHOLOGY OF VPC'S SEEN (25%) IN THE FORM OF SINGLES, VENTRICULAR BIGEMINY, TRIGEMINY, COUPLETS, TRIPLETS & NSVT.**

**RBBB MORPHOLOGY WITH INFERIOR AXIS (PREDOMINANTLY)**

**FEW SHORT EPISODES OF ATRIAL RUN NOTED (SUDDEN ONSET & OFFSET)**

**LONGEST : 6 Beats at 03:02:50 PM.**

**FASTEST : 154 BPM at 06:45:38 AM.**

**OCCASIONAL PAC'S SEEN (4.8%).**

**NO SIGNIFICANT PAUSES NOTED.**

**PATIENT COMPLAINED OF LEFT SIDE PAIN AT 1:30PM WHICH HOLTER RECORDING SHOWS VENTRICULAR BIGEMINY.**

**SLEEP TIME : 9:30PM - 4:00AM.**

# SUPRAVENTRICULAR EVENTS

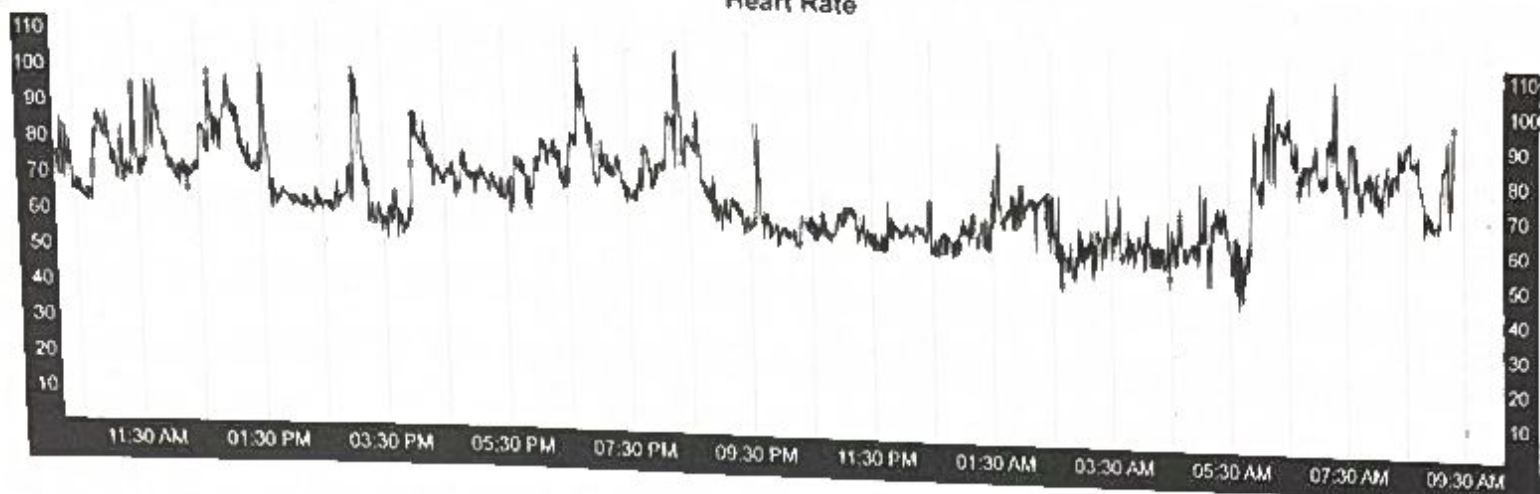
## Supraventricular Ectopic Profile

| Time Ending | HR Min | HR Avg | HR Max | SVE Total | NN Max | RR Max | Pairs | Bigem Beats | Trigem Beats | AFib Beats | AFib Duration | PAC Single | Drop Beats | Late Beats |
|-------------|--------|--------|--------|-----------|--------|--------|-------|-------------|--------------|------------|---------------|------------|------------|------------|
| Setting     |        |        |        |           |        |        |       | 2 Cycles    | 2 Cycles     | 65%        | 25 Beats      | 25%        | 2.0 sec    | 67%        |
| 11:00 AM    | 56     | 73     | 88     | 111       | 1.3    | 1.4    | 0     | 0           | 3            | 0          | 00:00         | 108        | 0          | 0          |
| 12:00 PM    | 60     | 78     | 97     | 57        | 1.3    | 1.4    | 1     | 0           | 0            | 0          | 00:00         | 55         | 0          | 0          |
| 01:00 PM    | 63     | 79     | 97     | 111       | 1.4    | 1.4    | 0     | 0           | 0            | 0          | 00:00         | 111        | 0          | 0          |
| 02:00 PM    | 59     | 75     | 103    | 86        | 1.3    | 1.4    | 0     | 0           | 0            | 0          | 00:00         | 86         | 0          | 0          |
| 03:00 PM    | 56     | 64     | 80     | 118       | 1.4    | 1.5    | 0     | 0           | 0            | 0          | 00:00         | 118        | 0          | 0          |
| 04:00 PM    | 48     | 67     | 108    | 76        | 1.4    | 1.5    | 0     | 0           | 0            | 0          | 00:00         | 70         | 0          | 0          |
| 05:00 PM    | 61     | 75     | 90     | 99        | 1.3    | 1.4    | 1     | 0           | 0            | 0          | 00:00         | 97         | 0          | 0          |
| 06:00 PM    | 59     | 70     | 83     | 97        | 1.3    | 1.4    | 1     | 0           | 0            | 0          | 00:00         | 95         | 0          | 0          |
| 07:00 PM    | 65     | 81     | 110    | 103       | 1.3    | 1.3    | 6     | 0           | 0            | 0          | 00:00         | 91         | 0          | 0          |
| 08:00 PM    | 59     | 73     | 83     | 99        | 1.3    | 1.4    | 2     | 0           | 3            | 0          | 00:00         | 92         | 0          | 0          |
| 09:00 PM    | 56     | 79     | 112    | 112       | 1.3    | 1.6    | 7     | 0           | 0            | 0          | 00:00         | 98         | 0          | 0          |
| 10:00 PM    | 51     | 62     | 96     | 50        | 1.4    | 1.6    | 0     | 0           | 0            | 0          | 00:00         | 50         | 0          | 0          |
| 11:00 PM    | 49     | 59     | 75     | 155       | 1.6    | 1.7    | 1     | 0           | 0            | 0          | 00:00         | 153        | 0          | 0          |
| 12:00 AM    | 50     | 60     | 75     | 144       | 1.5    | 1.7    | 2     | 0           | 0            | 0          | 00:00         | 140        | 0          | 0          |
| 01:00 AM    | 48     | 58     | 74     | 215       | 1.6    | 1.7    | 5     | 0           | 16           | 0          | 00:00         | 189        | 0          | 0          |
| 02:00 AM    | 53     | 65     | 92     | 122       | 1.8    | 1.8    | 9     | 0           | 0            | 0          | 00:00         | 104        | 0          | 0          |
| 03:00 AM    | 44     | 64     | 76     | 261       | 1.6    | 1.8    | 24    | 0           | 0            | 0          | 00:00         | 213        | 0          | 0          |
| 04:00 AM    | 44     | 59     | 77     | 217       | 1.7    | 1.8    | 10    | 0           | 0            | 0          | 00:00         | 197        | 0          | 0          |
| 05:00 AM    | 44     | 59     | 86     | 268       | 1.7    | 1.8    | 37    | 0           | 3            | 0          | 00:00         | 191        | 0          | 0          |
| 06:00 AM    | 41     | 64     | 92     | 511       | 1.7    | 1.8    | 101   | 7           | 0            | 0          | 00:00         | 297        | 0          | 0          |
| 07:00 AM    | 70     | 88     | 103    | 483       | 1.3    | 1.3    | 17    | 42          | 8            | 0          | 00:00         | 396        | 0          | 0          |
| 08:00 AM    | 70     | 82     | 114    | 565       | 1.8    | 1.6    | 71    | 40          | 0            | 0          | 00:00         | 373        | 0          | 0          |
| 09:00 AM    | 62     | 80     | 91     | 497       | 1.4    | 1.4    | 23    | 98          | 0            | 0          | 00:00         | 350        | 0          | 0          |
| 10:00 AM    | 59     | 78     | 85     | 117       | 1.3    | 1.4    | 14    | 4           | 0            | 0          | 00:00         | 85         | 0          | 0          |
| Total       | 41     | 70     | 114    | 4674      | 1.8    | 1.8    | 332   | 191         | 33           | 0          | 00:00         | 3759       | 0          | 0          |

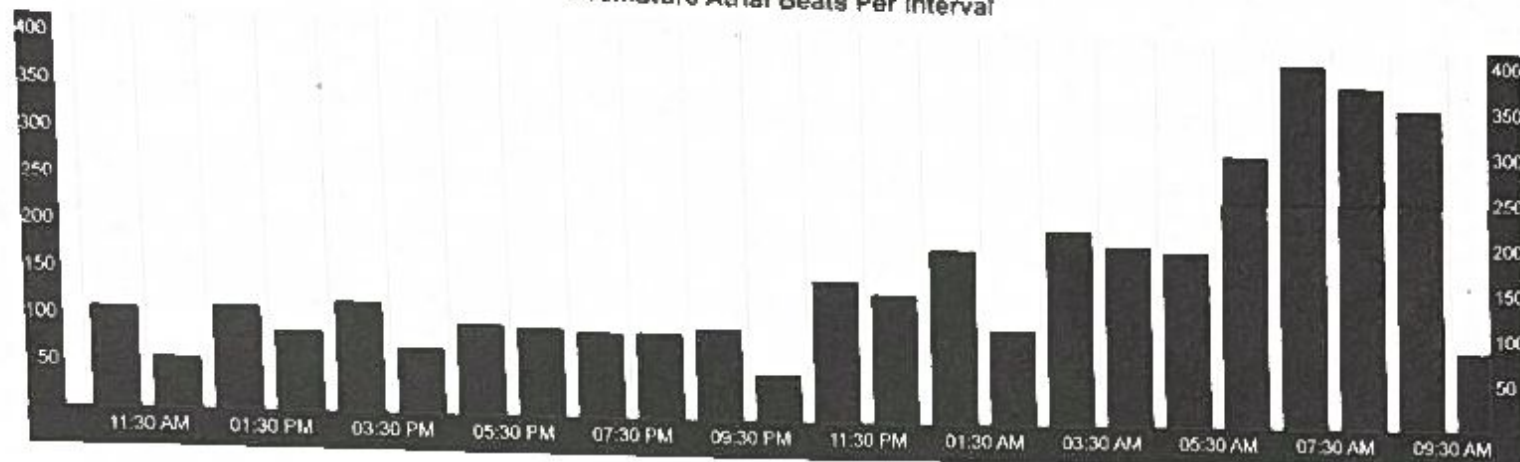
# SUPRAVENTRICULAR EVENTS

Special Event Graphics

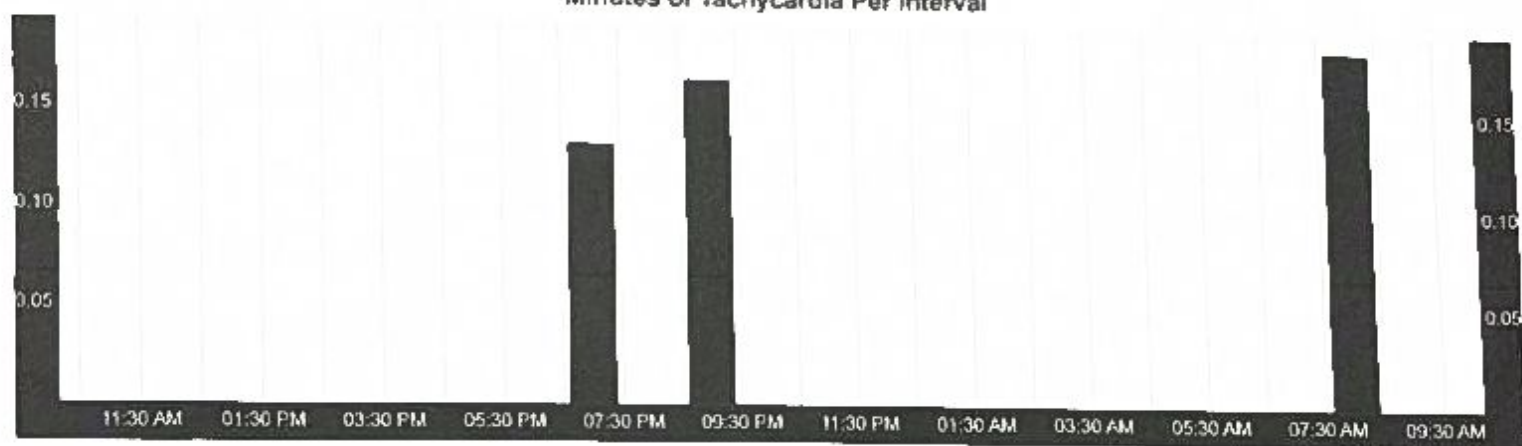
Heart Rate



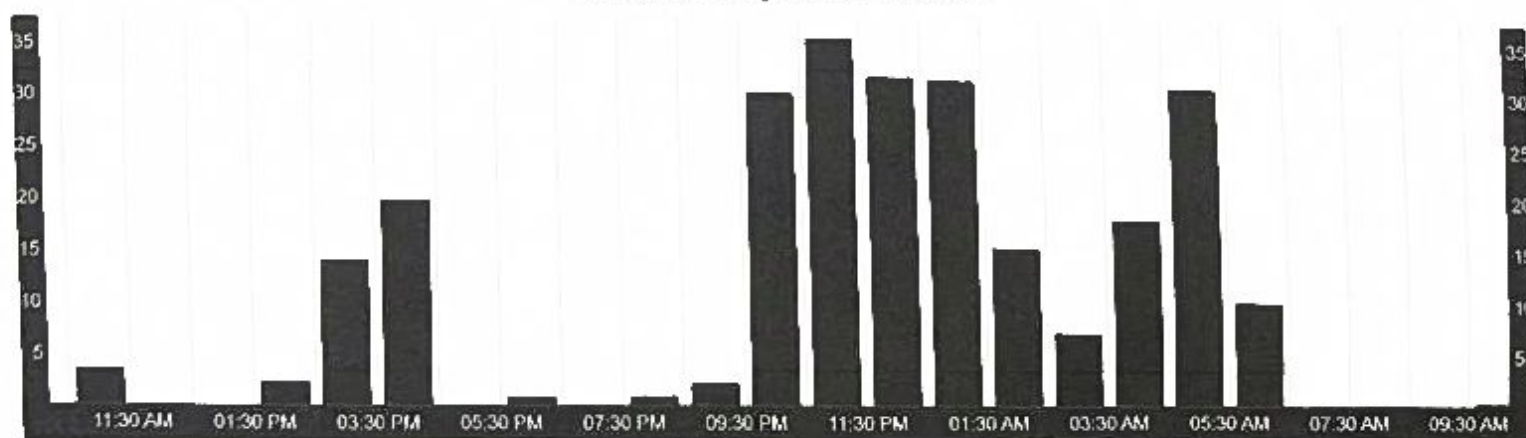
Premature Atrial Beats Per Interval



Minutes of Tachycardia Per Interval



Minutes of Bradycardia Per Interval



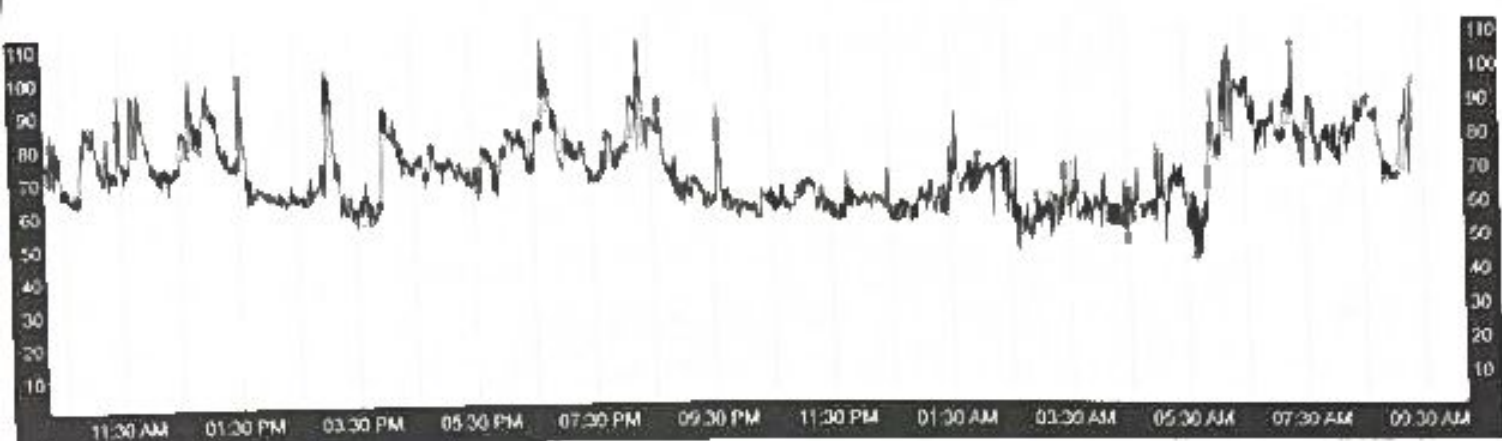
Serial # : 5960

SABHAJIT YADAV

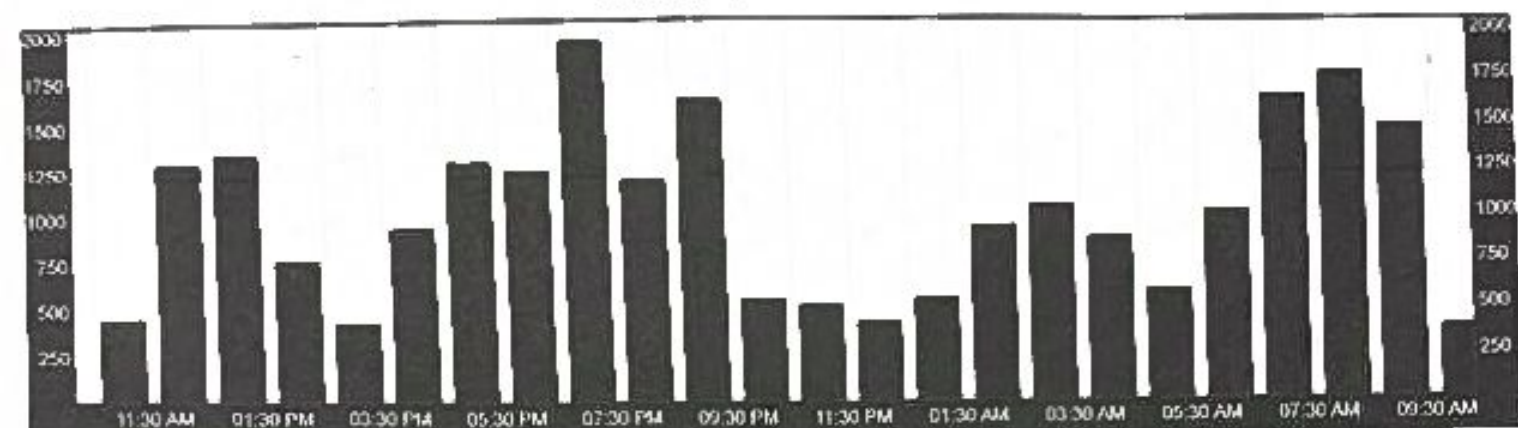
## VENTRICULAR EVENTS

Special Event Graphics

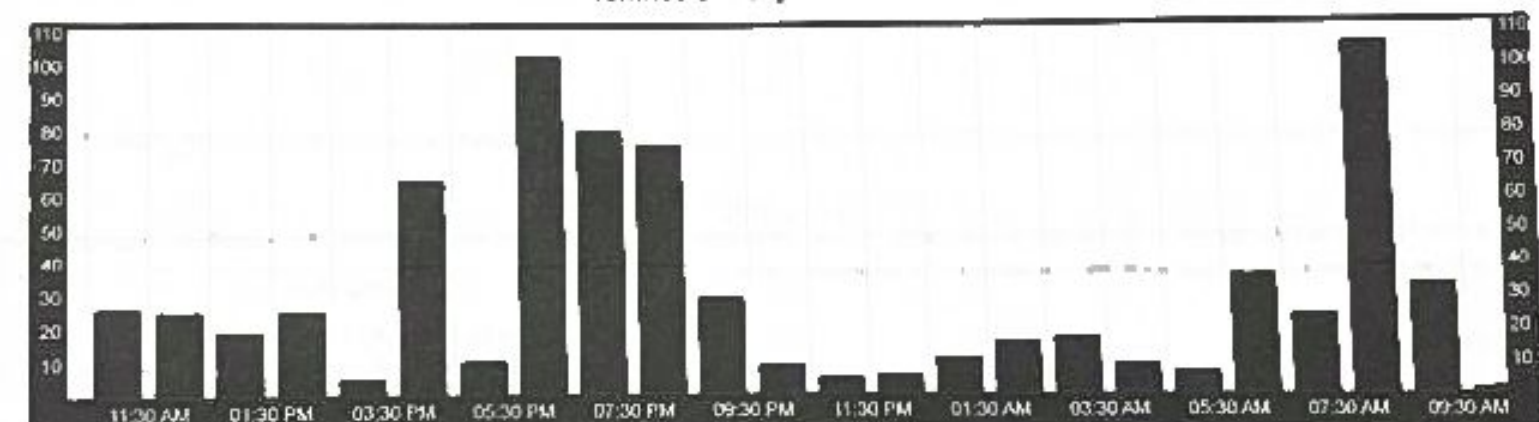
Heart Rate



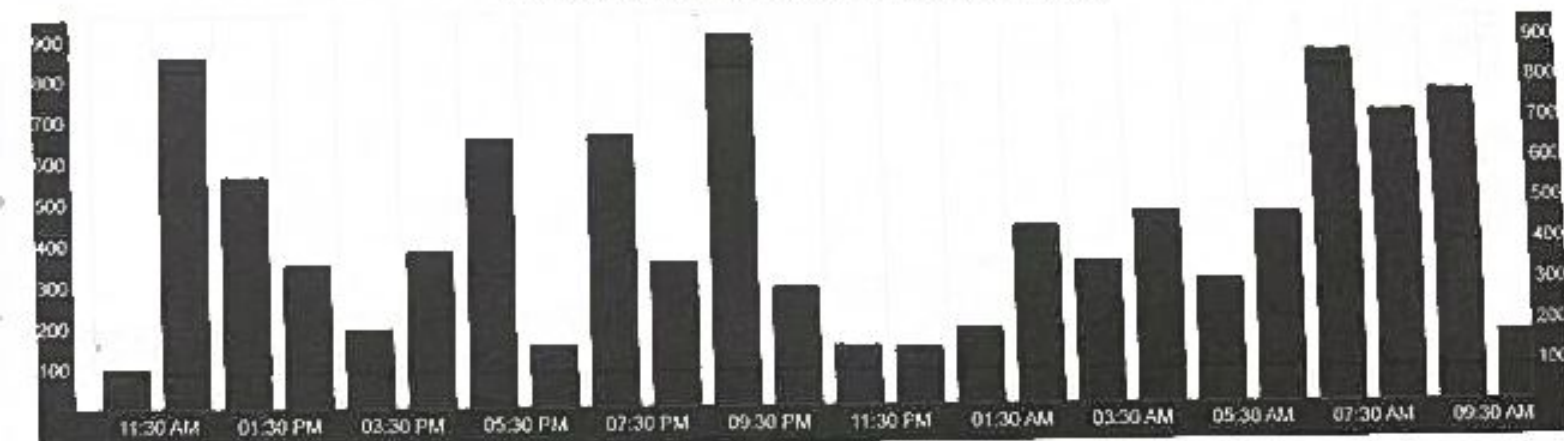
Ventricular Beats Per Interval



Ventricular Couplets Per Interval



Ventricular Bigeminy/Trigeminy Beats Per Interval

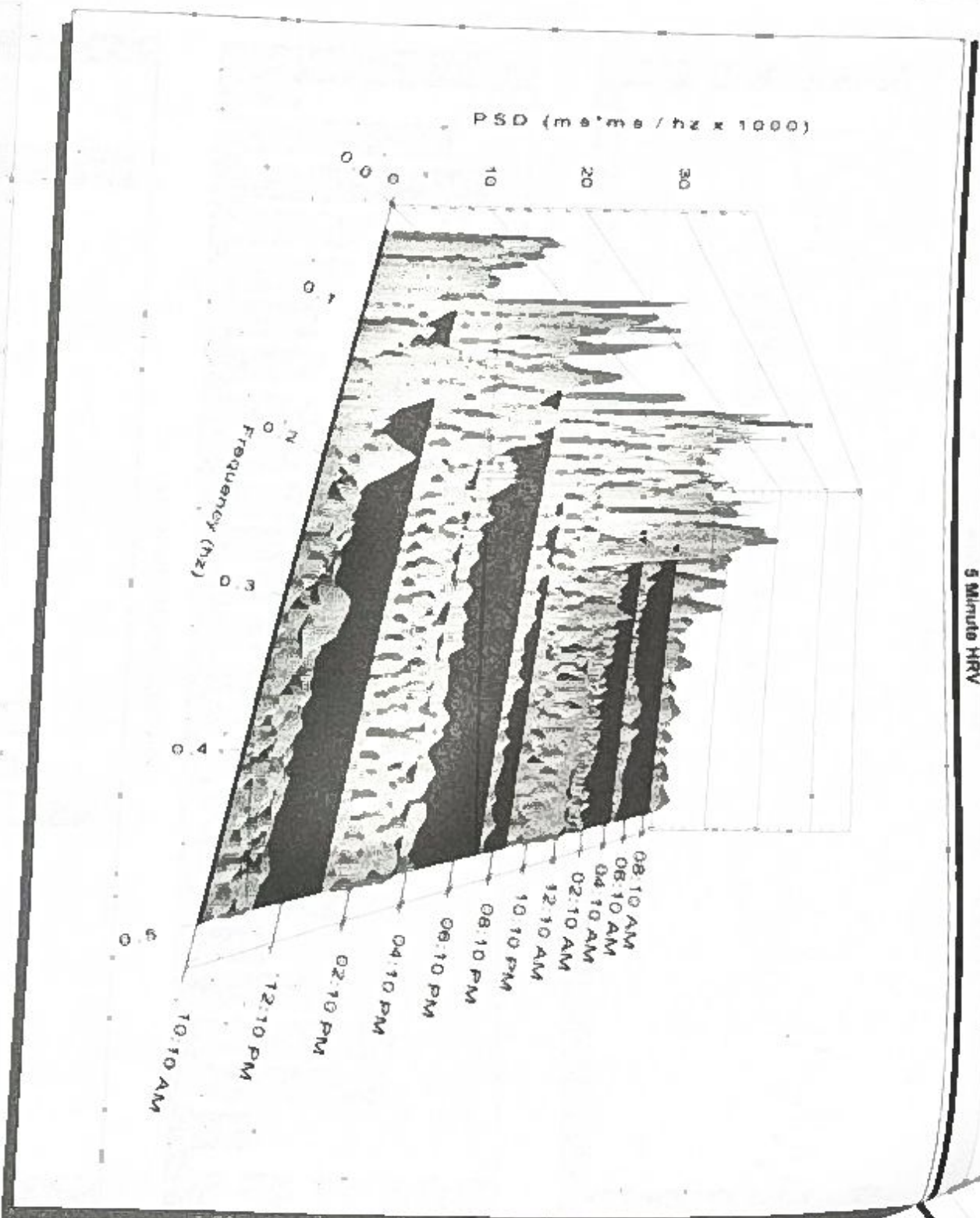


Serial #: 5980

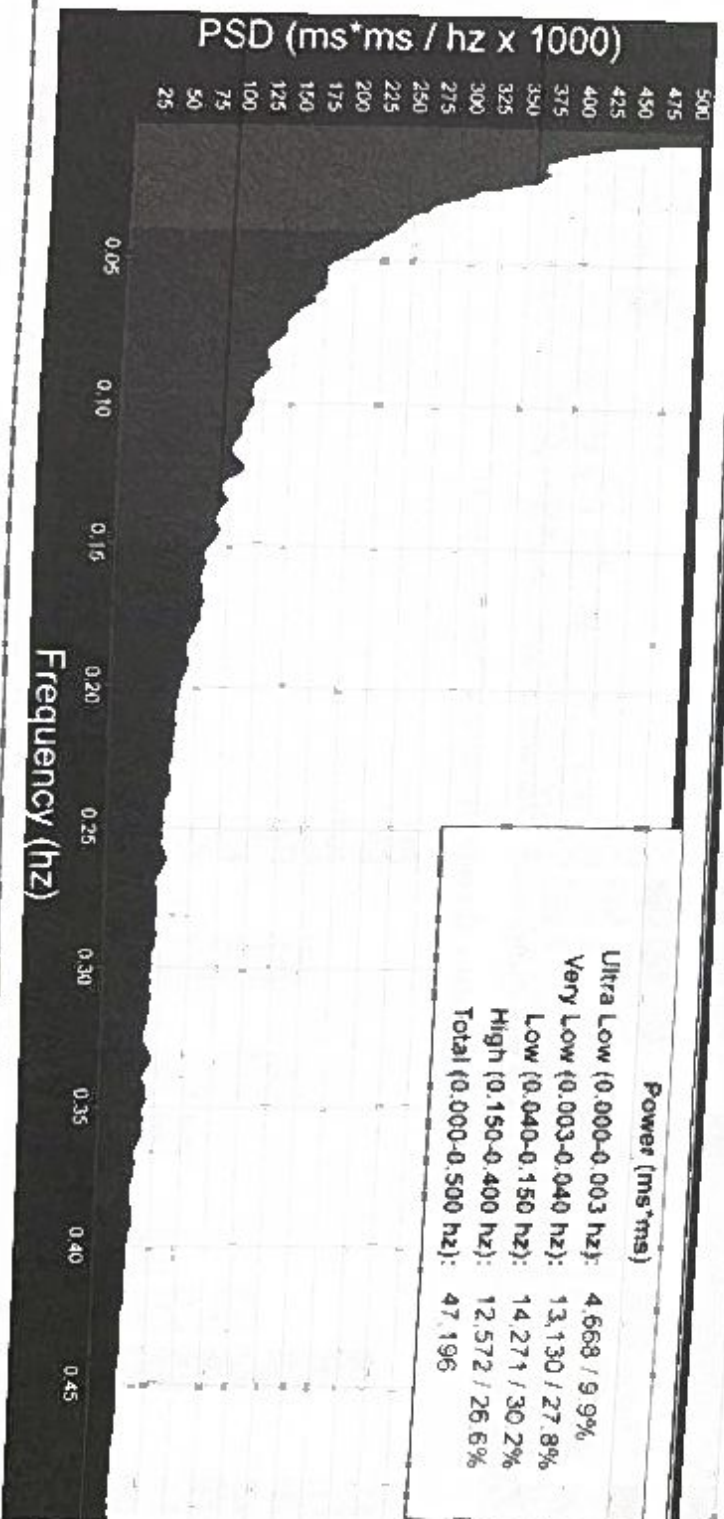
Patient Name : SASHAJIT YADAV

# SPECTRAL POWER

5 Minute HRV



24 Hour HRV



| Power ( $\text{ms}^2 \cdot \text{ms}$ ) |                |
|-----------------------------------------|----------------|
| Ultra Low (0.000-0.003 Hz):             | 4.668 / 9.9%   |
| Very Low (0.003-0.040 Hz):              | 13.130 / 27.8% |
| Low (0.040-0.150 Hz):                   | 14.271 / 30.2% |
| High (0.150-0.400 Hz):                  | 12.572 / 26.6% |
| Total (0.000-0.500 Hz):                 | 47.196         |

Serial # : S960

## QT ANALYSIS SUMMARY

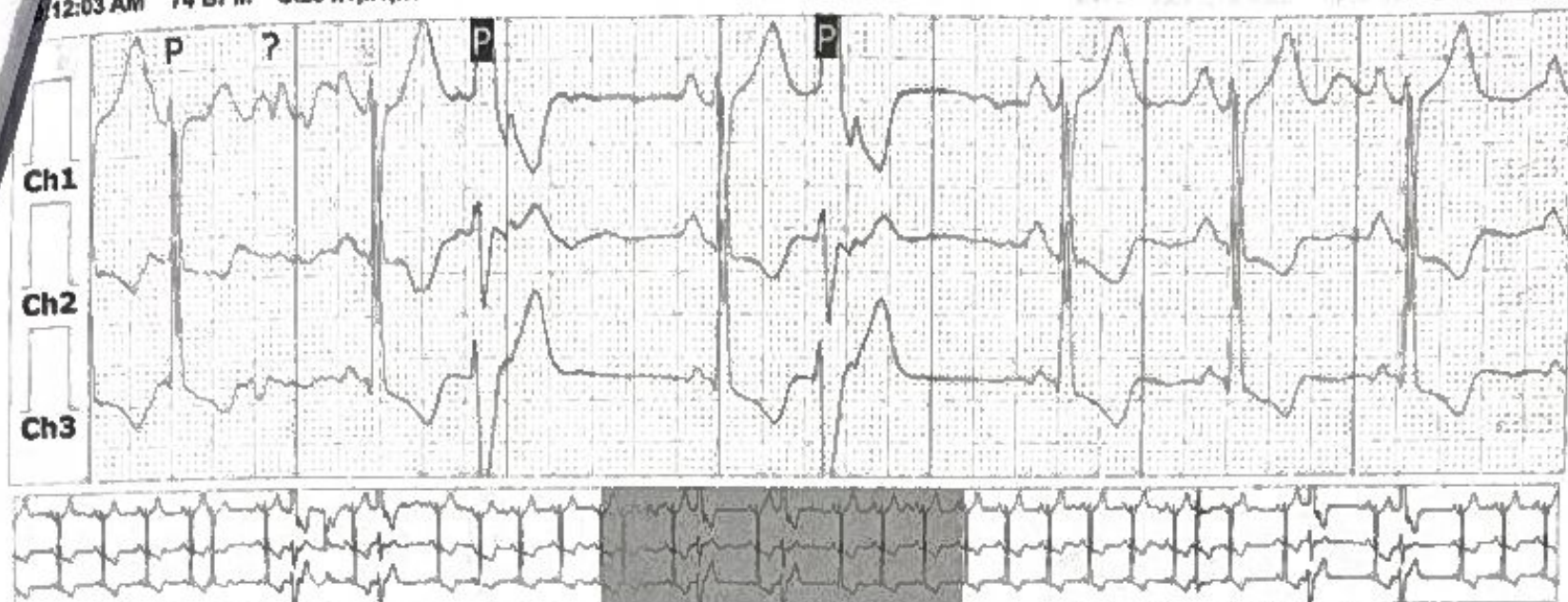
### QT Summary

| Time Ending | HR Min | HR Avg | HR Max | QT Min | QT Avg | QT Max | QTc Min | QTc Avg | QTc Max |
|-------------|--------|--------|--------|--------|--------|--------|---------|---------|---------|
| Setting     |        |        |        |        |        |        |         |         |         |
| 11:00 AM    | 56     | 73     | 88     | 338    | 373    | 415    | 379     | 409     | 472     |
| 12:00 PM    | 60     | 78     | 97     | 343    | 369    | 408    | 365     | 404     | 444     |
| 01:00 PM    | 63     | 79     | 97     | 344    | 369    | 407    | 354     | 404     | 448     |
| 02:00 PM    | 59     | 75     | 103    | 335    | 374    | 402    | 383     | 410     | 457     |
| 03:00 PM    | 56     | 64     | 80     | 367    | 388    | 413    | 373     | 397     | 419     |
| 04:00 PM    | 48     | 67     | 108    | 340    | 390    | 427    | 364     | 401     | 456     |
| 05:00 PM    | 61     | 75     | 90     | 349    | 373    | 396    | 355     | 397     | 457     |
| 06:00 PM    | 59     | 70     | 83     | 358    | 376    | 399    | 358     | 393     | 427     |
| 07:00 PM    | 65     | 81     | 110    | 332    | 371    | 403    | 347     | 403     | 450     |
| 08:00 PM    | 59     | 73     | 83     | 356    | 376    | 401    | 365     | 403     | 439     |
| 09:00 PM    | 56     | 79     | 112    | 335    | 374    | 428    | 367     | 408     | 459     |
| 10:00 PM    | 51     | 62     | 96     | 358    | 392    | 426    | 368     | 394     | 444     |
| 11:00 PM    | 49     | 59     | 75     | 378    | 396    | 420    | 360     | 392     | 429     |
| 12:00 AM    | 50     | 60     | 75     | 373    | 390    | 415    | 361     | 389     | 421     |
| 01:00 AM    | 48     | 58     | 74     | 383    | 399    | 420    | 359     | 394     | 424     |
| 02:00 AM    | 53     | 65     | 92     | 352    | 385    | 427    | 359     | 392     | 437     |
| 03:00 AM    | 44     | 64     | 76     | 364    | 393    | 438    | 356     | 394     | 429     |
| 04:00 AM    | 44     | 59     | 77     | 384    | 405    | 430    | 361     | 394     | 431     |
| 05:00 AM    | 44     | 59     | 86     | 371    | 399    | 431    | 354     | 391     | 477     |
| 06:00 AM    | 41     | 64     | 92     | 358    | 409    | 445    | 362     | 407     | 451     |
| 07:00 AM    | 70     | 88     | 103    | 345    | 378    | 403    | 392     | 443     | 486     |
| 08:00 AM    | 70     | 82     | 114    | 352    | 388    | 412    | 379     | 431     | 519     |
| 09:00 AM    | 62     | 80     | 91     | 338    | 380    | 413    | 377     | 434     | 522     |
| 10:00 AM    | 59     | 78     | 85     | 355    | 371    | 387    | 374     | 416     | 452     |
| Total       | 41     | 70     | 114    | 332    | 385    | 445    | 347     | 404     | 522     |

# SELECTED STRIPS

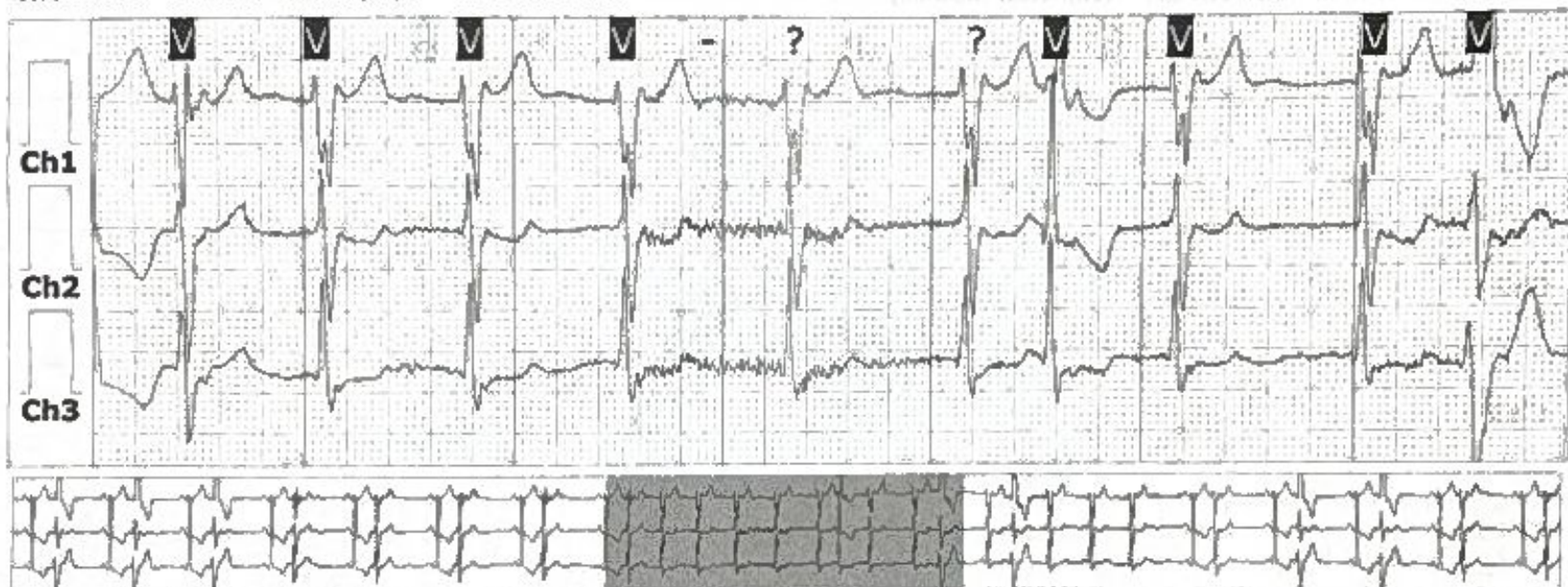
12:03 AM 74 BPM Size x1,x1,x1 PVC

Strip 1 of 23



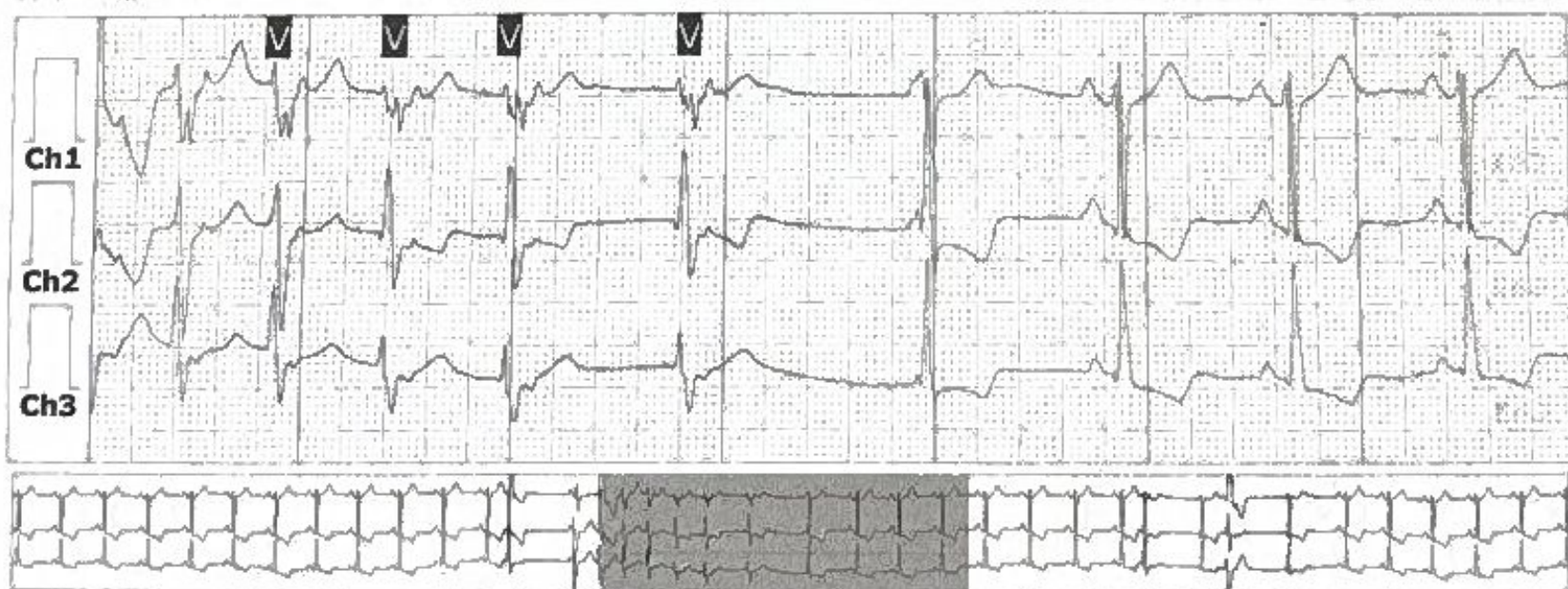
11:27:45 AM 82 BPM Size x1,x1,x1 Ventricular Run

Strip 2 of 23



01:19:22 PM 79 BPM Size x1,x1,x1 PVC

Strip 3 of 23

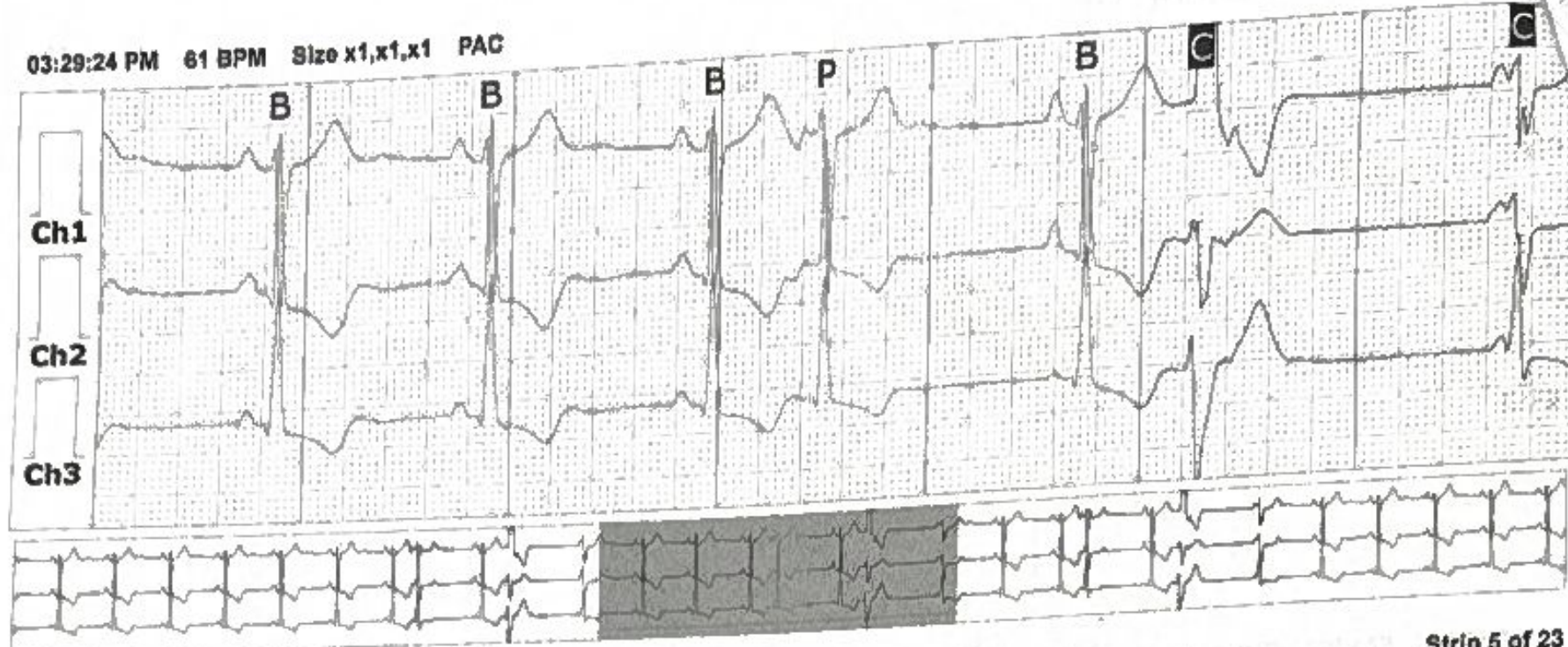


Patient Name : **SABHAJIT YADAV**

# **SELECTED STRIPS**

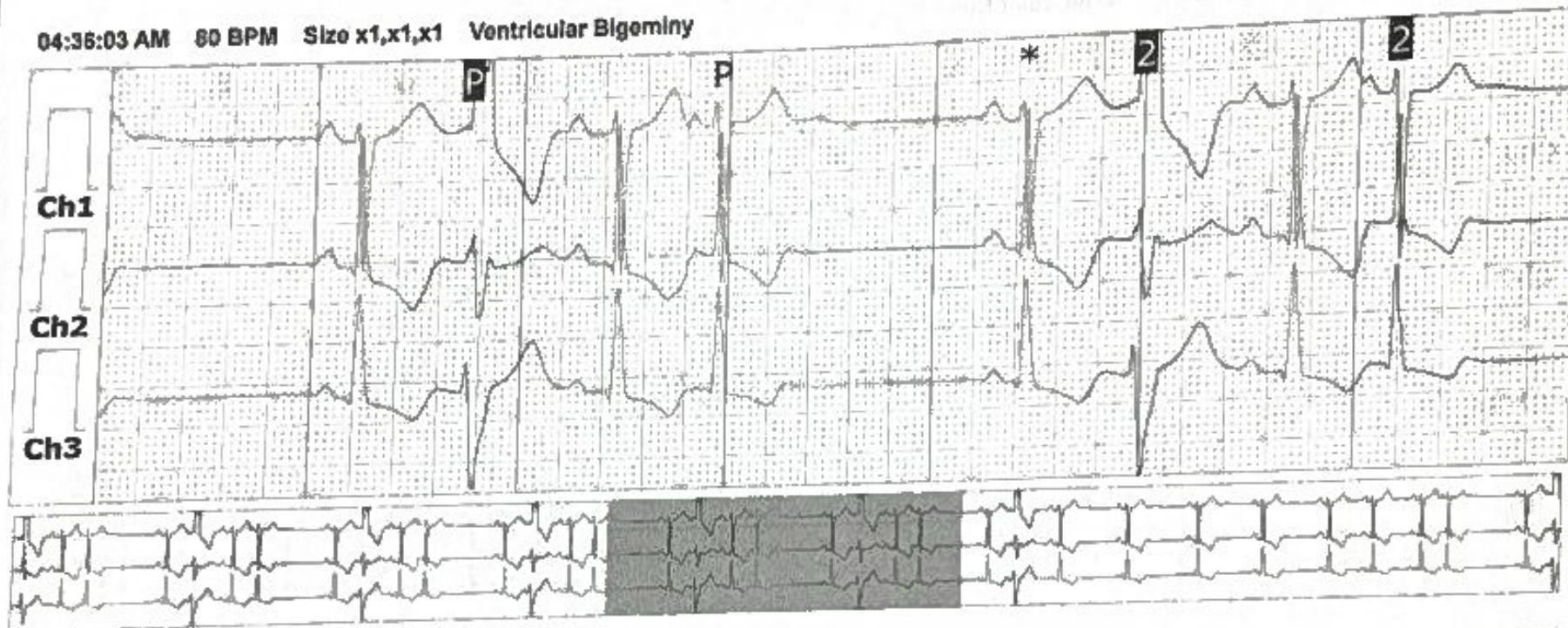
Strip 4 of 23

03:29:24 PM 61 BPM Size x1,x1,x1 PAC



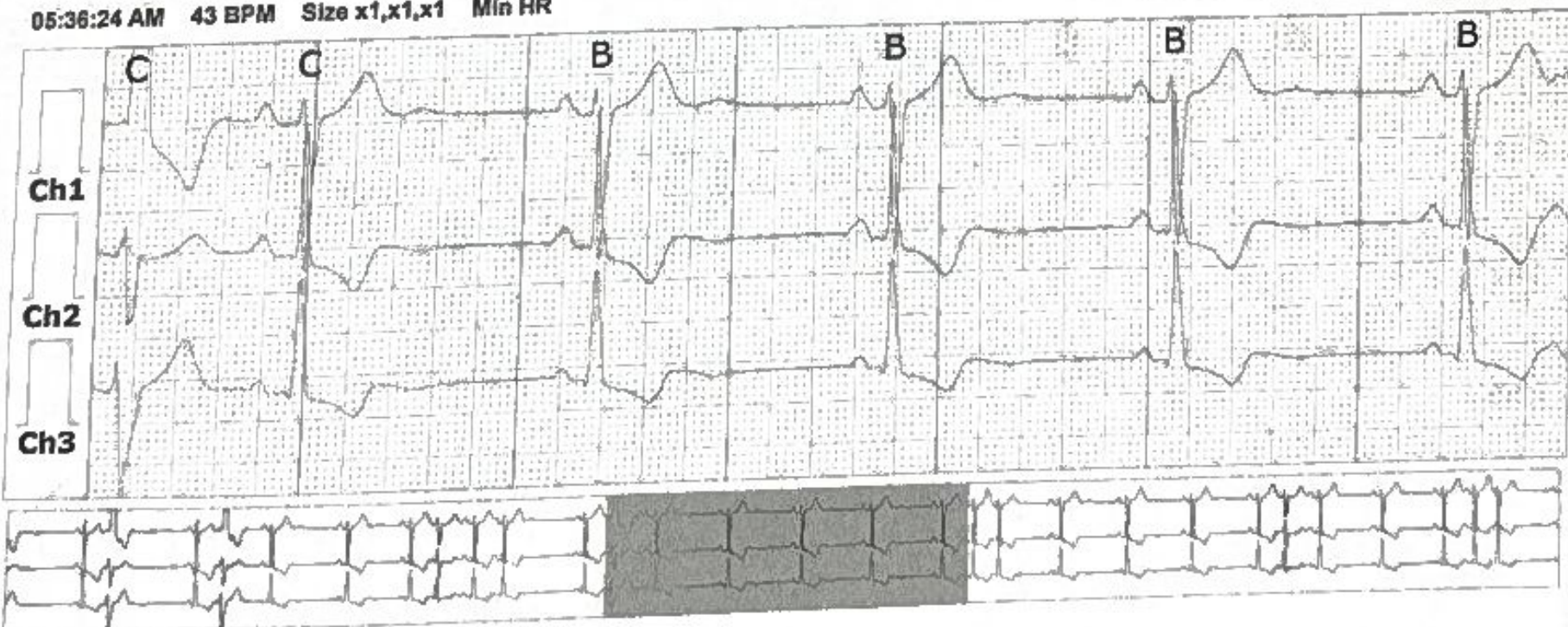
Strip 5 of 23

04:36:03 AM 60 BPM Size x1,x1,x1 Ventricular Bigeminy



Strip 6 of 23

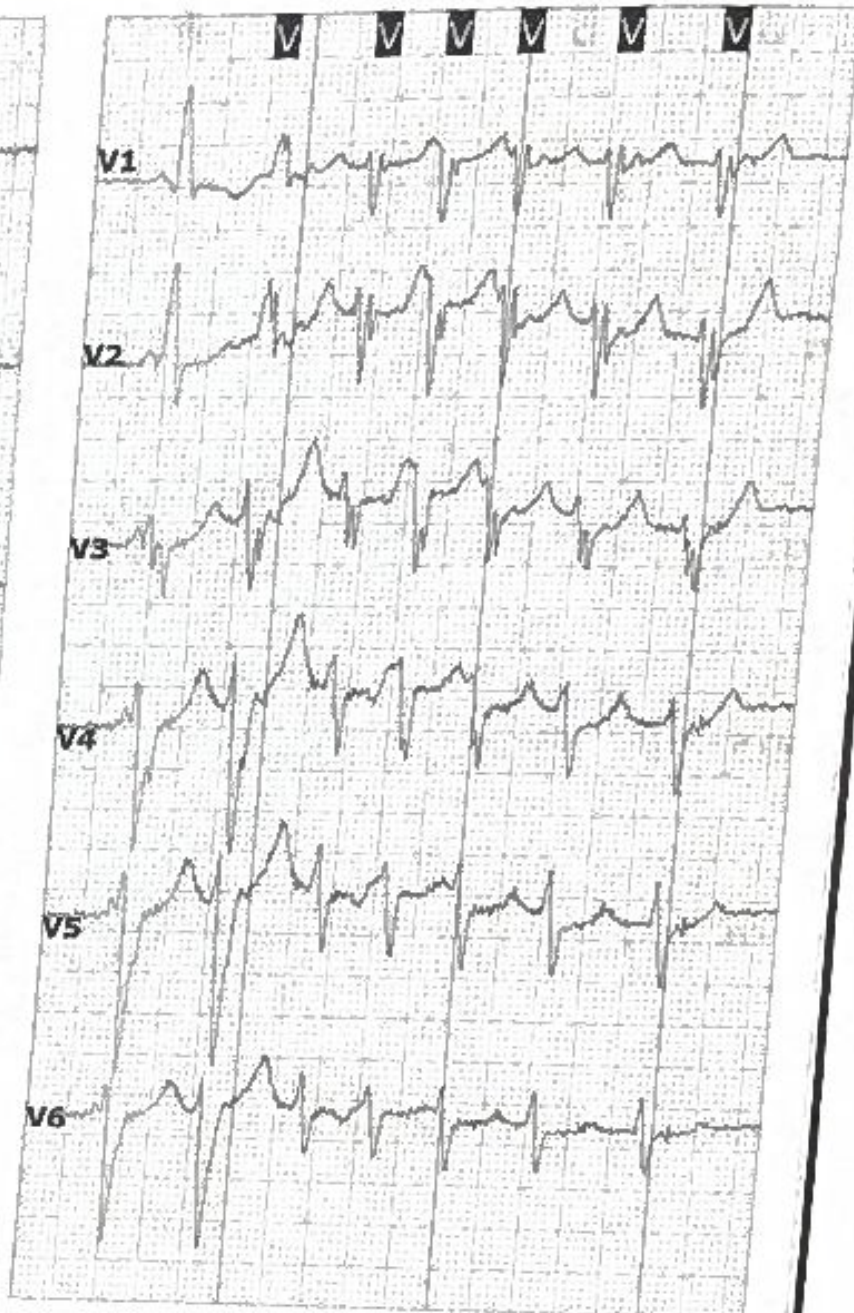
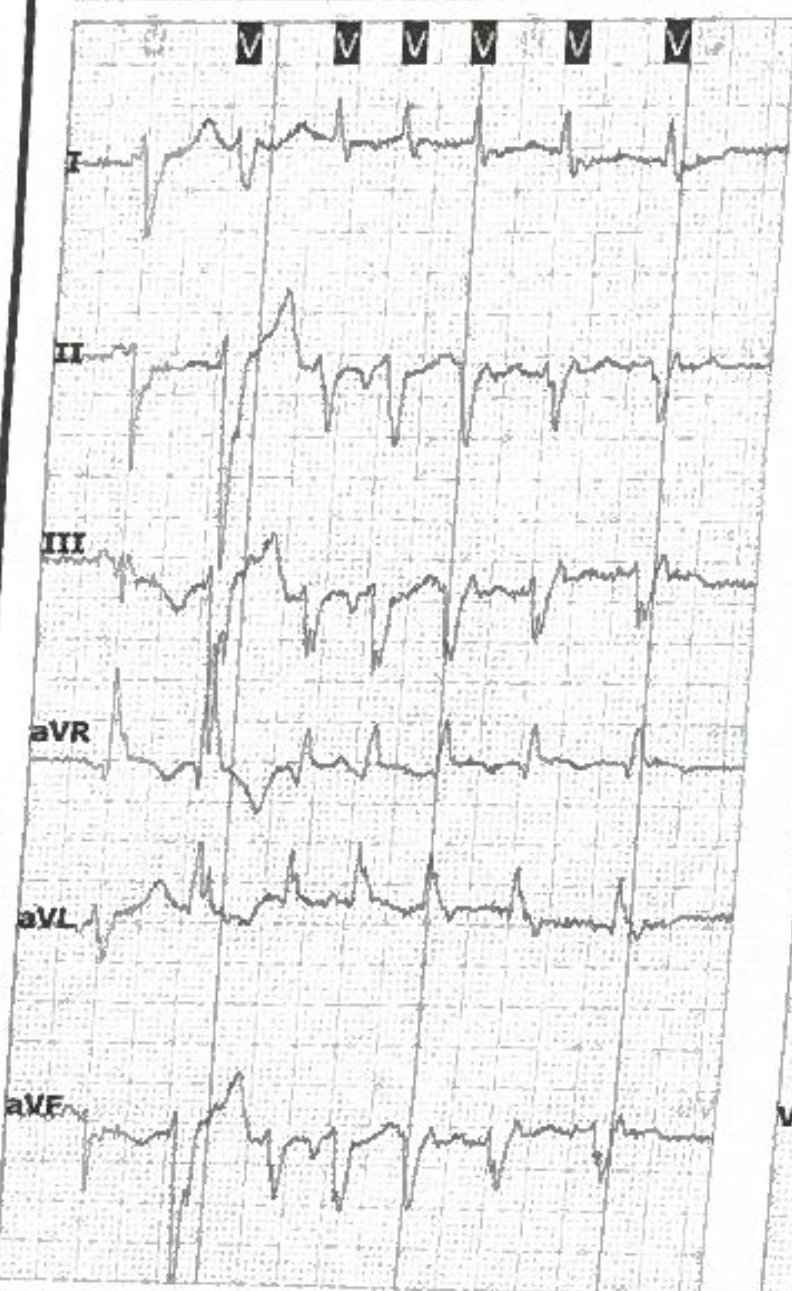
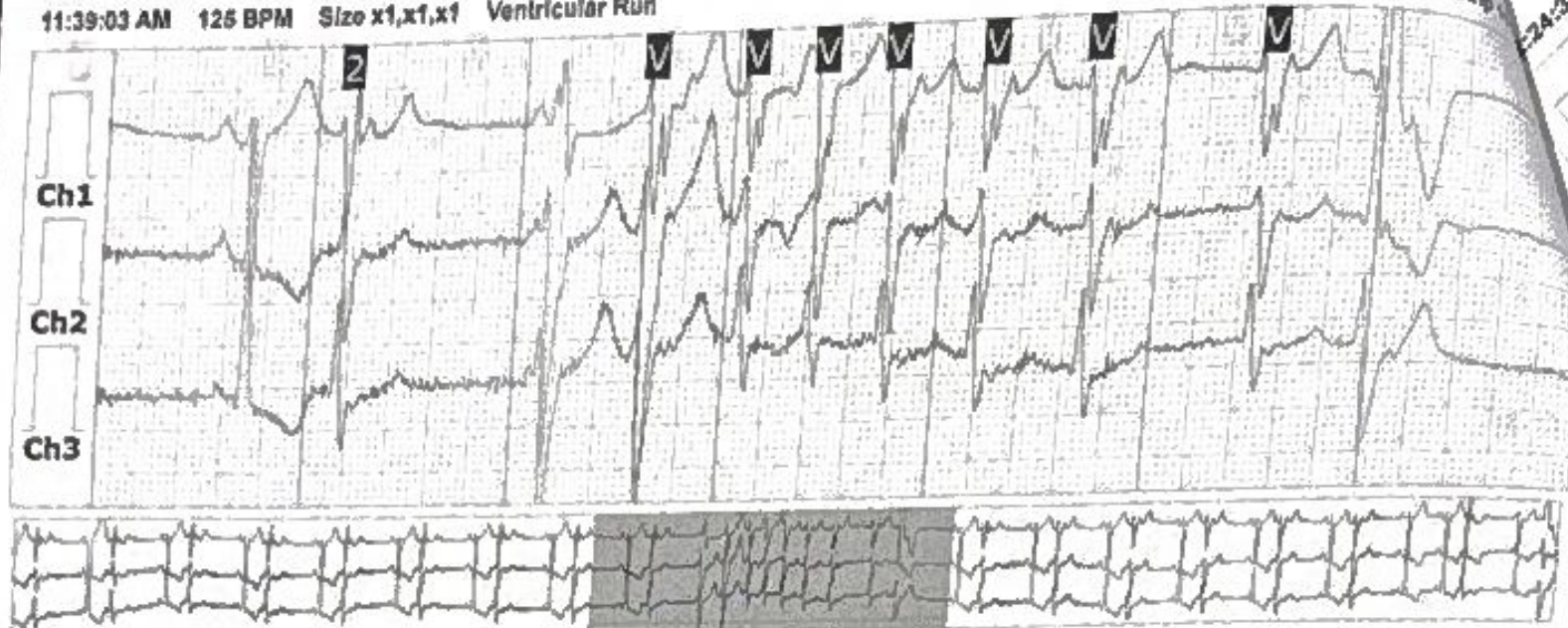
05:36:24 AM 43 BPM Size x1,x1,x1 Min HR



Patient Name : SABHAJIT YADAV

# SELECTED STRIPS

11:39:03 AM 125 BPM Size x1,x1,x1 Ventricular Run

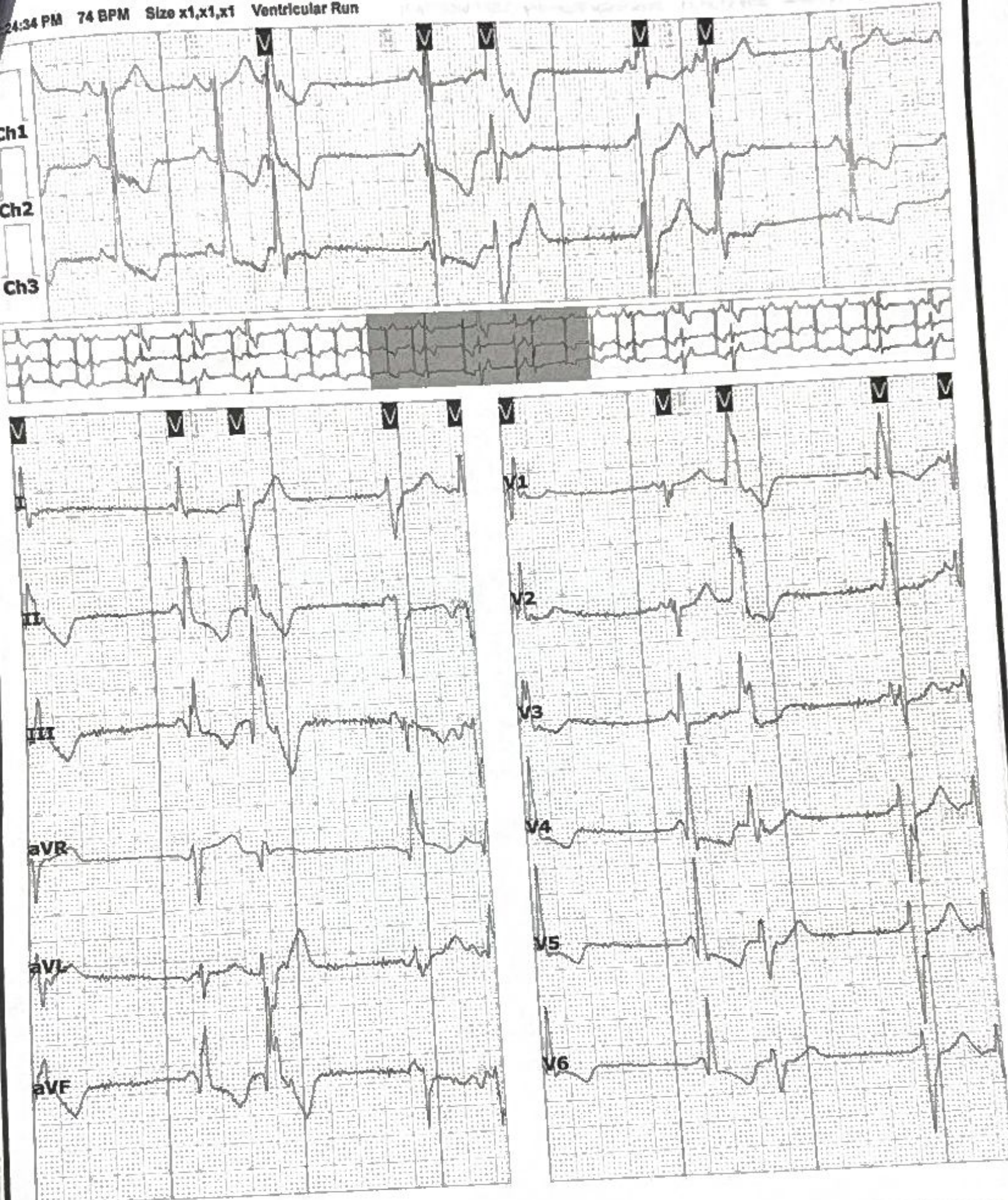


Serial #: 5960

SELECTED STRIPS

Strip 11 of 23

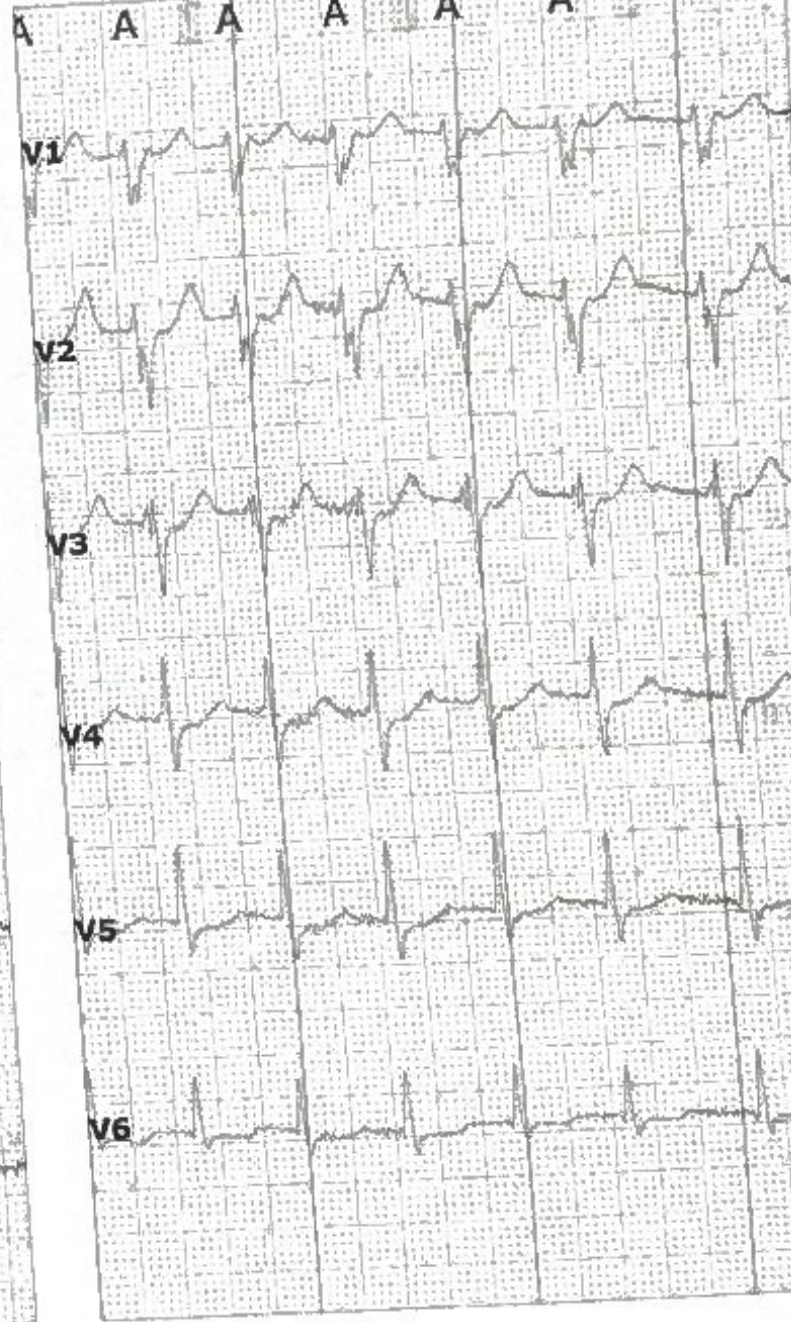
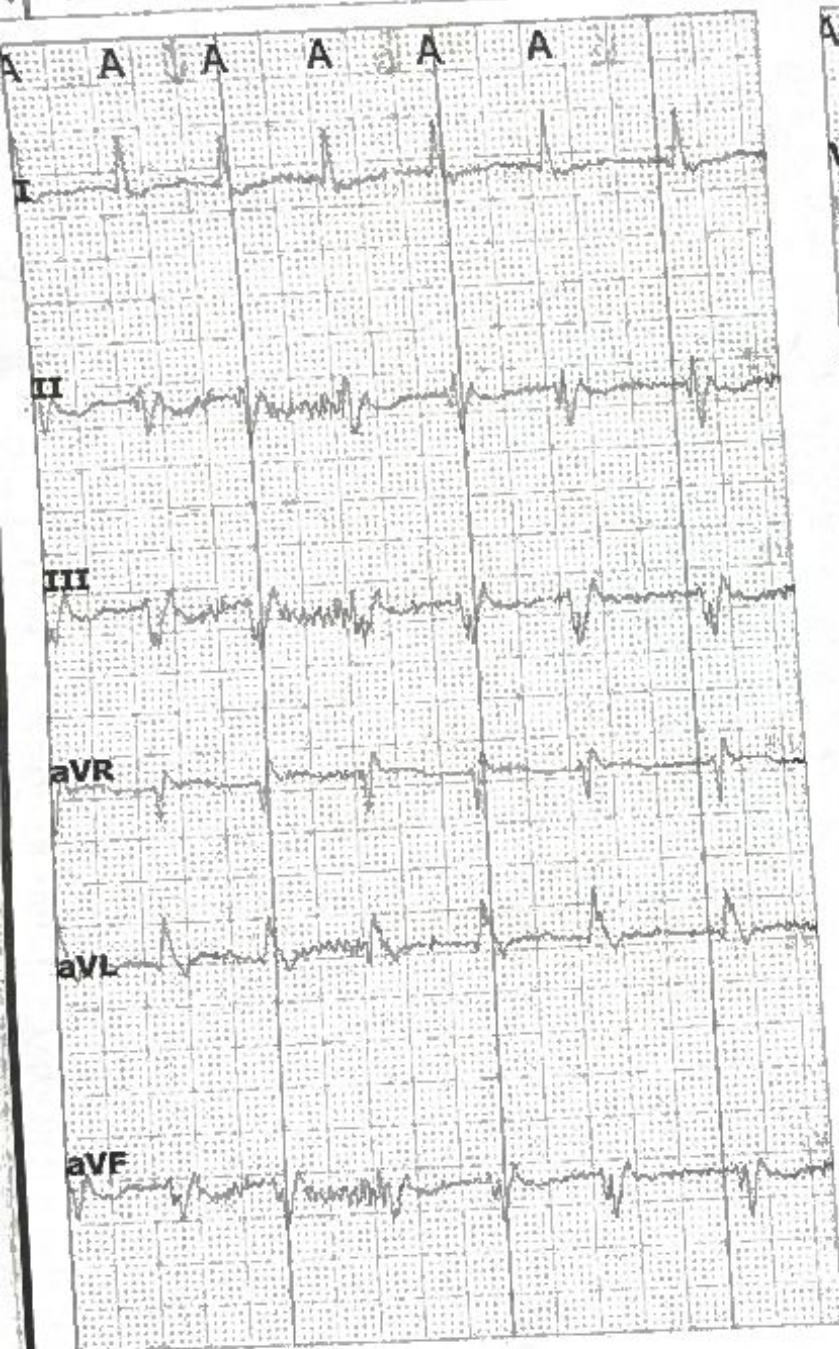
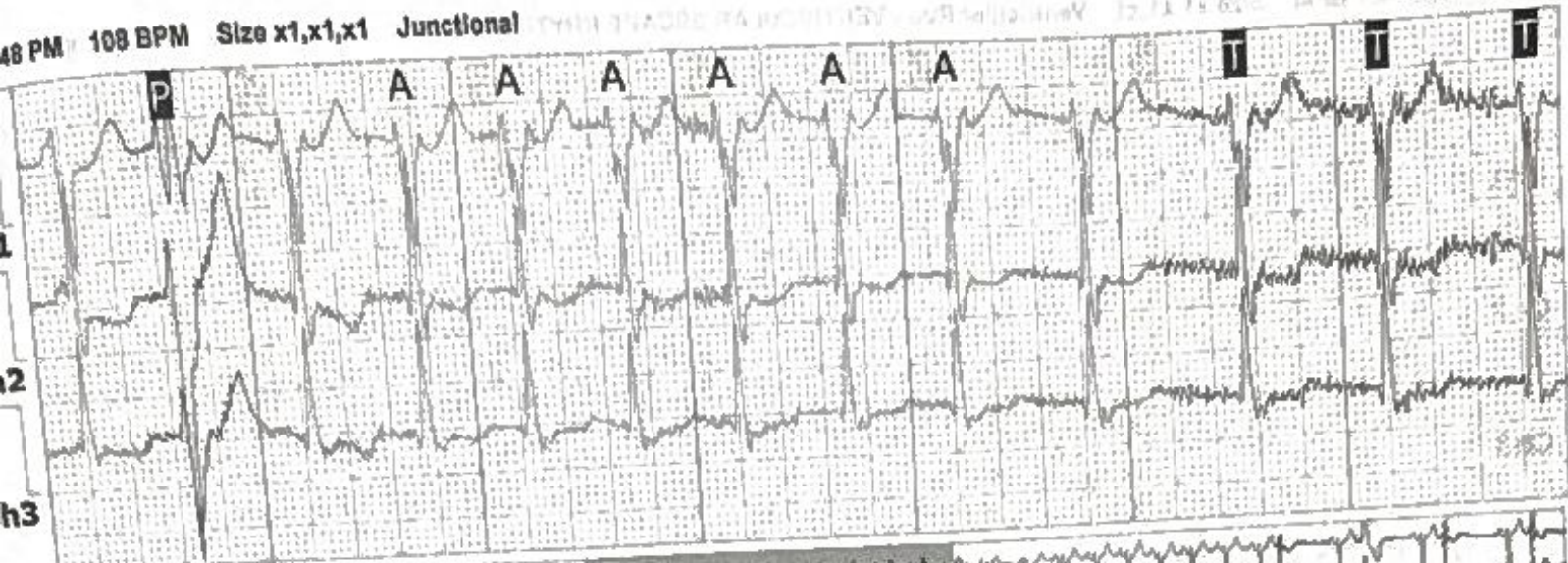
24:34 PM 74 BPM Size x1,x1,x1 Ventricular Run



# SELECTED STRIPS

Strip 13 of 23

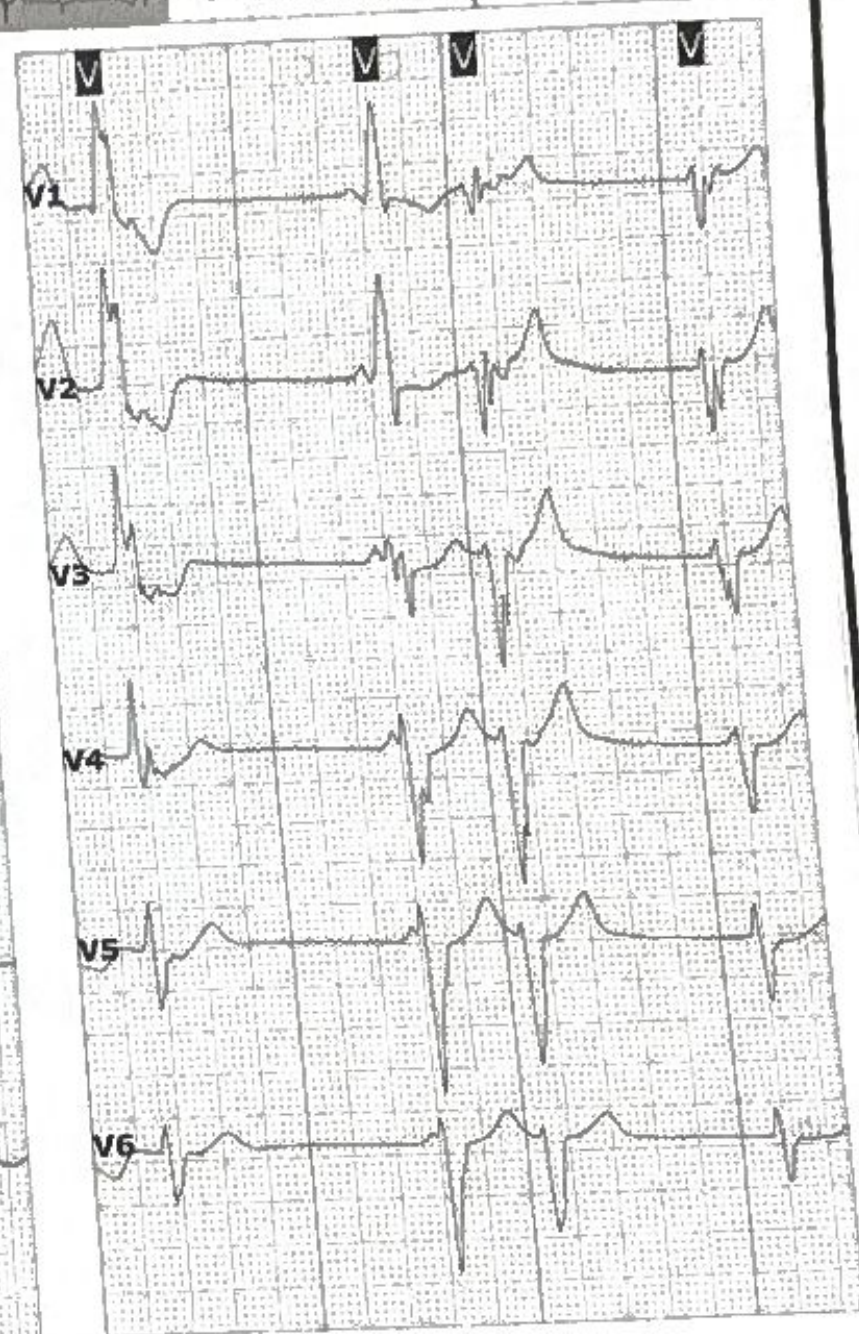
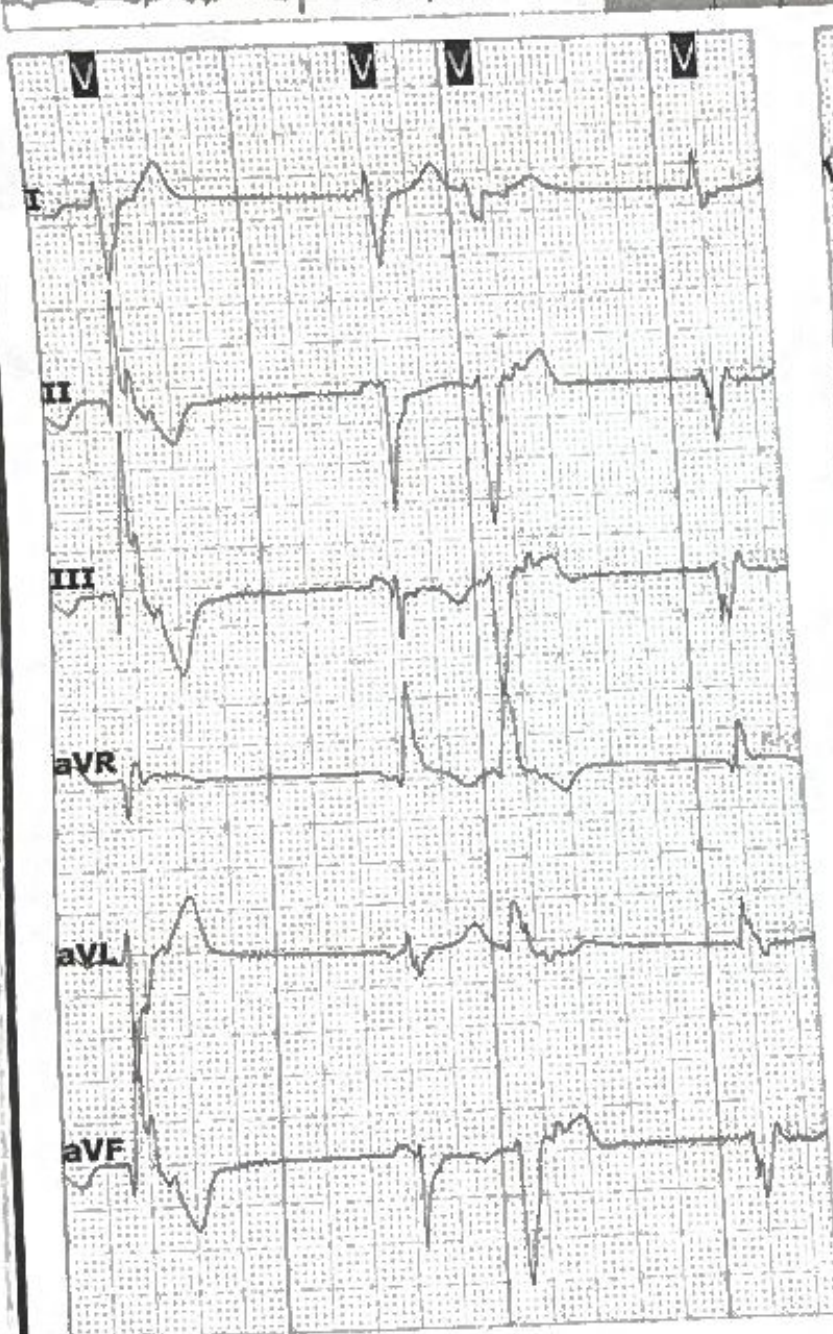
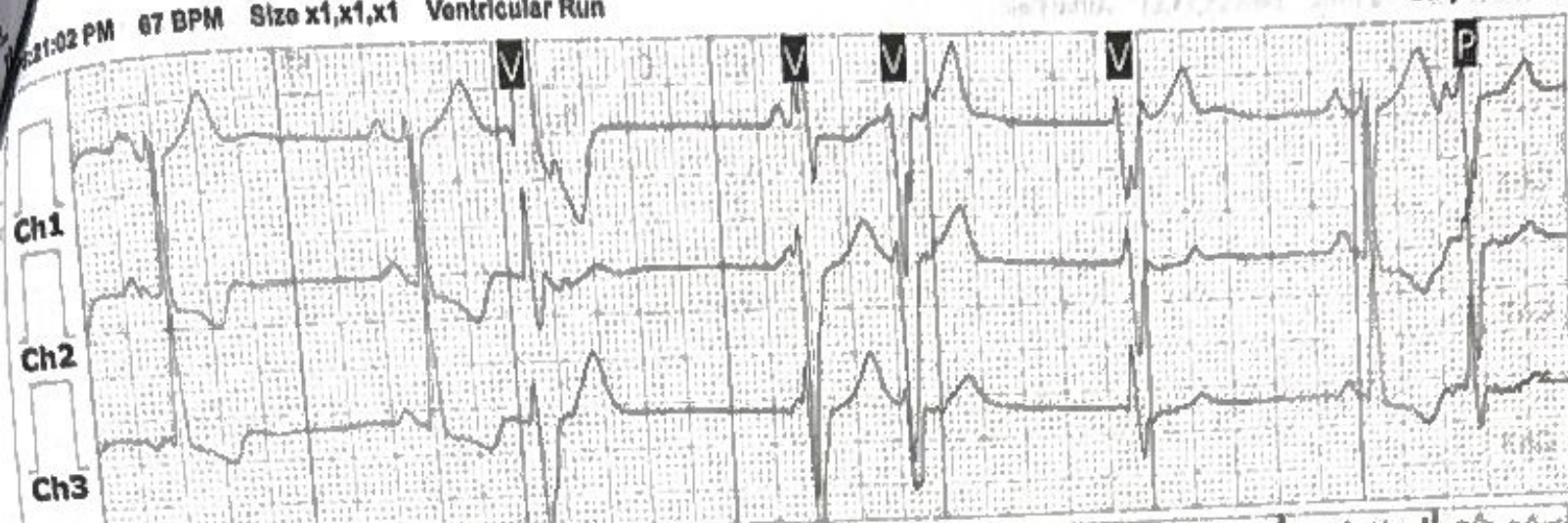
48 PM 108 BPM Size x1,x1,x1 Junctional



# SELECTED STRIPS

12:21:02 PM 67 BPM Size x1,x1,x1 Ventricular Run

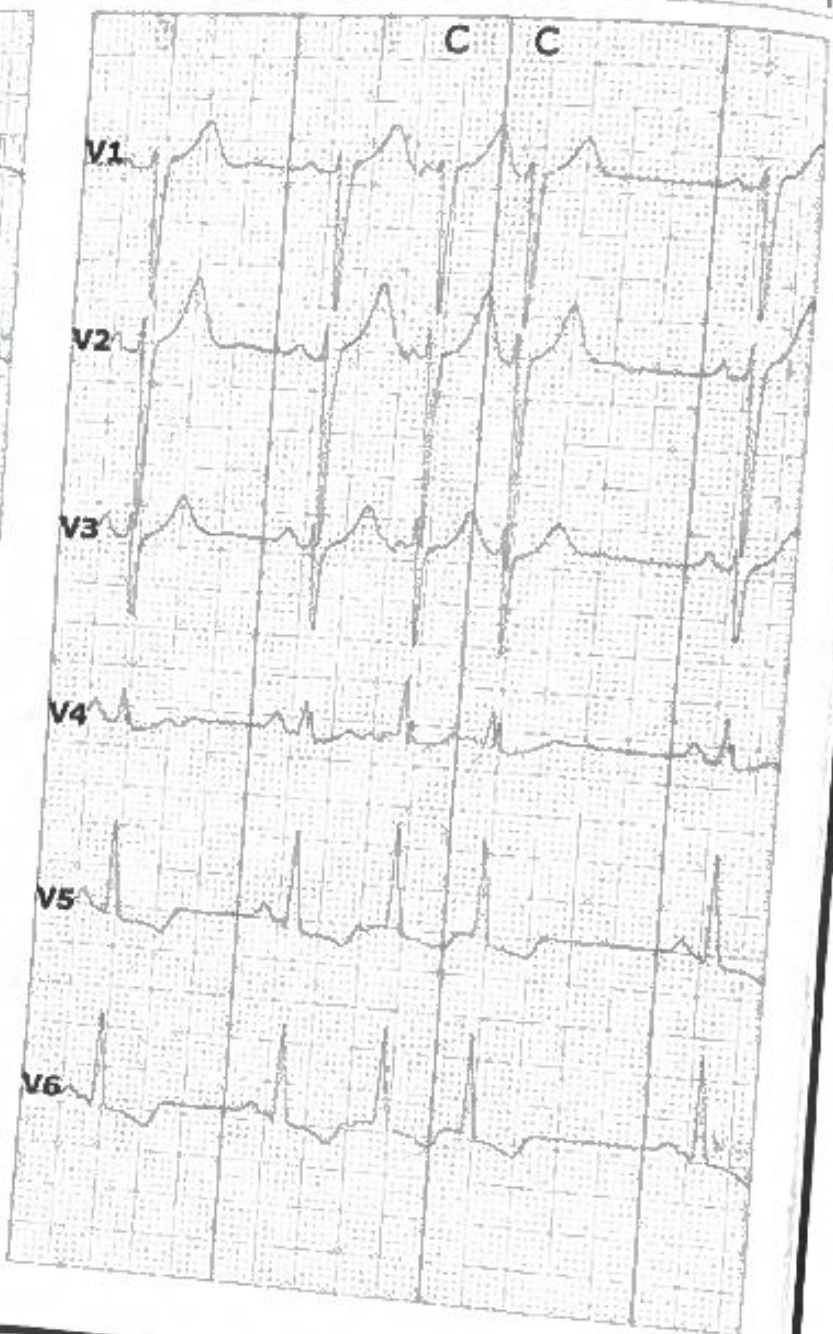
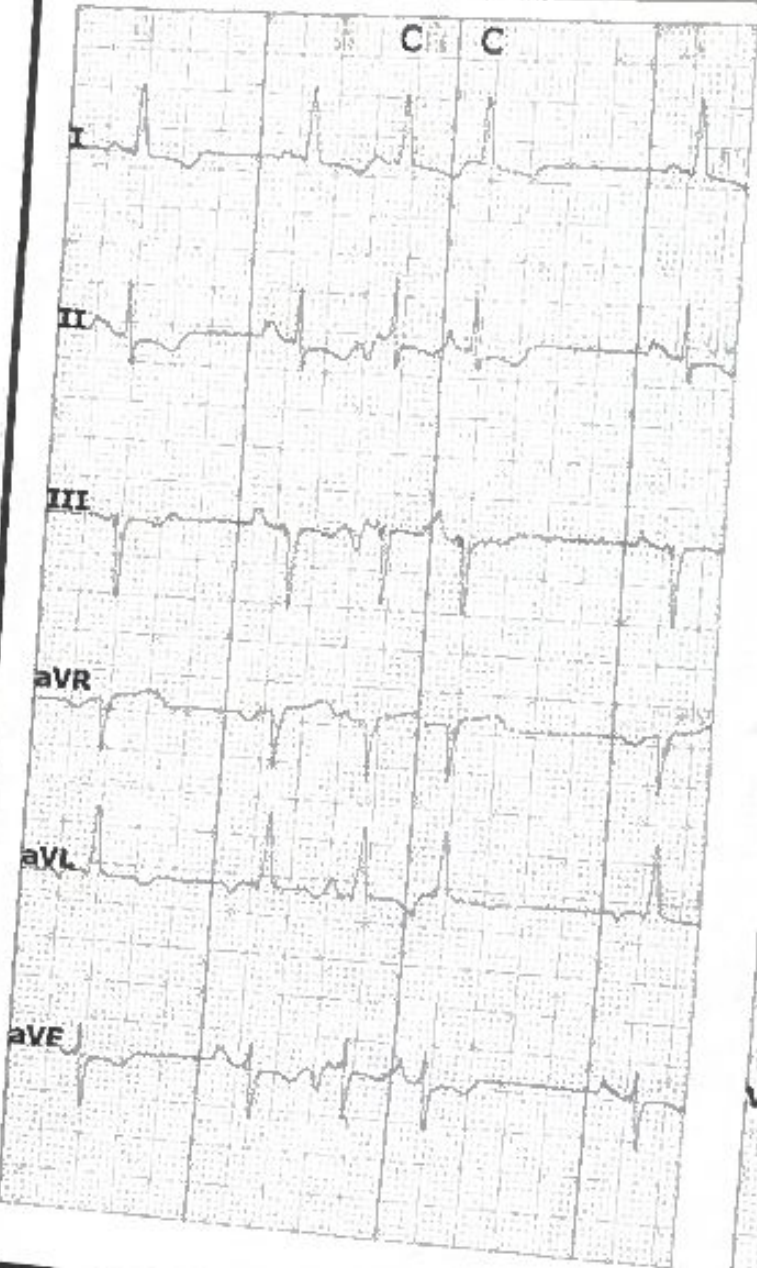
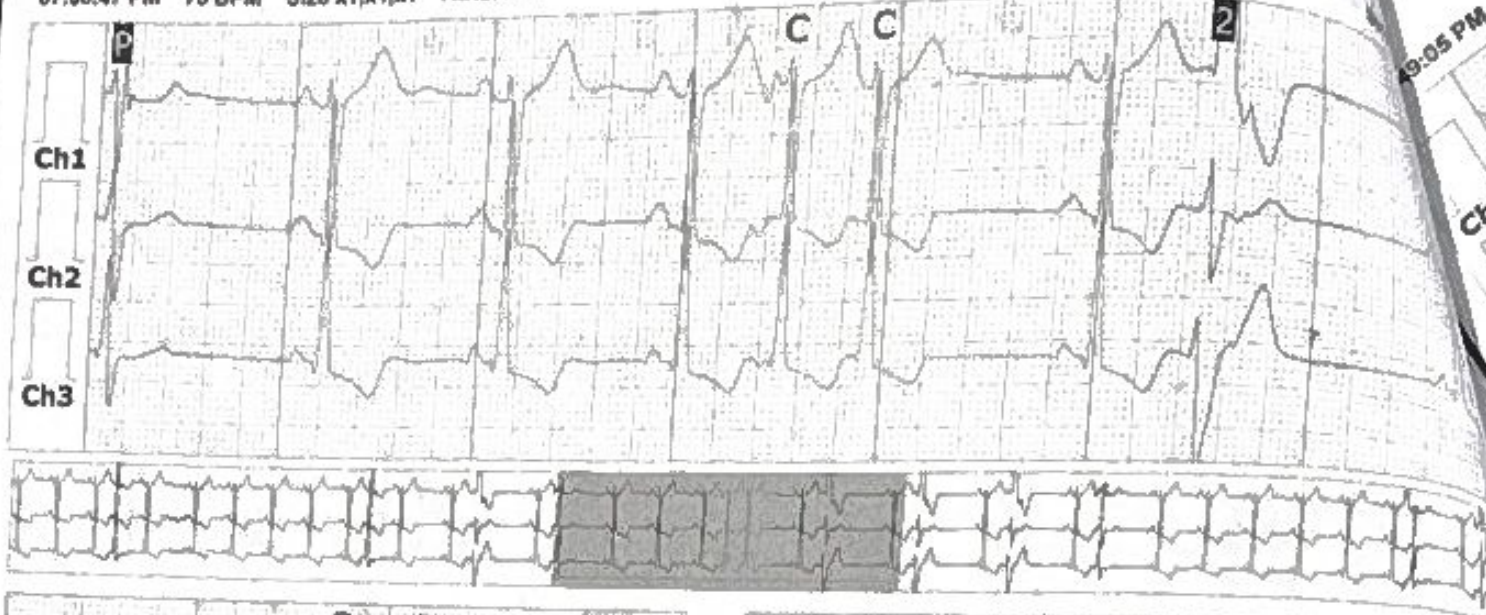
Strip 16 of 23



Patient Name: SABHAJIT YADAV

# SELECTED STRIPS

07:50:47 PM 76 BPM Size x1,x1,x1 Atrial Pair

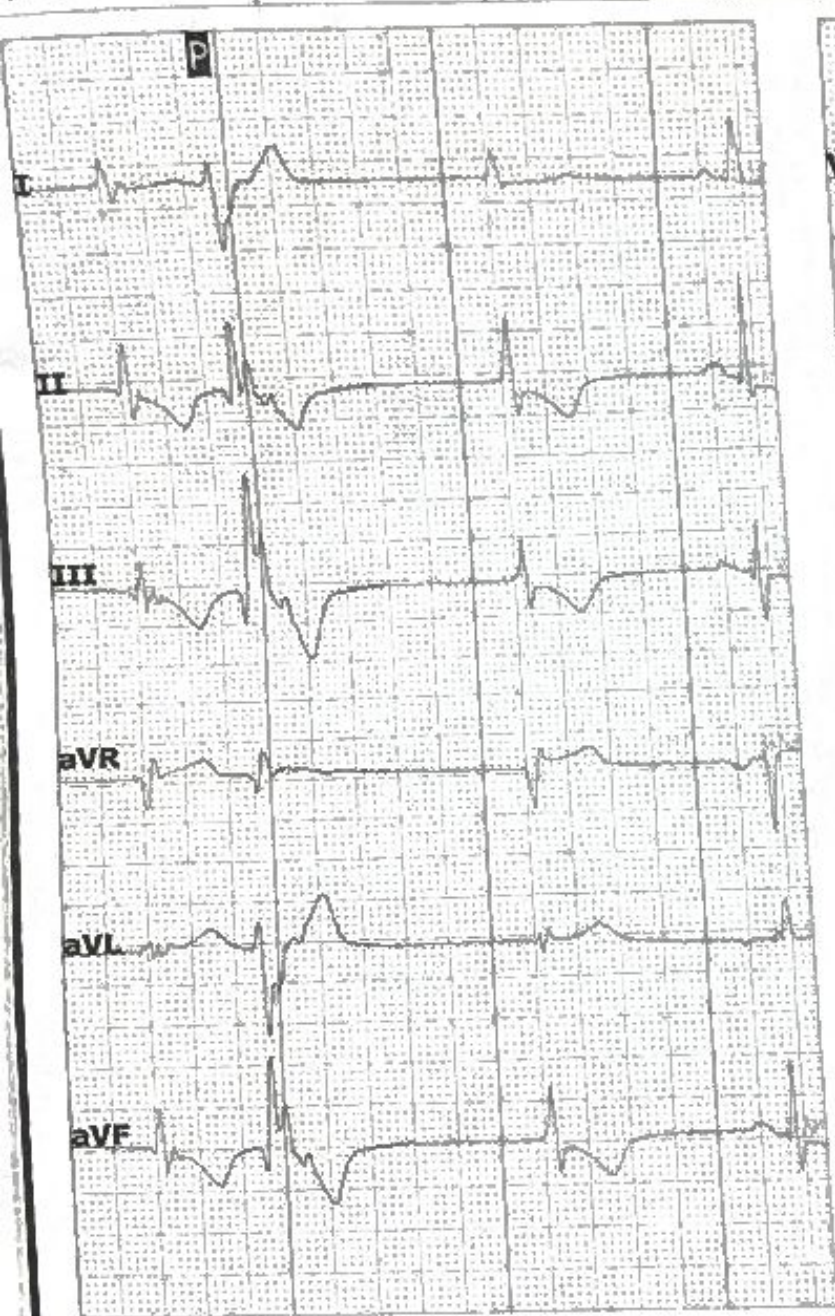
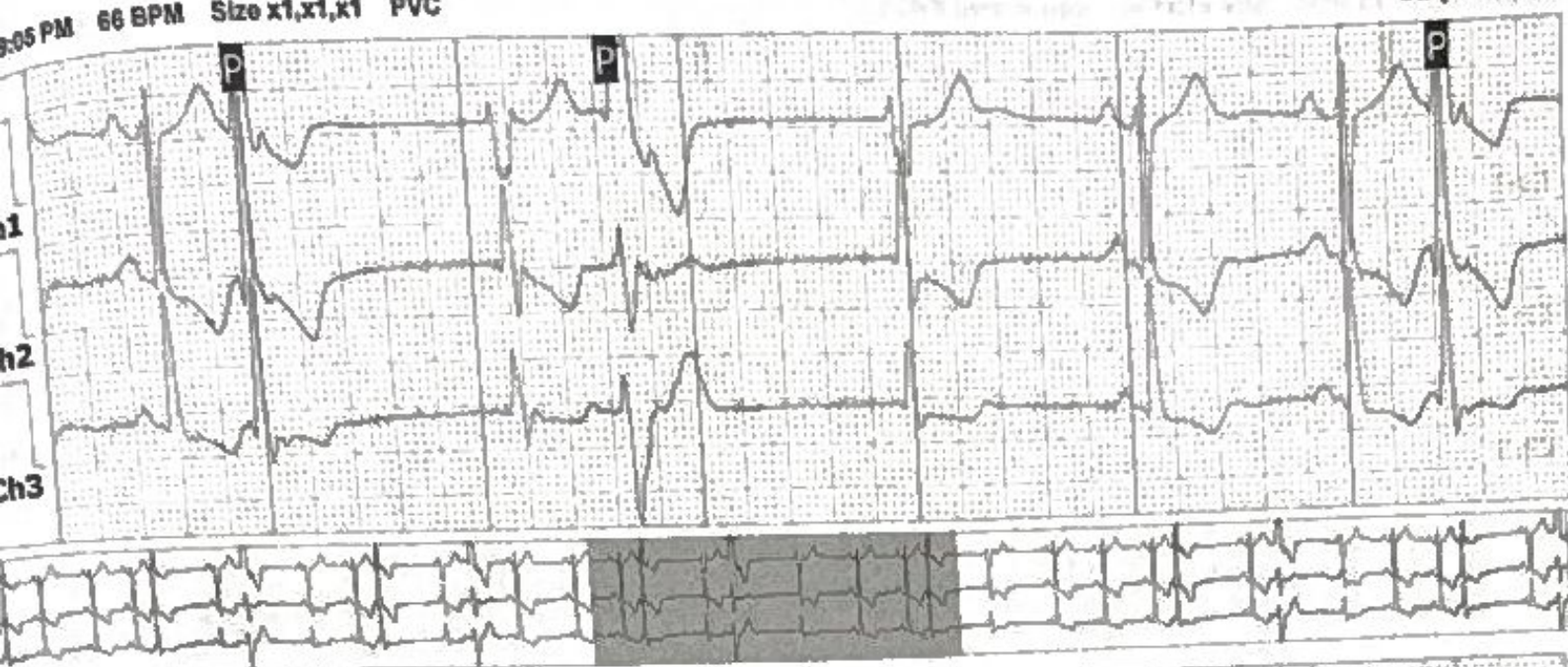


Serial #: 5960

SELECTED STRIPS

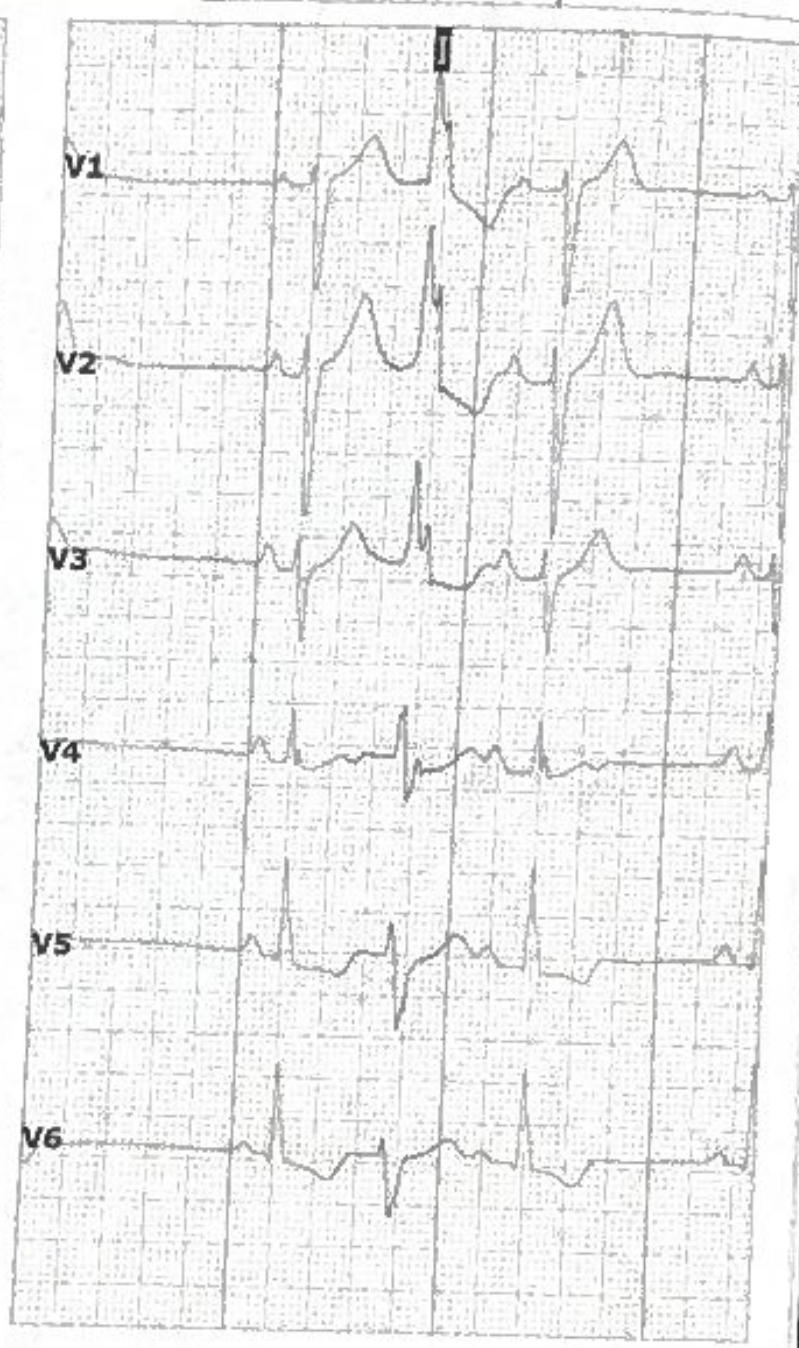
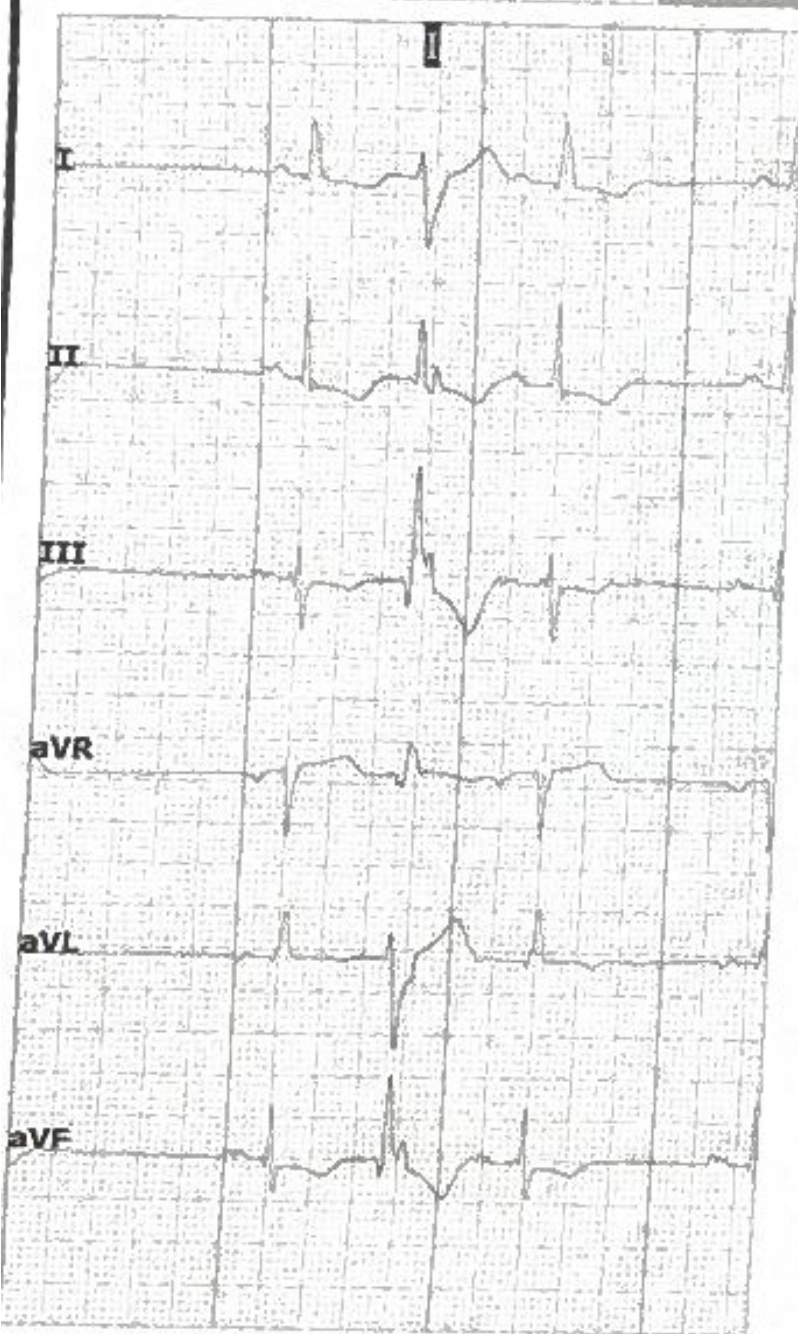
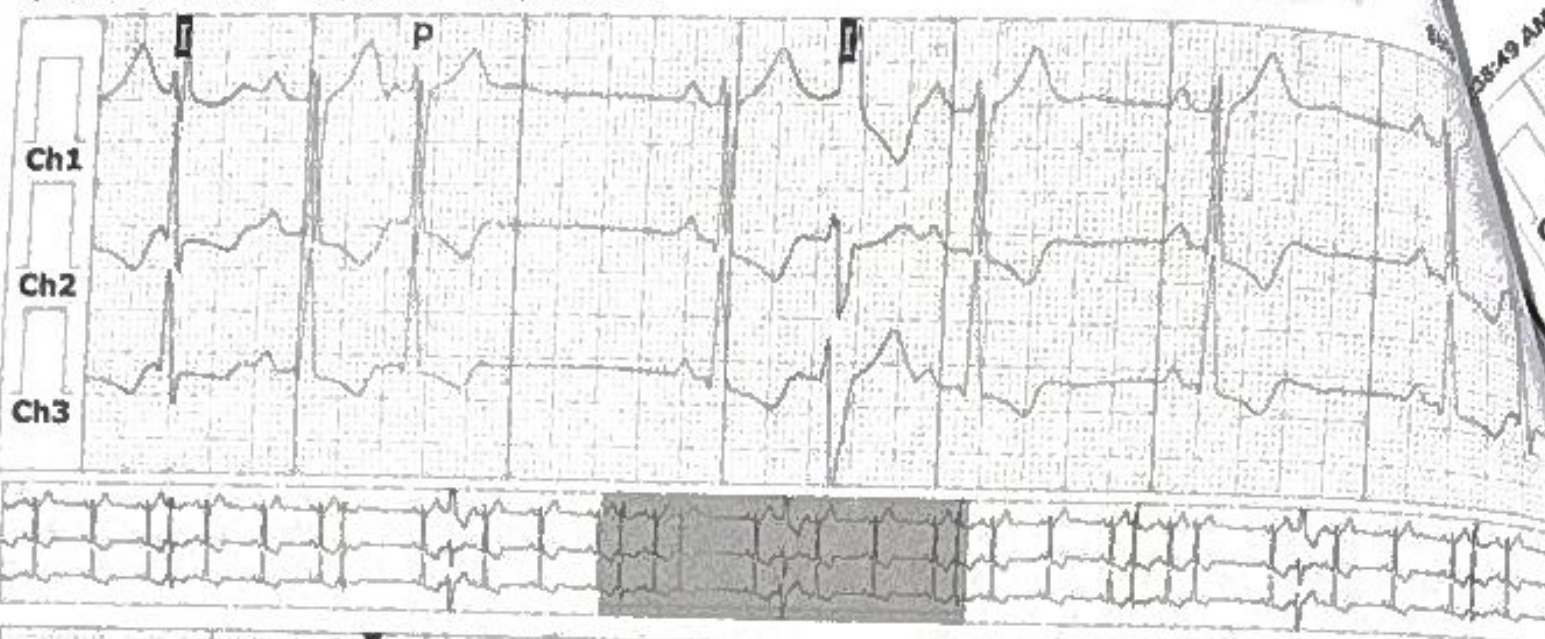
9:05 PM 66 BPM Size x1,x1,x1 PVC

Strip 17 of 23



SELECTED STRIPS

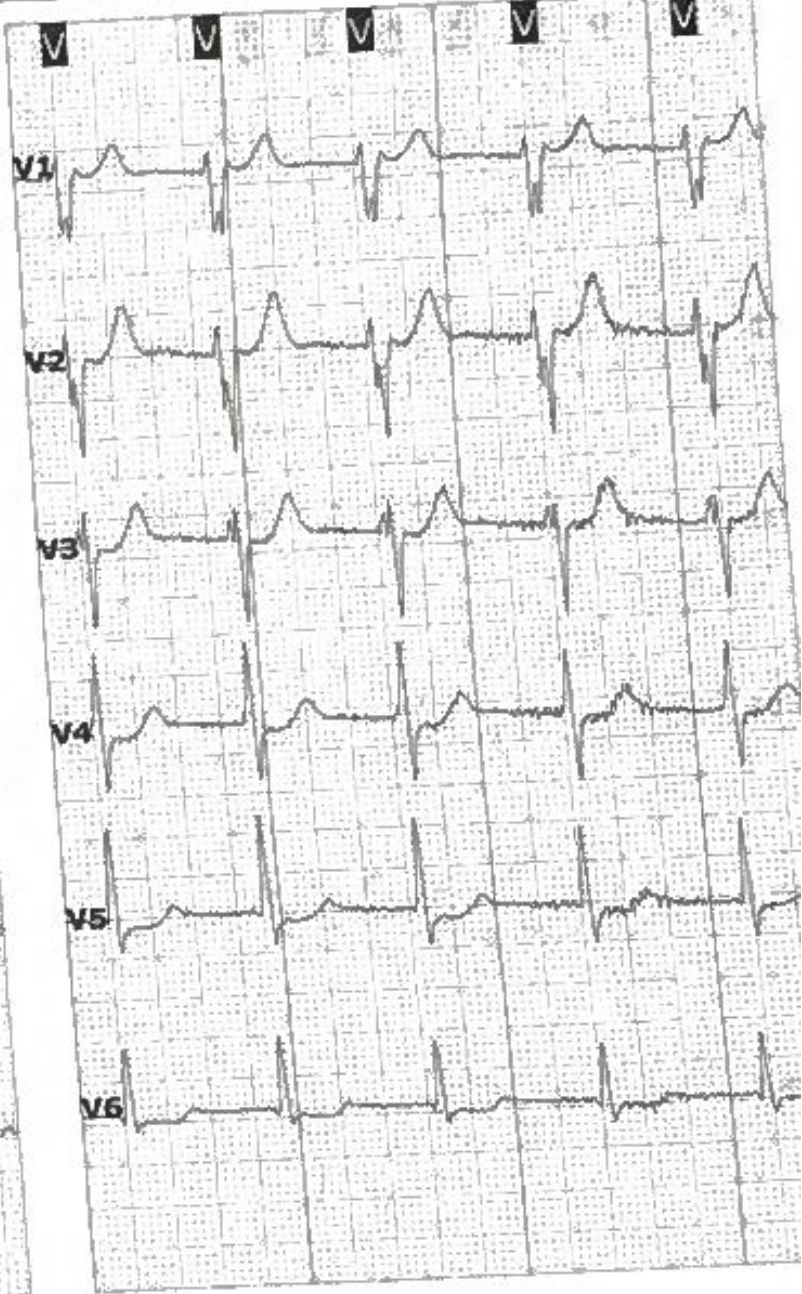
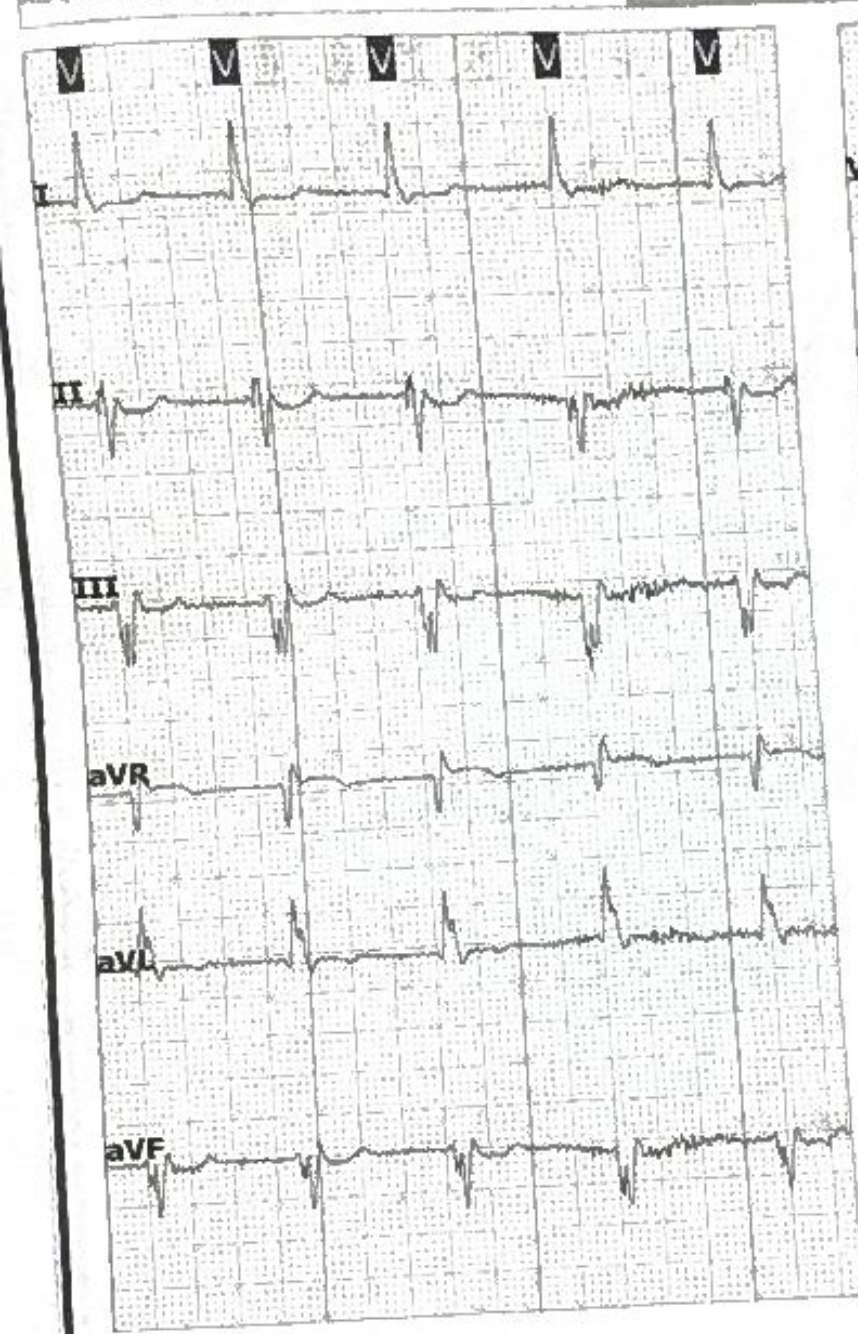
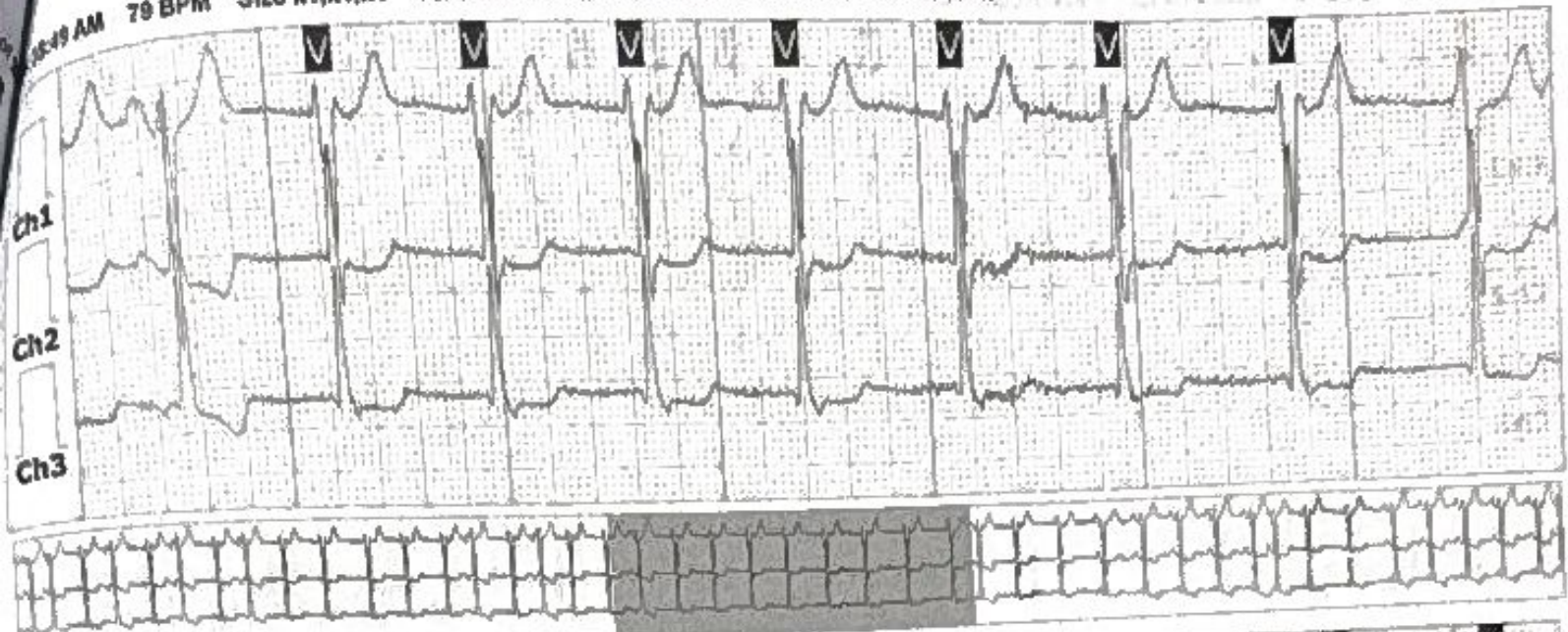
02:21:51 AM 70 BPM Size x1,x1,x1 Interpolated PVC



SELECTED STRIPS

7:05:49 AM 79 BPM Size x1,x1,x1 Ventricular Run - VENTRICULAR ESCAPE RHYTHM

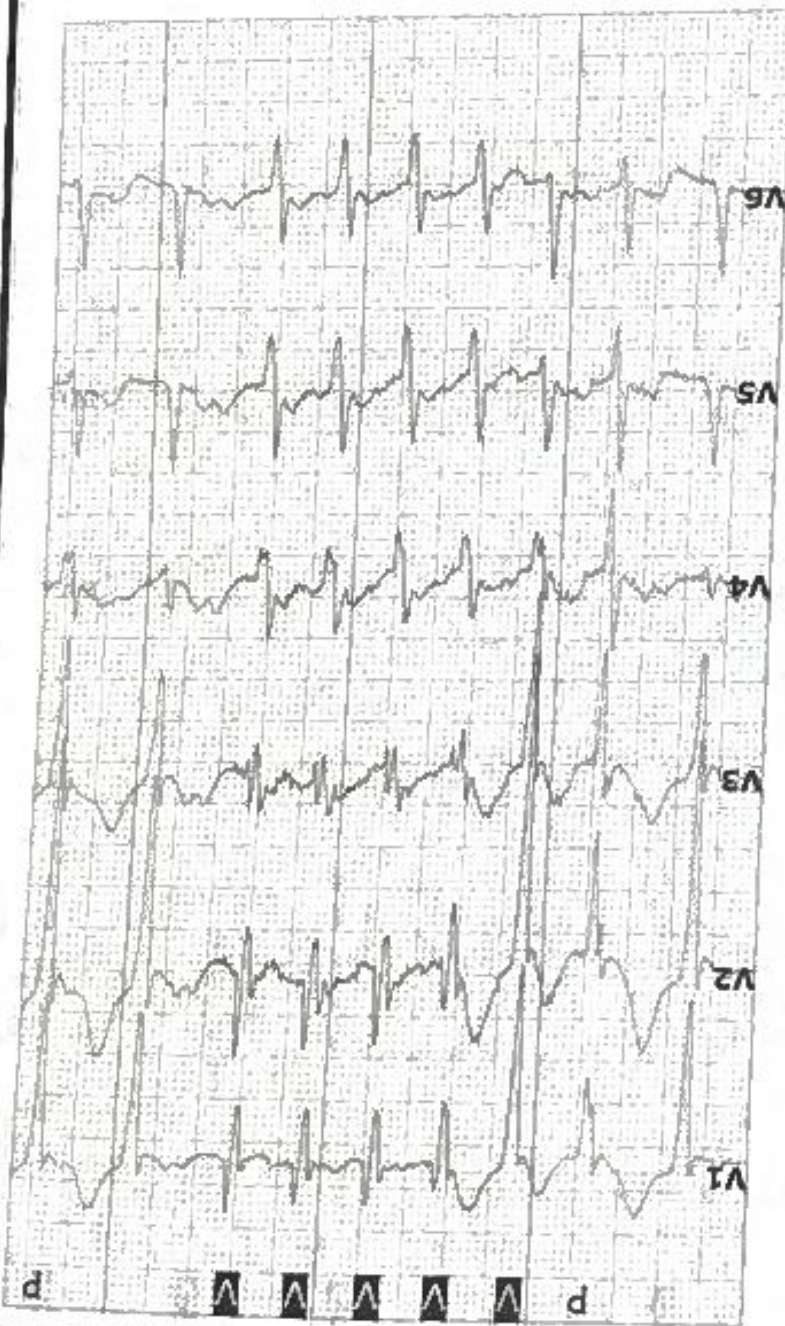
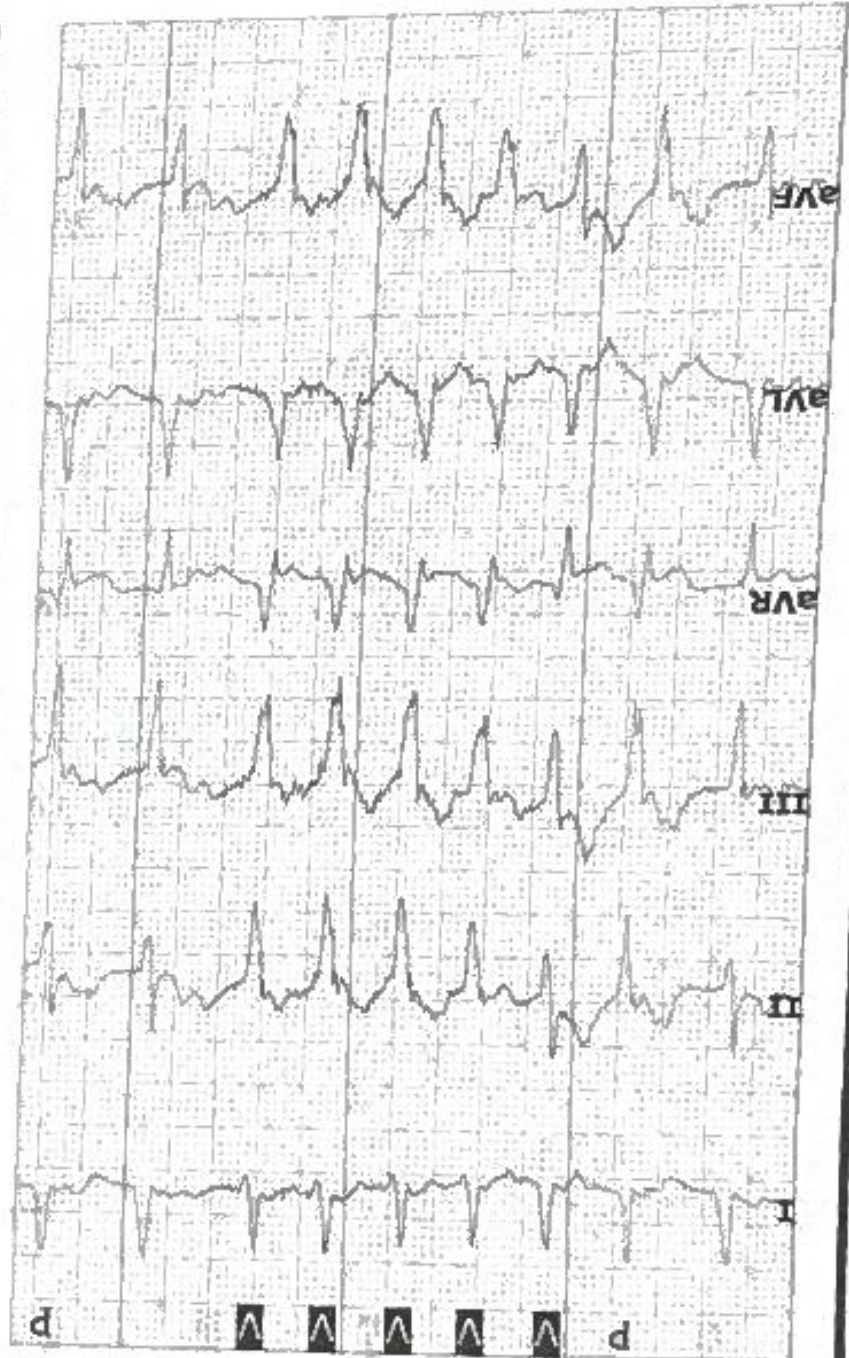
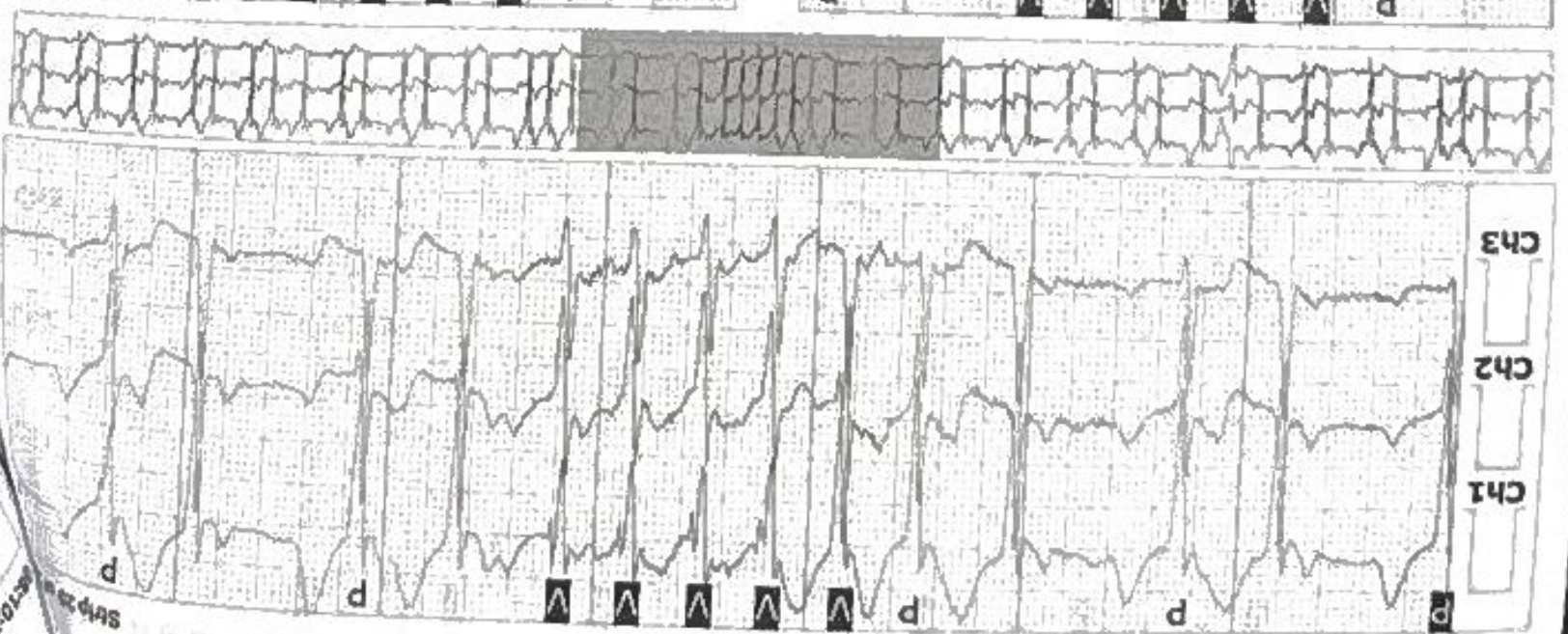
Strip 19 of 23



## SELECTED STRIPS

07:17:00 AM 129 BPM Size x1,x1,x1 Ventricular Run

CH3  
CH2  
CH1



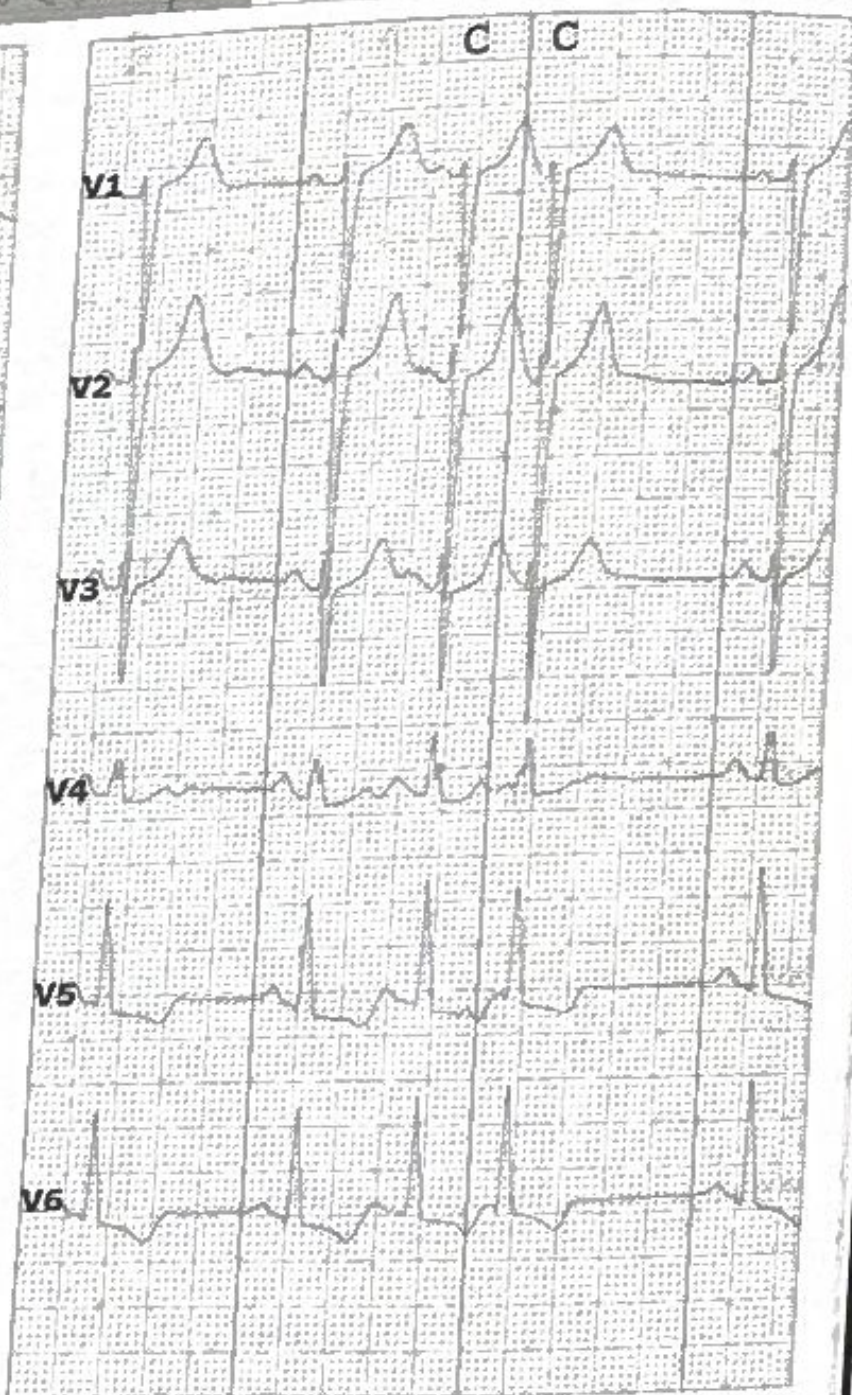
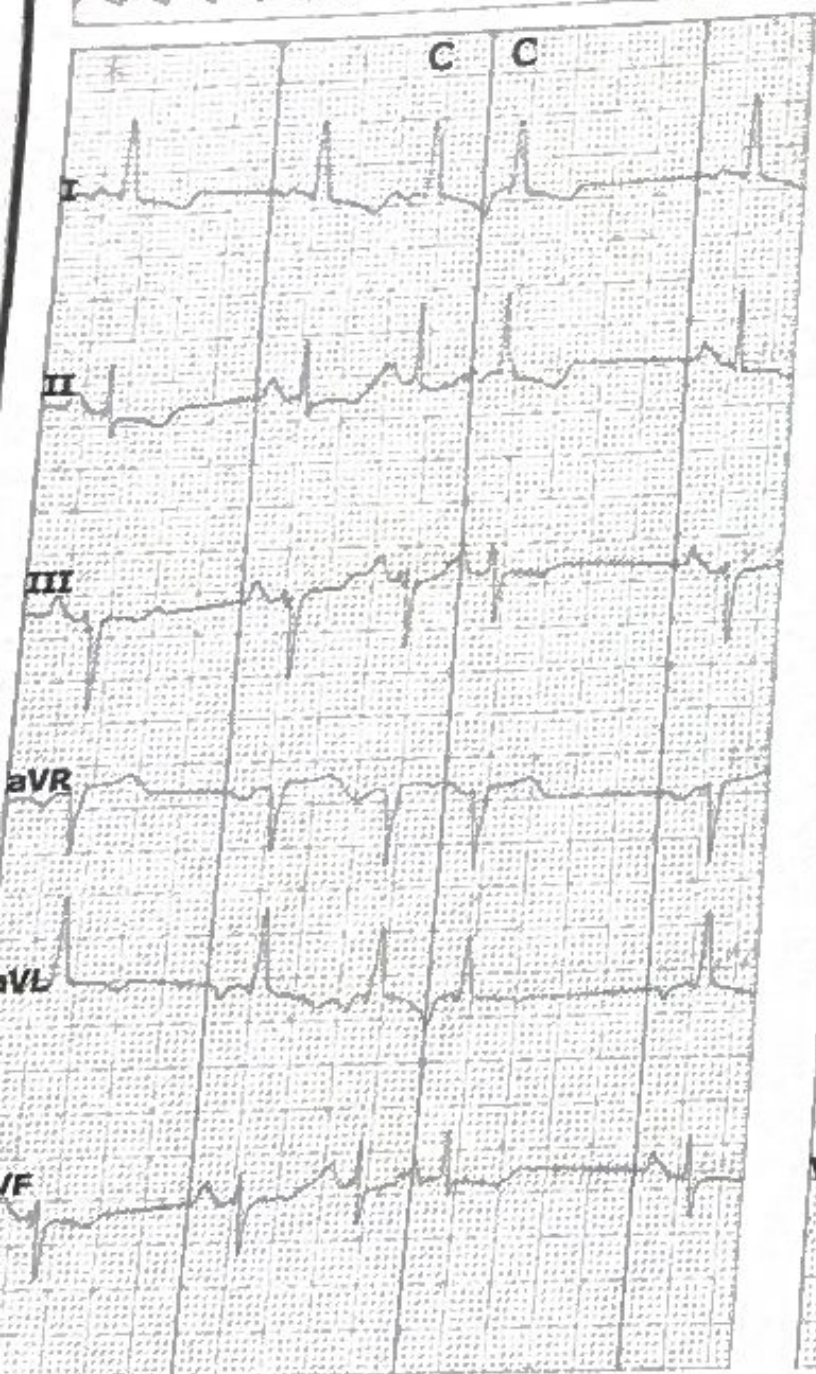
Serial #: R960

Patient Name : SABHAJIT YADAV

# SELECTED STRIPS

09:02:13 AM 80 BPM Size x1,x1,x1 Atrial Pair

Strip 22 of 25

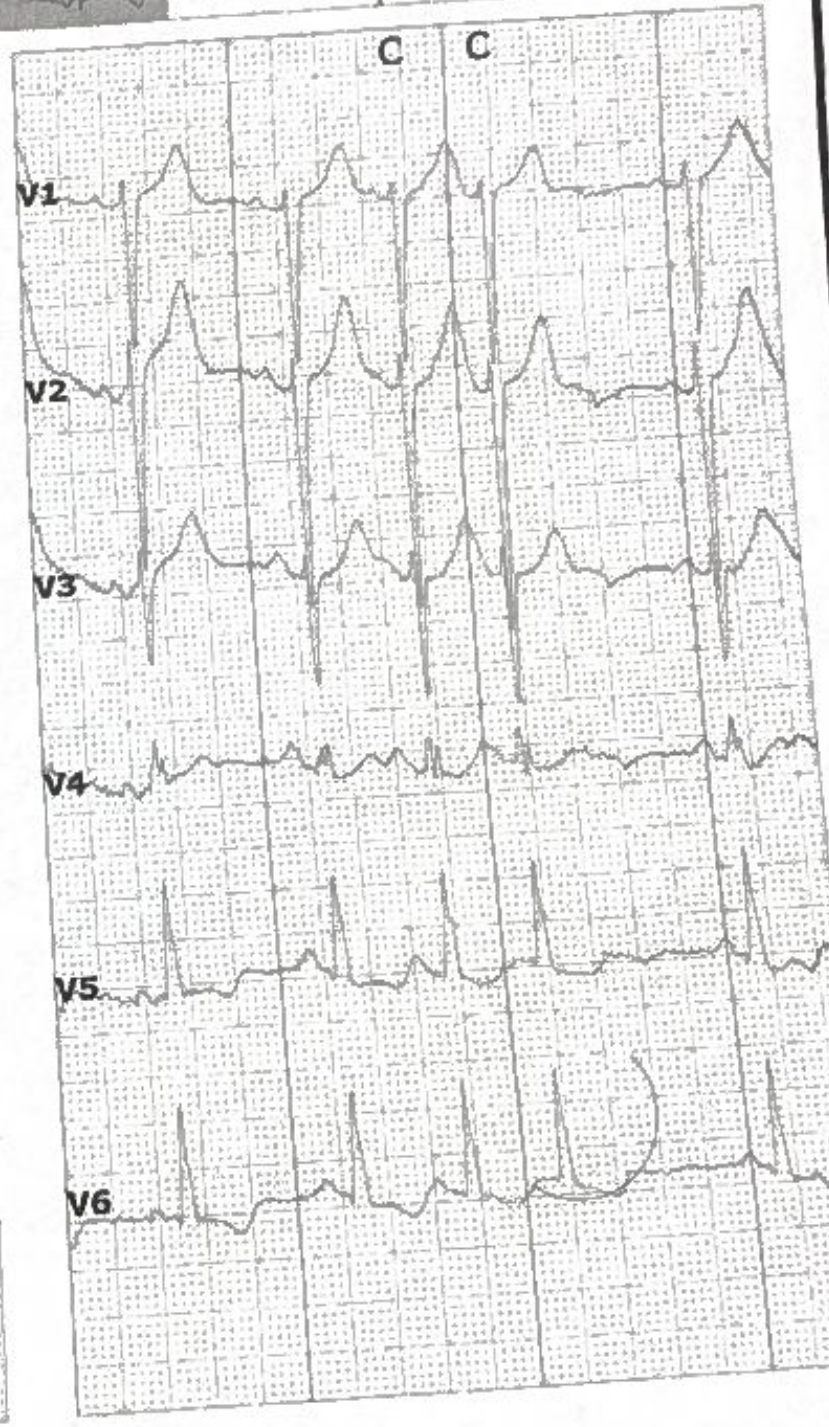
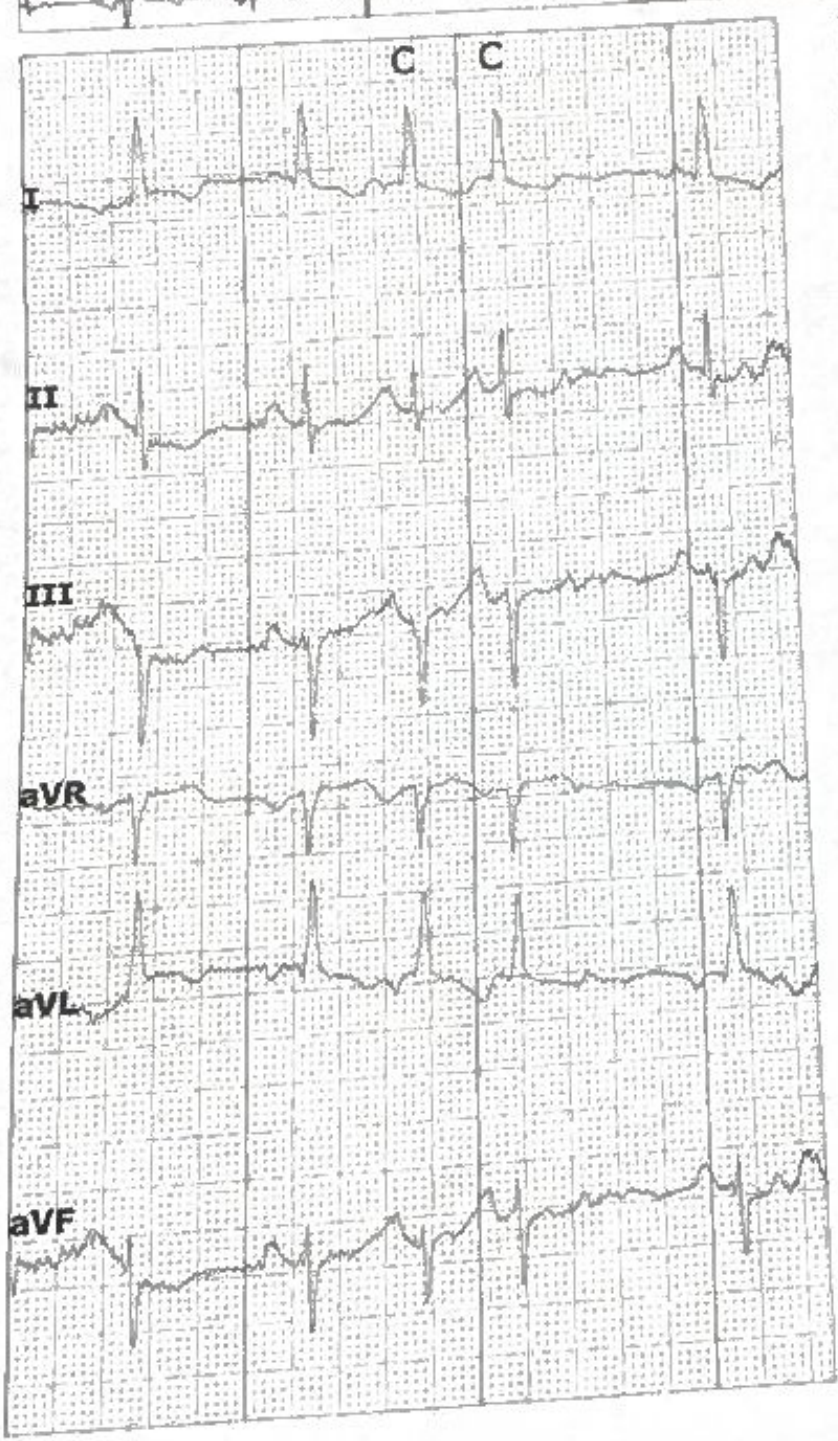
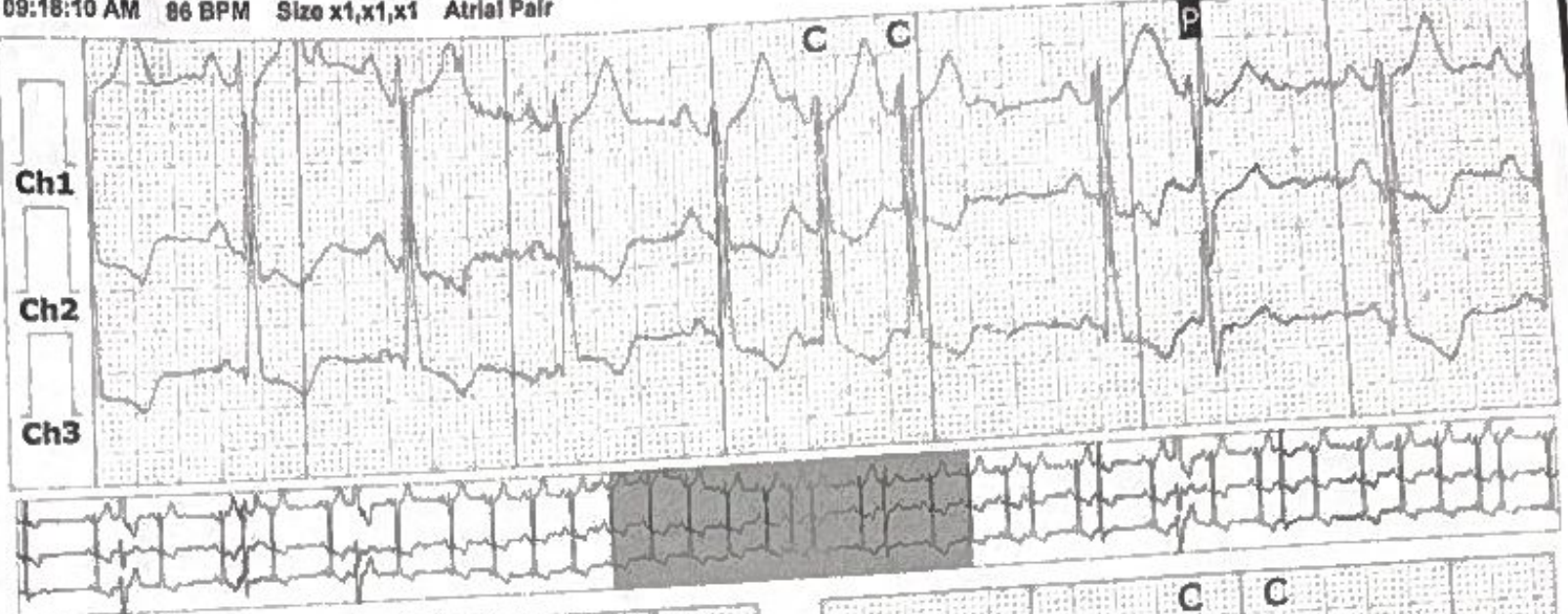


Serial #: 5960

SELECTED STRIPS

Strip 23 of 23

09:18:10 AM 86 BPM Size x1,x1,x1 Atrial Pair





# CHRISTIAN MEDICAL COLLEGE VELLORE



## OUTPATIENT SERVICES - ORDER FOR OUTPATIENT MEDICATIONS

No. **631535P** 52 M Age Hosp. No. Unit  
**BABHAJIT YADAV**

|   |                      |   |   |   |       |
|---|----------------------|---|---|---|-------|
| 1 | Aspirin - AC (75/10) | 0 | 0 | 1 |       |
| 2 | Carloc 3.125         | 1 | 0 | 1 |       |
| 3 | DVTOR 10             | 1 | 0 | 0 |       |
| 4 | EPTUJ 25             | 1 | 0 | 0 | x 100 |
| 5 | DABECUFUZW 10        | 1 | 0 | 0 |       |
| 6 | CARDACE 25           | 0 | 0 | 1 |       |

\* Brand not to be substituted

Date :

Signature of Doctor:

Medical Registration No. :

Note : Please tick the appropriate Pharmacy at the back side of the slip (PTO)

FORM / PHARM / 003 / P / 03 / 012012

MAT CODE - 98

## VENTRICULAR EVENTS

## Ventricular Ectopic Profile

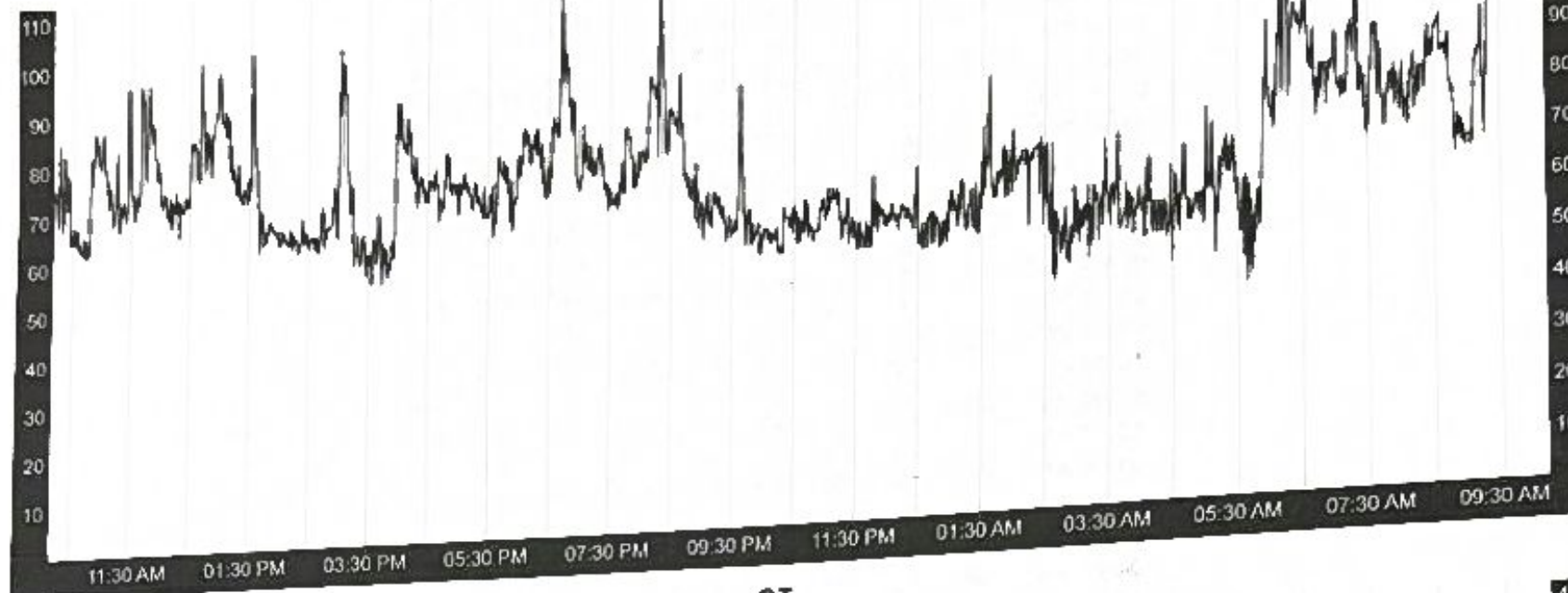
| Time Ending | HR Min | HR Avg | HR Max | VE Total | VE Single | VE Late 10% | VRUN Events | VRUN Beats | Max BPM | Max Len | Cplt All | Tplt On | R on T Rate | Bigem Beats 2 Cycles | Trigem Beats 2 Cycles | PVC Single 16% | PVC Interm |
|-------------|--------|--------|--------|----------|-----------|-------------|-------------|------------|---------|---------|----------|---------|-------------|----------------------|-----------------------|----------------|------------|
| Setting     |        |        |        |          |           |             |             |            |         |         |          |         |             |                      |                       |                |            |
| 11:00 AM    | 58     | 73     | 88     | 455      | 5         | 1           | 2           | 14         | 162     | 10      | 26       | 0       | 0           | 101                  | 0                     | 281            | 23         |
| 12:00 PM    | 60     | 78     | 97     | 1296     | 48        | 0           | 4           | 24         | 125     | 8       | 25       | 10      | 0           | 854                  | 3                     | 285            |            |
| 01:00 PM    | 53     | 70     | 97     | 1345     | 4         | 1           | 14          | 57         | 145     | 5       | 19       | 23      | 0           | 564                  | 0                     | 609            |            |
| 02:00 PM    | 59     | 75     | 103    | 773      | 8         | 1           | 1           | 4          | 92      | 4       | 25       | 5       | 0           | 345                  | 4                     | 345            |            |
| 03:00 PM    | 58     | 64     | 80     | 433      | 2         | 0           | 1           | 4          | 99      | 4       | 5        | 2       | 0           | 195                  | 0                     | 213            |            |
| 04:00 PM    | 48     | 67     | 108    | 942      | 6         | 0           | 3           | 13         | 61      | 5       | 65       | 21      | 0           | 374                  | 7                     | 344            |            |
| 05:00 PM    | 61     | 75     | 90     | 1299     | 2         | 0           | 5           | 24         | 103     | 8       | 10       | 9       | 0           | 647                  | 4                     | 585            |            |
| 06:00 PM    | 59     | 70     | 83     | 1254     | 16        | 18          | 67          | 242        | 75      | 6       | 103      | 94      | 0           | 134                  | 20                    | 332            |            |
| 07:00 PM    | 65     | 81     | 110    | 1937     | 8         | 2           | 41          | 189        | 129     | 8       | 80       | 83      | 0           | 603                  | 54                    | 588            |            |
| 08:00 PM    | 59     | 73     | 83     | 1193     | 1         | 4           | 10          | 41         | 76      | 5       | 78       | 59      | 0           | 336                  | 16                    | 452            |            |
| 09:00 PM    | 58     | 79     | 112    | 1625     | 7         | 0           | 7           | 29         | 94      | 5       | 29       | 25      | 0           | 861                  | 44                    | 514            |            |
| 10:00 PM    | 51     | 62     | 96     | 554      | 4         | 0           | 0           | 0          | 0       | 0       | 9        | 5       | 0           | 278                  | 8                     | 228            |            |
| 11:00 PM    | 49     | 59     | 75     | 519      | 10        | 2           | 1           | 5          | 61      | 5       | 6        | 5       | 0           | 148                  | 0                     | 330            |            |
| 12:00 AM    | 50     | 60     | 75     | 434      | 5         | 1           | 3           | 12         | 66      | 4       | 6        | 1       | 0           | 142                  | 0                     | 252            |            |
| 01:00 AM    | 48     | 58     | 74     | 557      | 5         | 1           | 0           | 0          | 0       | 0       | 11       | 3       | 0           | 175                  | 13                    | 313            |            |
| 02:00 AM    | 53     | 65     | 92     | 944      | 8         | 4           | 8           | 33         | 70      | 5       | 16       | 8       | 0           | 432                  | 0                     | 215            |            |
| 03:00 AM    | 53     | 65     | 92     | 944      | 8         | 4           | 8           | 33         | 70      | 5       | 16       | 8       | 0           | 432                  | 0                     | 215            |            |
| 04:00 AM    | 44     | 58     | 77     | 879      | 2         | 1           | 0           | 0          | 0       | 0       | 9        | 2       | 0           | 489                  | 0                     | 308            |            |
| 05:00 AM    | 44     | 58     | 77     | 879      | 2         | 1           | 0           | 0          | 0       | 0       | 9        | 2       | 0           | 489                  | 0                     | 308            |            |
| 06:00 AM    | 44     | 58     | 77     | 879      | 2         | 1           | 0           | 0          | 0       | 0       | 9        | 2       | 0           | 489                  | 0                     | 308            |            |
| 07:00 AM    | 44     | 58     | 77     | 879      | 2         | 1           | 0           | 0          | 0       | 0       | 9        | 2       | 0           | 489                  | 0                     | 308            |            |
| 08:00 AM    | 41     | 64     | 92     | 1018     | 2         | 16          | 4           | 19         | 56      | 7       | 38       | 16      | 0           | 449                  | 16                    | 284            |            |
| 09:00 AM    | 70     | 88     | 103    | 1638     | 27        | 3           | 7           | 38         | 90      | 7       | 24       | 10      | 0           | 852                  | 13                    | 555            |            |
| 10:00 AM    | 70     | 82     | 114    | 1760     | 9         | 2           | 7           | 28         | 182     | 5       | 108      | 25      | 0           | 694                  | 20                    | 437            |            |
| 11:00 AM    | 62     | 80     | 91     | 1479     | 0         | 0           | 1           | 4          | 130     | 4       | 33       | 4       | 0           | 738                  | 29                    | 511            |            |
| 12:00 AM    | 59     | 78     | 85     | 383      | 0         | 0           | 0           | 0          | 0       | 0       | 2        | 1       | 0           | 168                  | 6                     | 140            |            |
| Total       | 41     | 70     | 114    | 24362    | 131       | 59          | 178         | 788        | 182     | 10      | 744      | 425     | 0           | 10203                | 263                   | 8454           | 155        |

Patient Name : SABHAJIT YADAV

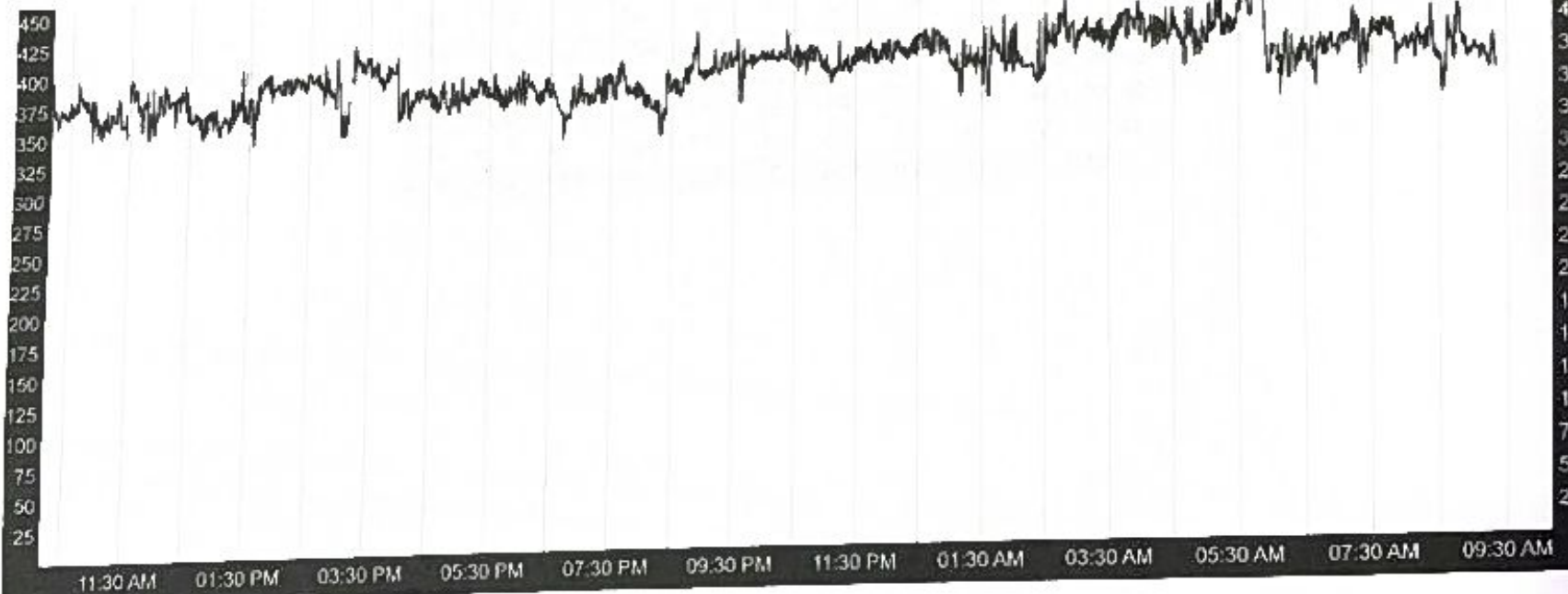
# QT ANALYSIS SUMMARY

Special Event Graphics

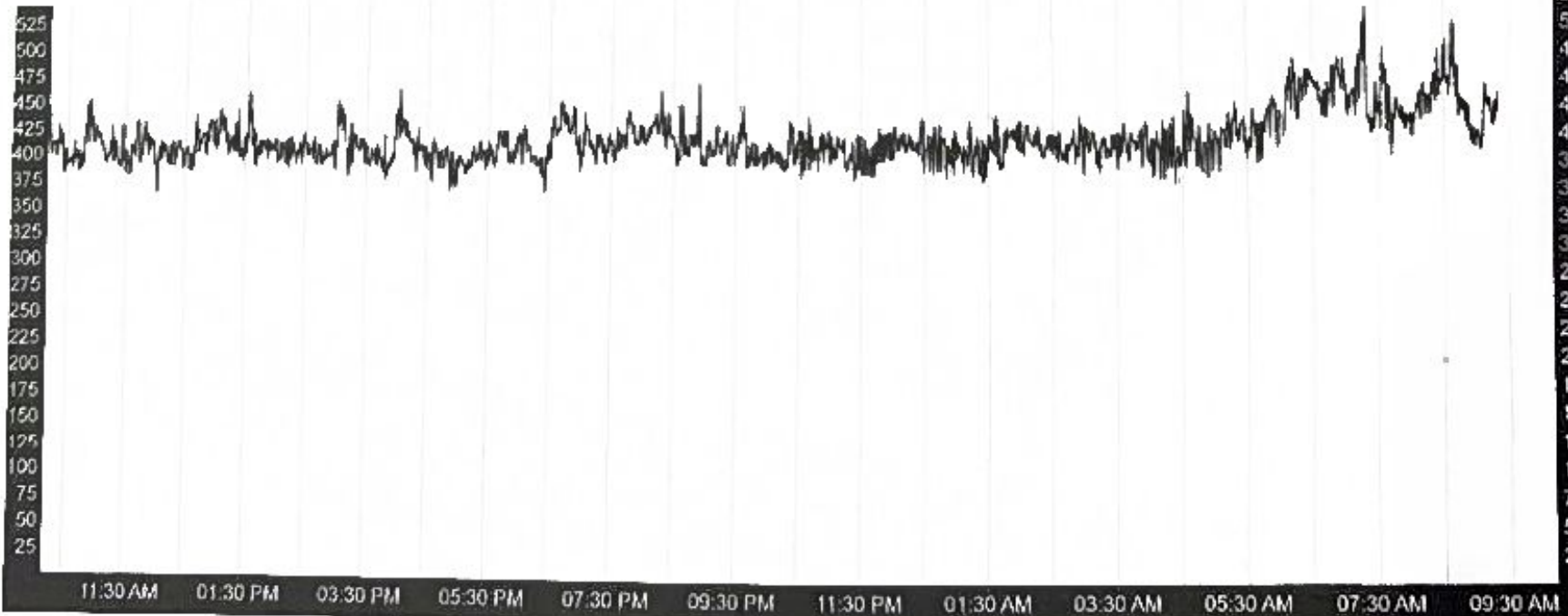
Heart Rate



QT



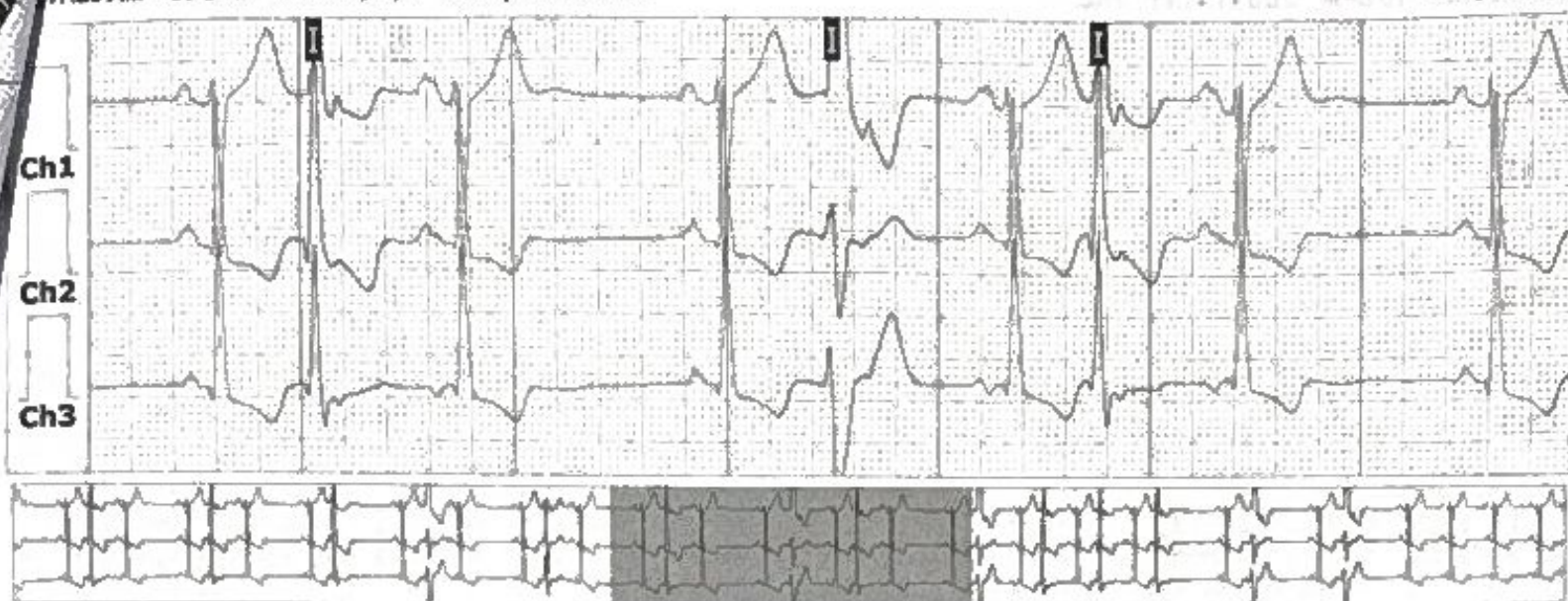
QTc



# SELECTED STRIPS

17:25 AM 80 BPM Size x1,x1,x1 Interpolated PVC

Strip 7 of 23



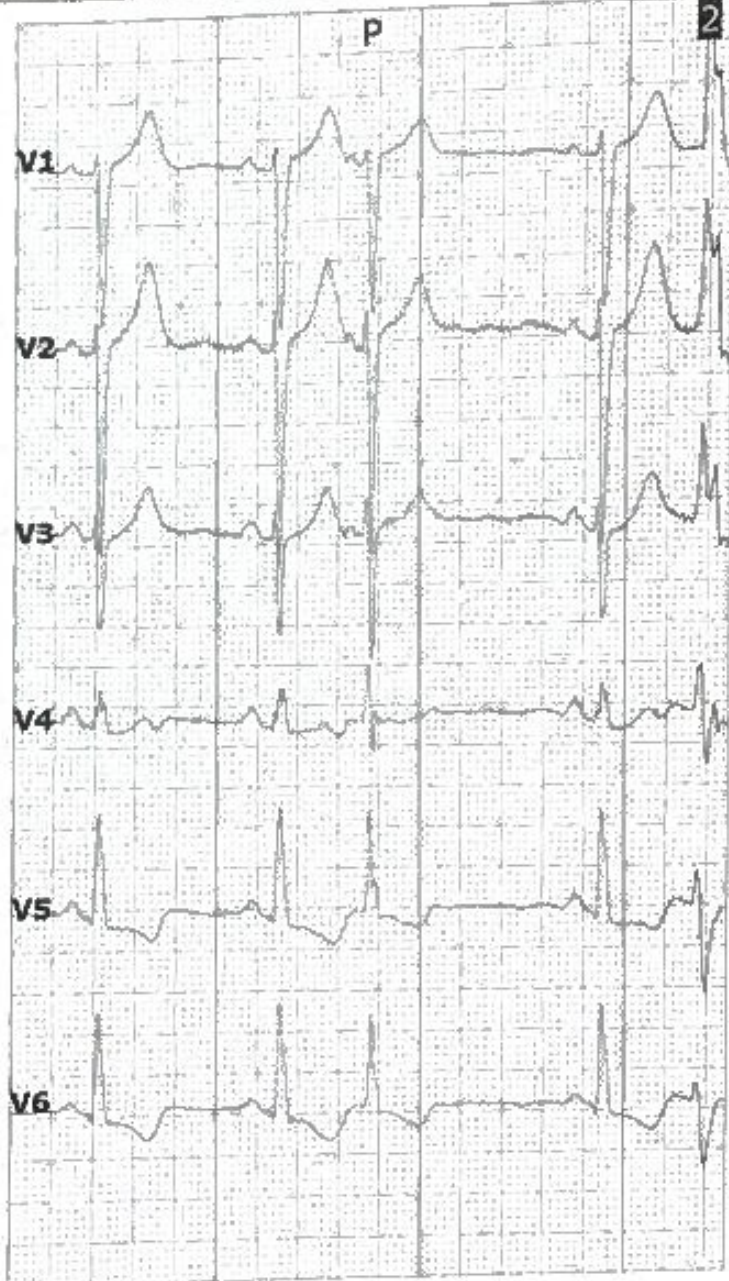
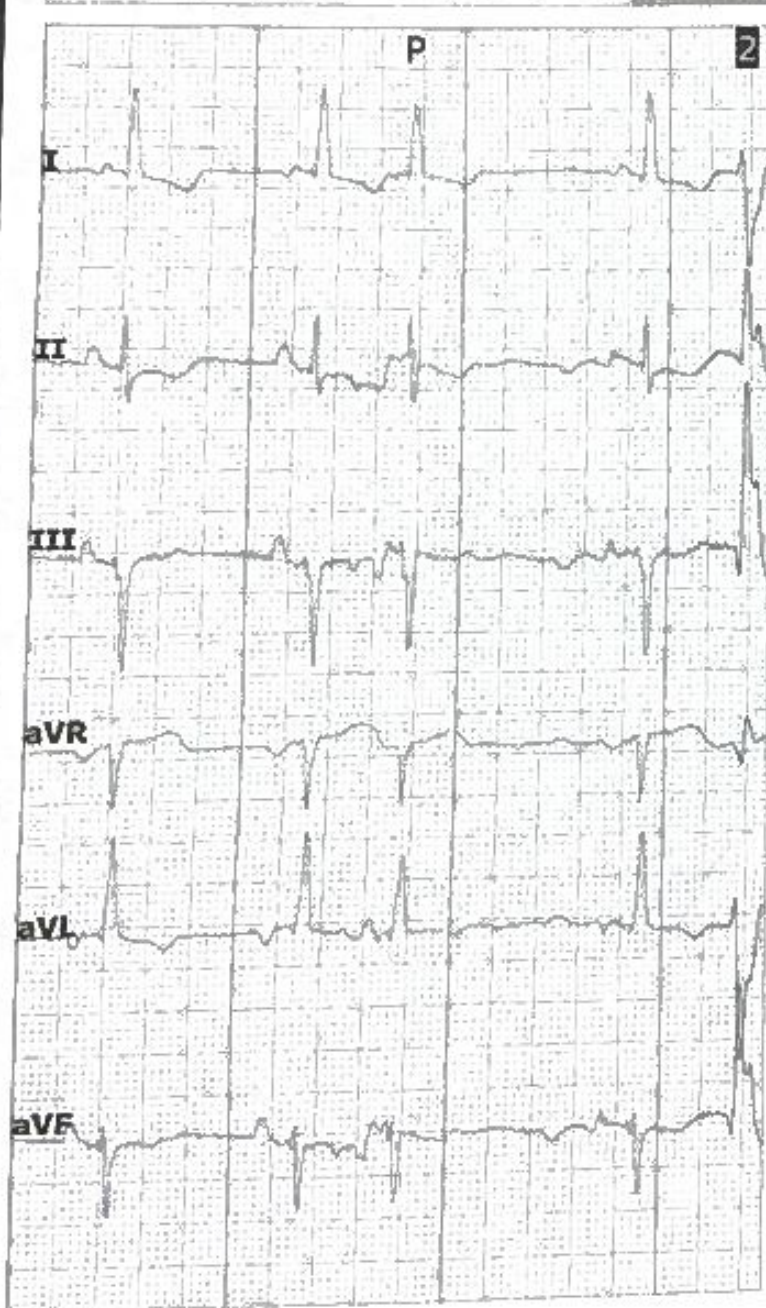
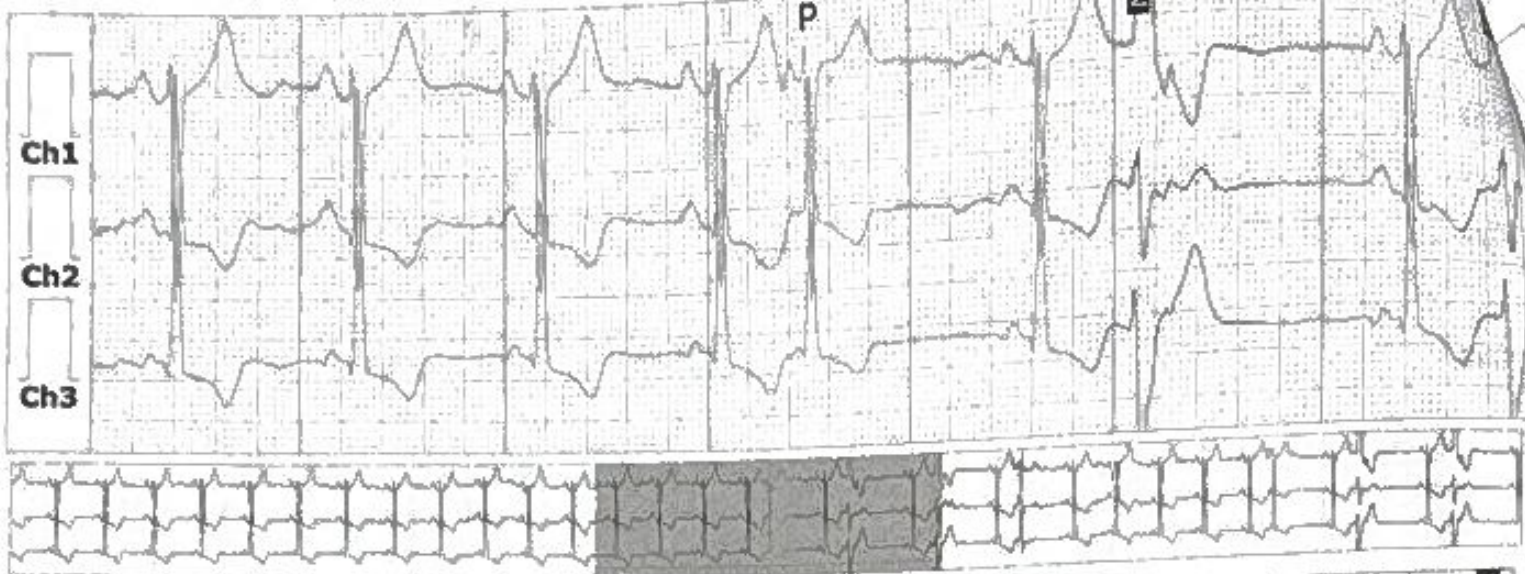
Patient Name : SABHAJIT YADAV

# SELECTED STRIPS

10:13:21 AM 70 BPM Size x1,x1,x1 PAC

Strip 8

36:02 AM 67 BPM

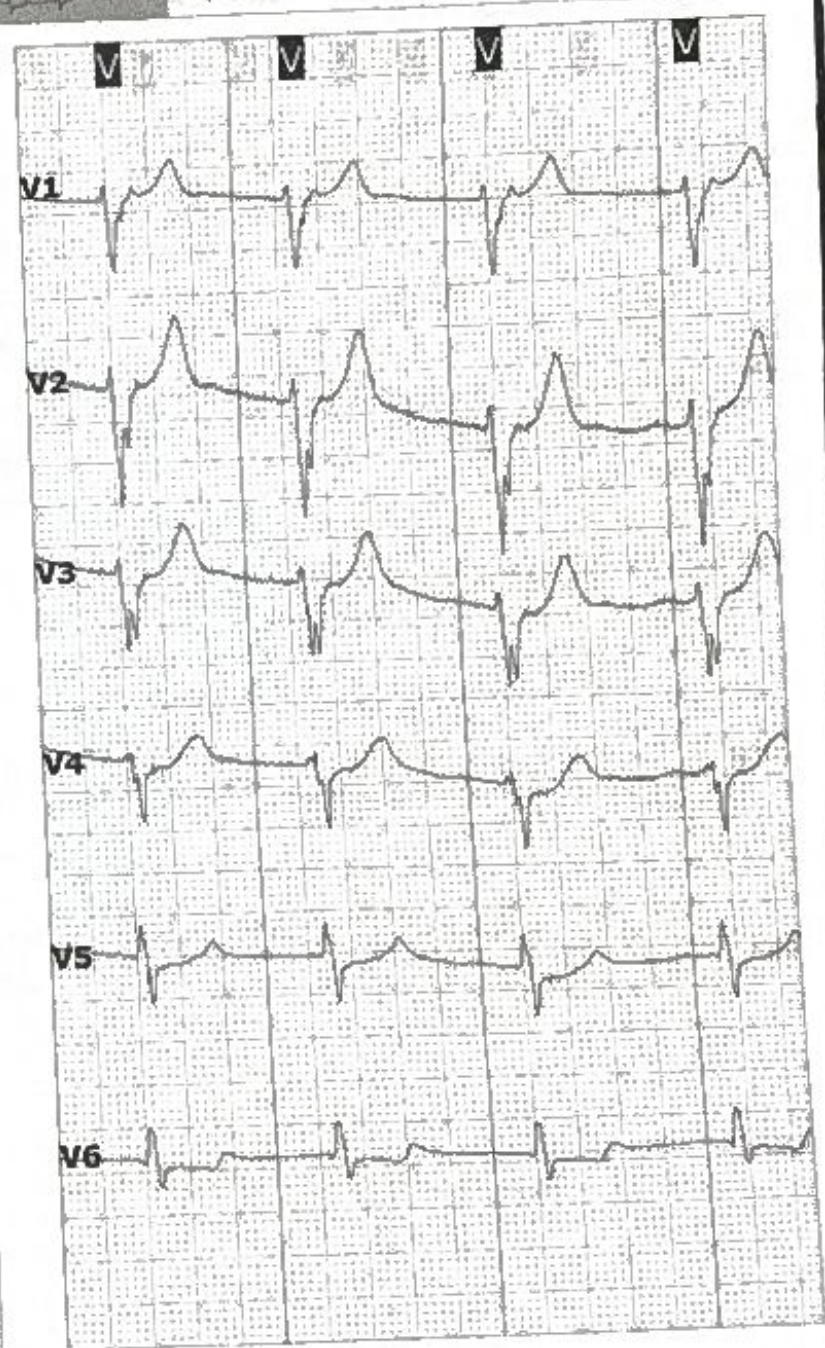
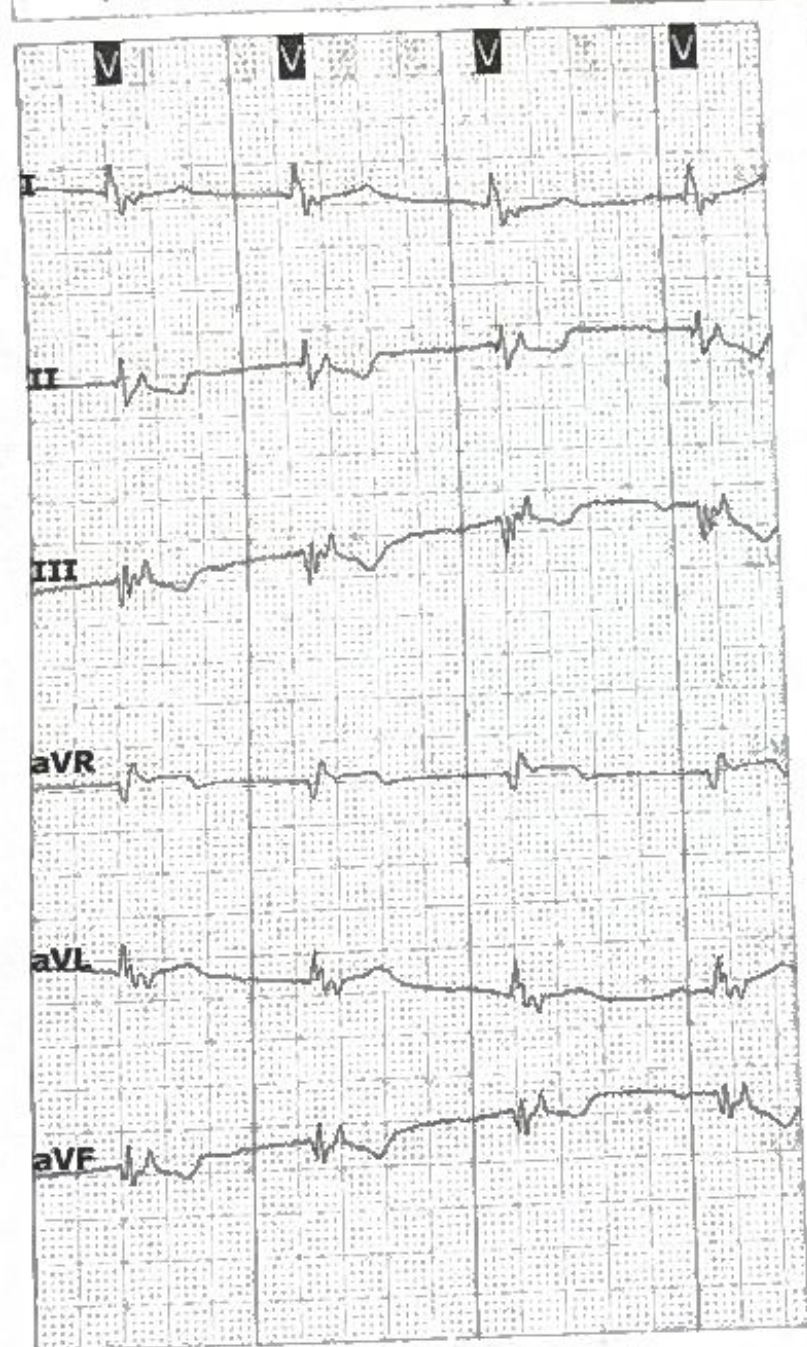
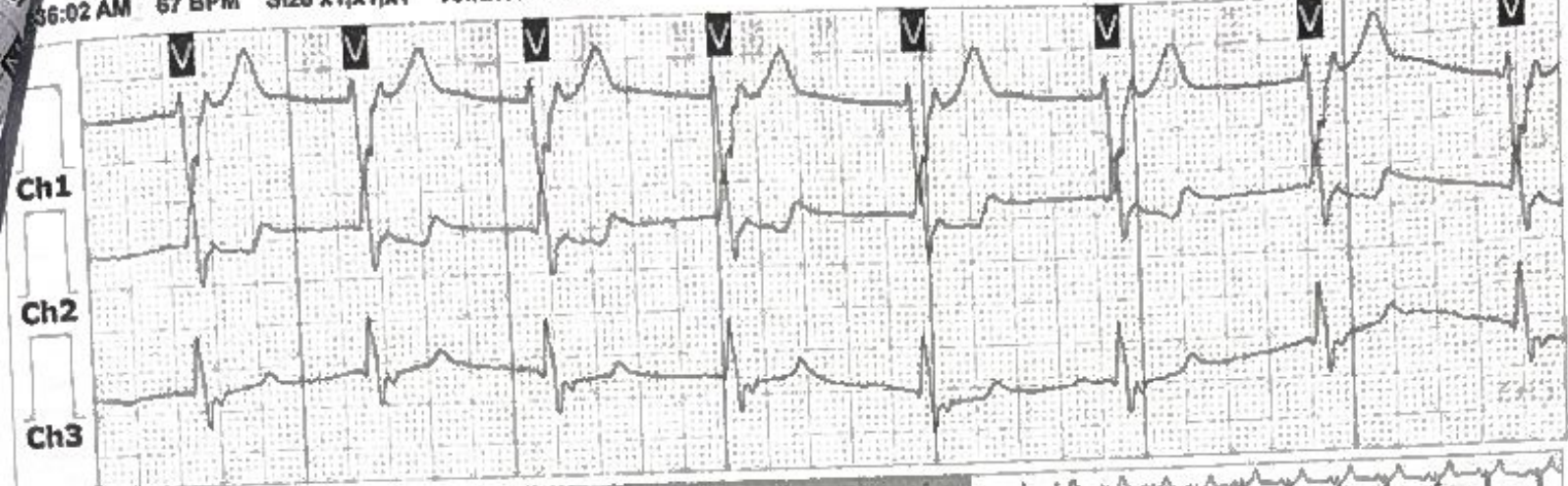


Serial # : 5960

# SELECTED STRIPS

Strip 9 of 23

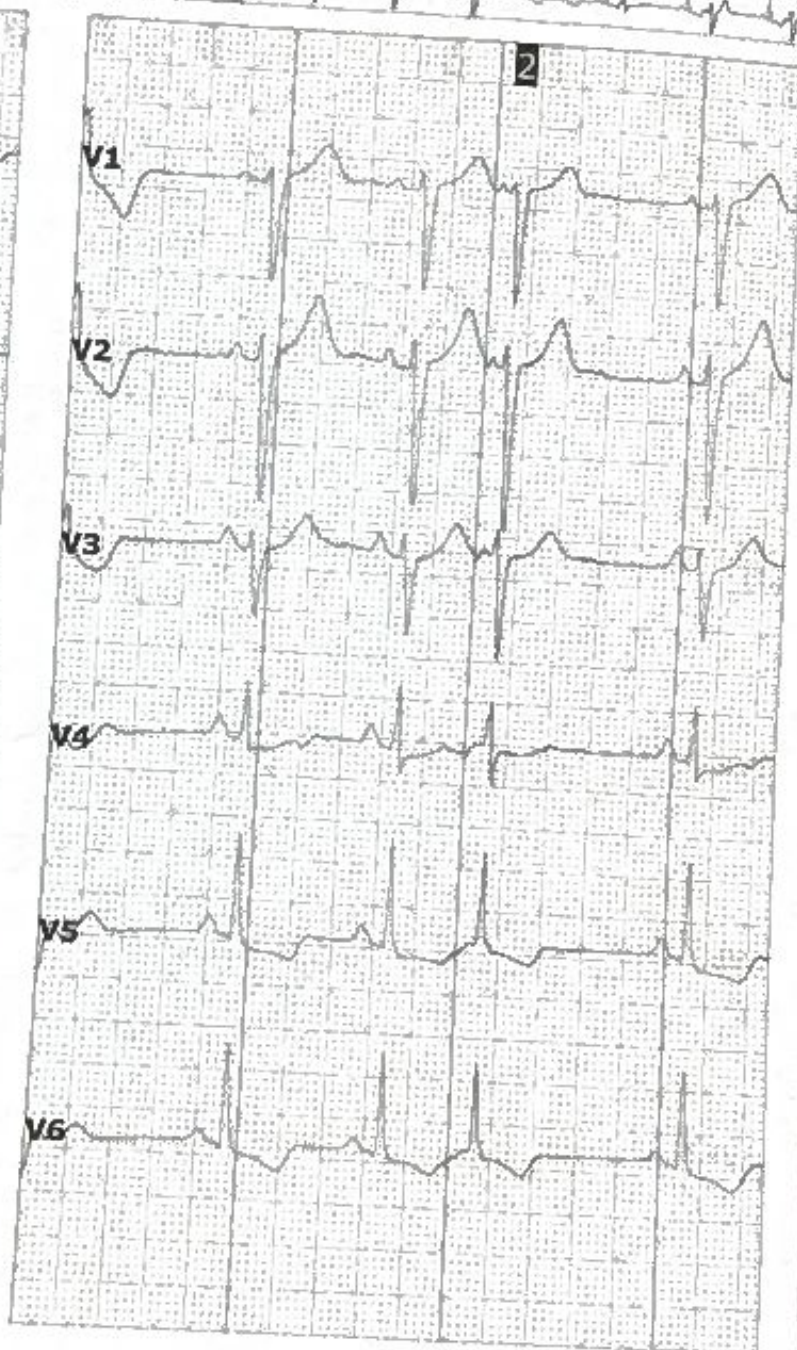
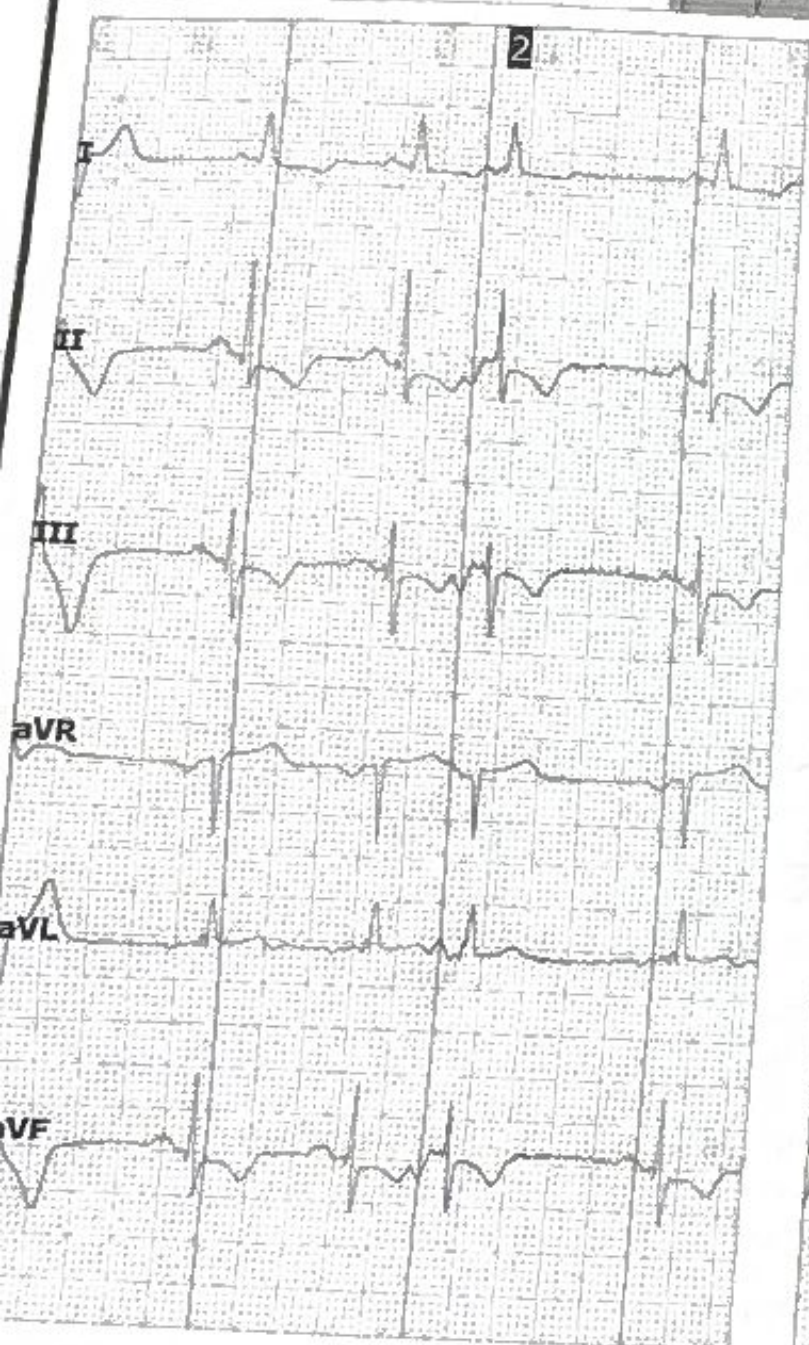
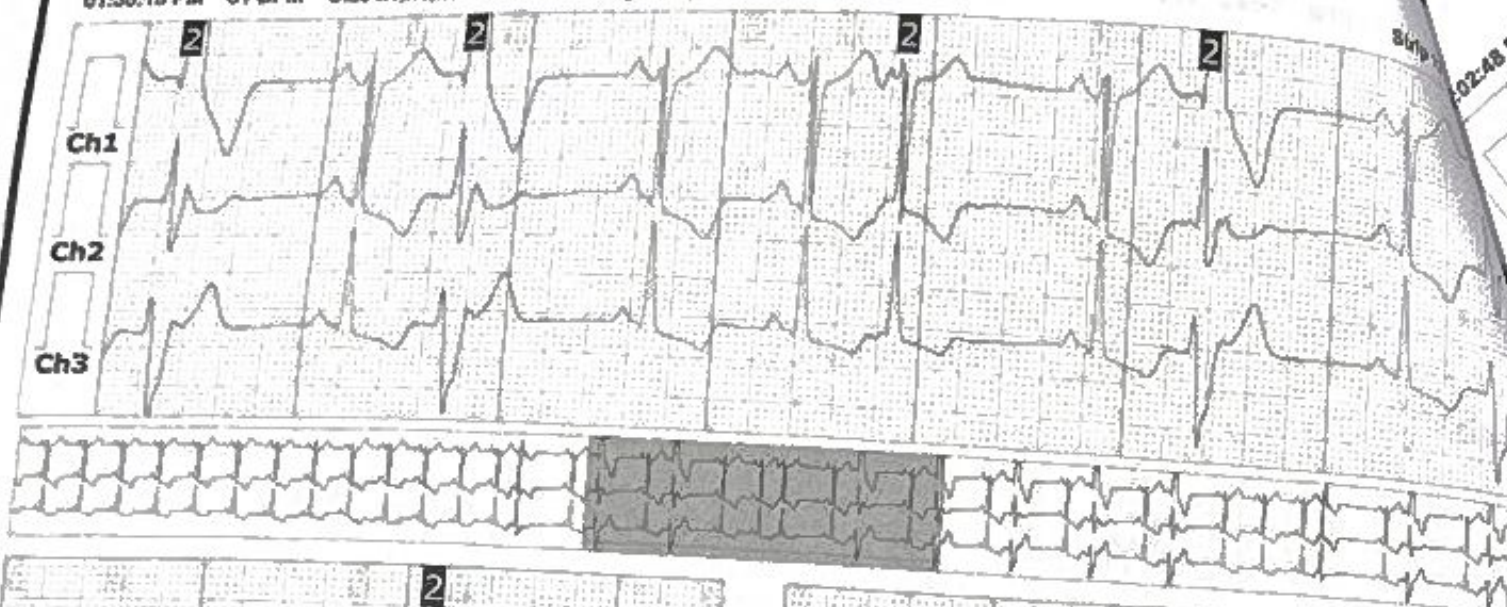
36:02 AM 67 BPM Size x1,x1,x1 Ventricular Run



Patient Name : SABHAJIT YADAV

# SELECTED STRIPS

01:30:18 PM 81 BPM Size x1,x1,x1 Ventricular Bigeminy - LEFT SIDE PAIN

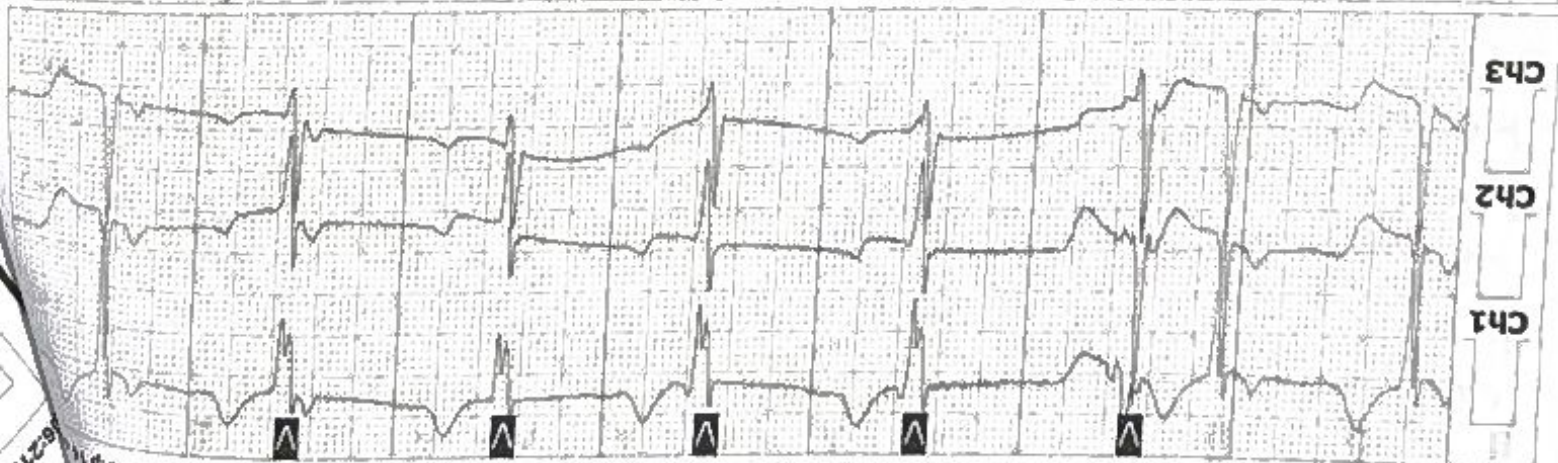


Serial # : 5960

Patient Name : SABHAJIT YADAV

SELECTED STRIPS

05:56:13 PM 67 BPM Size x1,x1,x1 Ventricular Run - VENTRICULAR ESCAPE RHYTHM

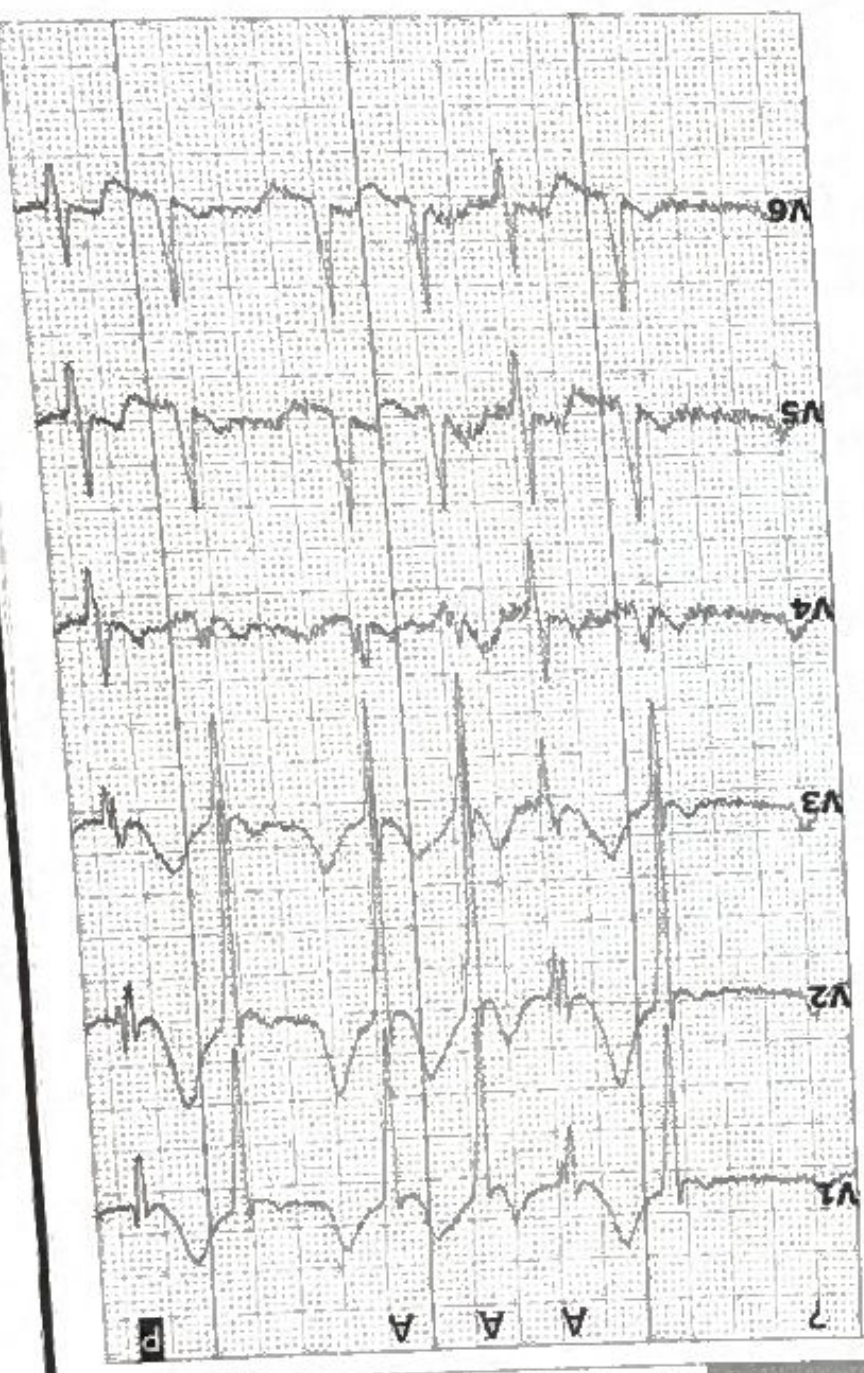
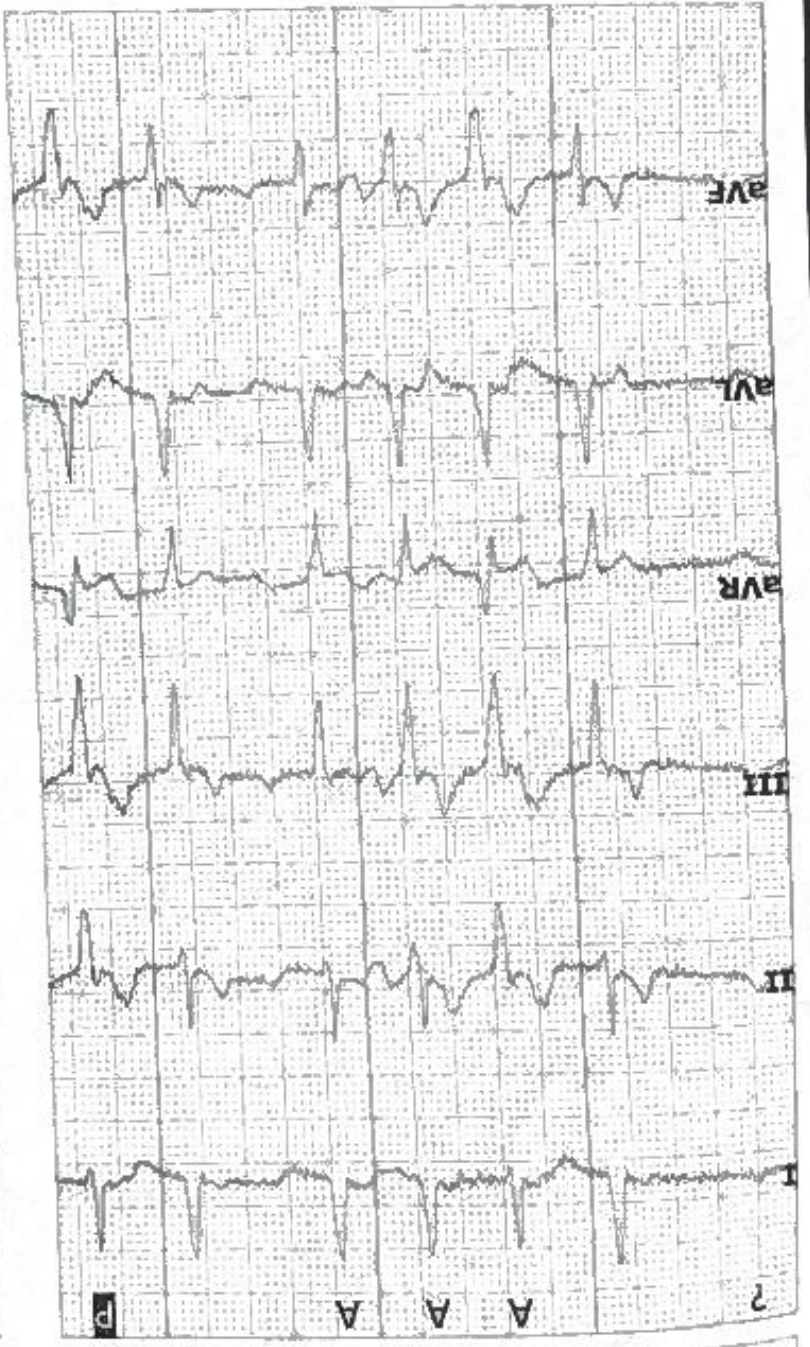
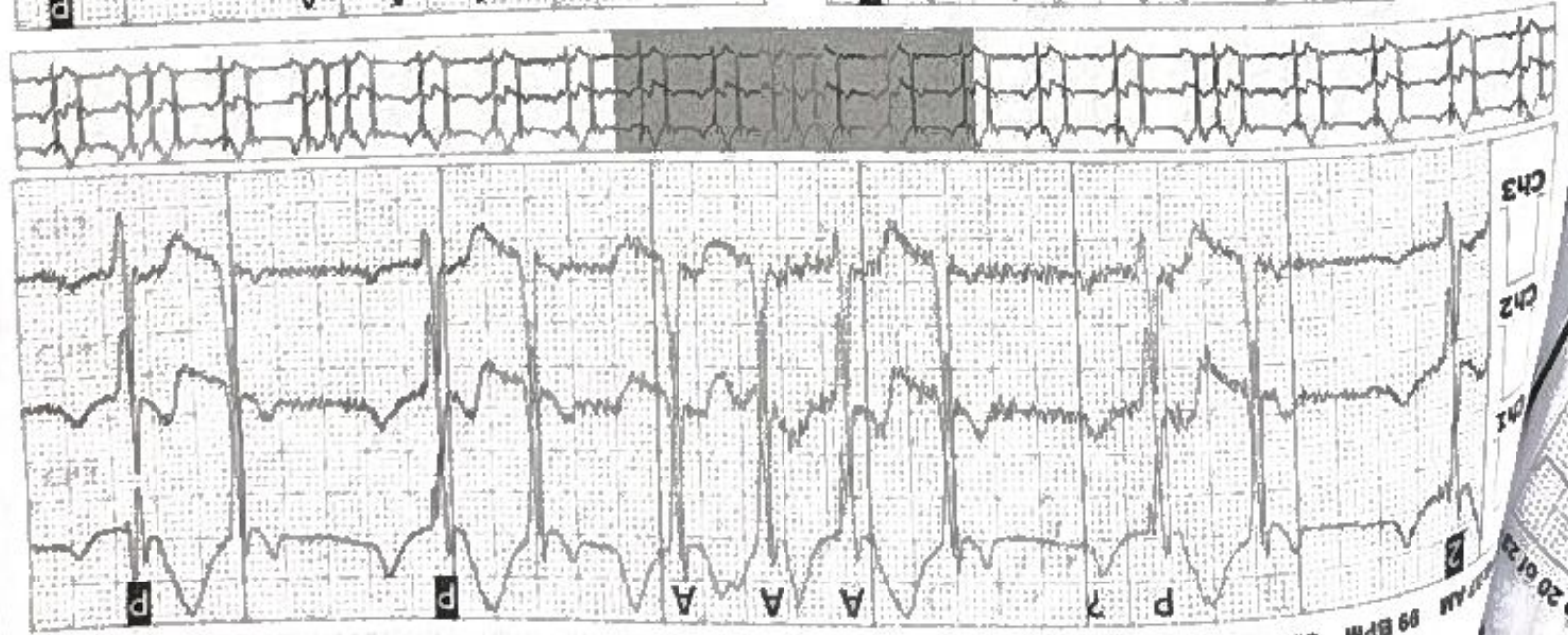


Serial # : 5960

SELECTED STRIPS

Size x1, x1, x1 Atrial Run

Strip 21 of 23



Patient Name : Mr. Subhajit Yadav  
 Exam : Colour Doppler Echocardiography  
 Ref. By : Dr. Subhas Mukherjee, MD

Age : 55 Yrs  
 Gender : Male  
 Exam Date : 26.03.2025

**DEPARTMENT OF CARDIOLOGY**

**Echocardiography report**

**A  
 MEASUREMENTS**

|                                |      |                      |
|--------------------------------|------|----------------------|
| Aortic Root Dimension          | : 31 | (20...37mm)          |
| Left Atrial Dimension          | : 42 | (19...40mm)          |
| Right Vent. Dimension          | : 23 | (07..23mm)           |
| Left Vent. Dimension ED        | : 56 | (37...56mm)          |
| Left Vent. Dimension ES        | : 46 | (22...40mm)          |
| Int. Vent. Septum Thickness ED | : 11 | ES 12 ED (06..12mm)  |
| Lv. Post Wall Thickness : ED   | : 11 | ES 12 ED (06...11mm) |

**B**

**INDICES OF LEFT VENTRICULAR FUNCTION**

|                               |            |          |
|-------------------------------|------------|----------|
| Left Vent. Ejection fractions | : 44%      | (50-80%) |
| Mitral E- Septal Separation   | : > 0.9 cm | < 0.9 cm |

Cont..... Pg. II.

Patient Name : Mr. Subhajit Yadav Age : 55 Yrs  
Exam : Colour Doppler Echocardiography Gender : Male  
Ref. By : Dr. Subhas Mukherjee, MD Exam Date : 26.03.2025

## DISCUSSION

### M-MODE / 2 DIMENSIONAL / DOPPLER

S/P - C/O - SOB AT REST AND ON EXERTION +  
H/O - DM +

### M-MODE & 2D

1. Upper normal left ventricular size with global hypokinesia and reduced left ventricular systolic function ( LVEF = 44% ).
2. Dilated left atrium. Normal right ventricle, right atrium and aorta.
3. Pulmonary valve echogram suggestive of pulmonary arterial hypertension. ( PAH + )
4. Both anterior mitral leaflet (AML) and posterior mitral leaflet (PML) mildly thickened.
5. Mildly thickened aortic valve leaflets with normal aortic valve opening. Aortic sclerosis present.
6. Normal tricuspid valve.
7. Intact interatrial & interventricular septum. No PDA seen.
8. No evidence of intra cardiac clot, effusion, thrombus or vegetation.
9. IVC normal in size (19 mm) & normally collapsing with respiration.

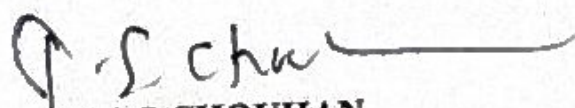
### DOPPLER

1.  $V_{max}$  across aortic valve at present = 1.7M/sec.
2. Grade II/ IV mitral regurgitation.
3. Mild pulmonary regurgitation.
4. Mild tricuspid regurgitation. ( Calculated PASP at present = 46 mm Hg.)

### IMPRESSION

1. Left ventricular wall motion defect as described above.
2. Upper normal left ventricular size with reduced left ventricular systolic function ( LVEF = 44% ).
3. Mild TR. Mild PAH present.
4. Grade II/ IV MR.
5. Mild PR.
6. Dilated left atrium.
7. Aortic sclerosis present.

Advice : 1. Regular clinical and Echocardiographic follow up.  
2. Further detailed study in a tertiary care cardiac centre to rule out CAD.



DR.P.S.CHOUHAN  
M.B.B.S(Cal),M.D (medicine,Cal),  
D.N.B (Cardiology, PGT at NHI New Delhi),

Pg. .... II. ....

## VALVES

### MITRAL:

EF SLOPE (50-150 MM/EEG) 70 DE 1.4 FLOW (0.6-1.3M/SEC)

ANT. LEAFLET: -----

POSTLEAFLET: -----

### TRICUSPID:

EF SLOPE (50-150 MM/EEG) DE FLOW (0.3 - 0.6 M/SEC)

ANT. LEAFLET: -----

POSTLEAFLET: -----

### PULMONARY: PAH +

EF SLOPE (6-11 MM/SEC) "A" WAVE (2.7 MM) FLOW (1-1.5 M/SEC)

### AORTIC:

CUSP OPENING: 1.5 FLOW 1.7 (1.0-1.7M/SEC)

CLOSURE LINE: ----- (CUSPS) Mildly thickened

LEFT VENTRICULAR WALL MOTION: As discussed ahead

**CLINILAB**

DIAGNOSTIC & IMAGING CENTRE PVT. LTD.  
NAYA BAZAR, DHANBAD  
PHONE : 9263636349, 9379797702, 9431151617  
Timing : 7 AM - 8 PM



**PATHOLOGY  
ULTRASOUND  
ECHOCARDIOGRAPHY  
X-RAY  
E.C.G  
MYELOGRAM**

Name: **SUBHAJIT YADAV**Age: **SELF**

Refd. By: DR

App:

Ref:

18.03.2025

Date:

**REPORT ON X-RAY CHEST PA VIEW**

Bronchovascular markings of the lung appear prominent.

Bilateral costophrenic angles are clear.

Transverse cardiac diameter is increased (CTR 9.5/18) with LV configuration & unfolded aorta & prominent pulmonary vascularity .

Bony thorax & hemidiaphragms are normal.

**IMPRESSION : CARDIOMEGALY (LVH).**

Suggested : Clinico-pathological correlation & Echo-study.

**Dr. YOGESH ANAND**  
MBBS,DMRD (Gold Medallist)  
(Radio-diagnosis)

**DR. S. BANERJEE**  
MBBS (CAL),DNB,  
MD (Radio-diagnosis)

**Dr. SHAMS TABREZ ALAM**  
MBBS,MD,DNB  
(Radio-diagnosis)

**Dr. A.K. SINHA**  
Con. Radiologist, MBBS,DMRD

Radiological diagnosis is based on interpretation of shadows produced by normal & abnormal tissues, these are not always conclusive and often vary with clinical course of disease or response to treatment Clinical & Pathological correlations are needed for final diagnosis. This report is not valid for medico-legal purpose. This report is a professional impression, related to this imaging only. It is not a "diagnosis" by itself & may be reviewed in case of discordant opinion or clerical discrepancy, if any.

NAME : SUBHAJIT YADAV  
Refd. By Dr. : SELF

DATE : 18.03 2025

**REPORT ON USG OF WHOLE ABDOMEN**

- LIVER** : Both lobes are normal sized with slightly echogenic parenchyma and attenuation of peripheral echoes. No IHBR/PV/HV dilatation seen. No cystic/solid mass lesion seen.
- GALL BLADDER** : It is normal in shape, size & position. It is echofree & shows no evidence of calculus, mass or sludge. Ultrasound Murphy's sign is negative.
- C.B.D** : It is of normal calibre & is echofree.
- PANCREAS** : Normal in shape, size & echotexture.
- SPLEEN** : Normal in shape, size & echotexture. No evidence of varices noticed.
- RIGHT KIDNEY** : Normal in shape, size and position. No evidence of calculus, mass, hydronephrosis or cyst is seen. The cortico-medullary differentiation is distinct. It measures 10.2cm and its mid parenchymal thickness is 1.8cm.
- LEFT KIDNEY** : Normal in shape, size and position. No evidence of calculus, mass, hydronephrosis or cyst is seen. The cortico-medullary differentiation is distinct. It measures 10.3cm and its mid parenchymal thickness is 1.8cm.
- URETERS** : Proximal & distal ureters are not dilated.
- URINARY BLADDER** : It is echofree. No evidence of calculus, mass or diverticulum is seen.  
Post void residual urinary volume - Insignificant.
- PROSTATE** : - Enlarged (a) Measures 52mm X 39mm X 29mm.  
(b) Volume - 31.90cm<sup>3</sup>.  
- Isoechoic parenchyma.  
- Regular capsular outline.  
- No intravesical bulge.
- OTHERS** : No ascites neither enlarged retroperitoneal lymph node seen.

**IMPRESSION** : 1. GRADE - I FATTY LIVER.  
2. BPH GRADE - I WITH INSIGNIFICANT PVR.

Suggested : Clinico-pathological correlation.

N.B.:- The USG predictability is 80%.



**DR. SAMIRAN BANERJEE**  
MBBS (CNMCH, KOLKATA),  
MD (Radio-diagnosis)  
Sr. Consultant Radiologist.

Radiological diagnosis is based on interpretation of shadows produced by normal & abnormal tissues, these are not always conclusive & often vary with clinical course of disease or response to treatment. Clinical & Pathological correlations are needed for final diagnosis. This report is not valid or medico-legal purpose. Reliability of sonographic prediction is around 80%. This report is a professional impression, related to this imaging only. It is not a "diagnosis" by itself & may be reviewed in case of discordant opinion or clerical discrepancy, if any.



#OSS  
 Lab Code : AS-RIG-000000772  
 Reg number : RIG-01042025-00058  
 Name : RADHESYAM SHARMA  
 Age : 68 Year(s), Sex : Male  
 Refer By : Dr. S. MUKHERJEE

Bill Date : 01-Apr-2025  
 Report Date : 01-Apr-2025

Regd. Office & Central Laboratory : 82/4B, Bid  
 Kolkata - 700 004; Phone : +91 62895 32188 / 9  
 E-mail : serum.kol  
 Website : www.serumanalysis  
 TOLL FREE NO. : 1800

## REPORT ON THE EXAMINATION OF WHOLE BLOOD

| INVESTIGATION                                                 | RESULT                   | BIOLOGICAL REFERENCE INTERVAL |
|---------------------------------------------------------------|--------------------------|-------------------------------|
| <b>(Sample Type: EDTA Blood)</b>                              |                          |                               |
| HB% (HAEMOGLOBIN)                                             | 10.2 gm/dl               | ( 13 - 17 )                   |
| Method-Non Cyanmethaemoglobin                                 |                          |                               |
| Packed Cell Volume (PCV) [Derived from Impedance]             | 30.6 %                   | ( 40 - 50 )                   |
| Mean Corpuscular Volume (MCV) [Calculated]                    | 90.0 FL                  | ( 83 - 101 )                  |
| Mean Corpuscular Hemoglobin (MCH)                             | 30.0 pg                  | ( 27 - 32 )                   |
| [Calculated]                                                  |                          |                               |
| Mean Corpuscular Hemoglobin Conc. (MCHC)                      | 33.33 gm/dl              | ( 31 - 34 )                   |
| [Calculated]                                                  |                          |                               |
| <b>TOTAL COUNT (Sample Type: EDTA Blood)</b>                  |                          |                               |
| RBC (Total) [Electronic Impedance]                            | 3.4 millions/cumm        | ( 4.5 - 5.5 )                 |
| WBC (Total) [Electronic Impedance]                            | 5100 /cumm               | ( 4000 - 11000 )              |
| Platelet Count (Thrombocyte) [Electronic Impedance]           | 187000 /cumm             | ( 150000 - 410000 )           |
| <b>Differential Leucocyte Count (Sample Type: EDTA Blood)</b> |                          |                               |
| Neutrophil (Microscopic)                                      | 61 %                     | ( 40 - 80 )                   |
| Lymphocyte (Microscopic)                                      | 35 %                     | ( 20 - 40 )                   |
| Eosinophil (Microscopic)                                      | 02 %                     | ( 1 - 6 )                     |
| Monocyte (Microscopic)                                        | 02 %                     | ( 2 - 10 )                    |
| <b>PERIPHERAL BLOOD SMEAR (Sample Type: EDTA Blood)</b>       |                          |                               |
| Morphology of RBC                                             | Normocytic, Normochromic |                               |
| Morphology of WBC                                             | No immature cells seen   |                               |
| <b>ESR (Westergreen Method) Sample Type : Citrated Blood</b>  |                          |                               |
| 1st HOUR                                                      | 46 mm./hr.               | ( 0 - 10 )                    |

### INSTRUMENTS USED :

AUTOMATED CELL COUNTER NIHON KOHDEN 3 PART CELLTAC-a MEK-6420P

**COMMENT : PLEASE CORRELATE WITH THE CLINICAL CONDITION.**

Method : Electronic Impedance & Microscopy

# Checked Twice

---END OF REPORT---

Lab Code : AS-RIG-000008062  
Reg number : RIG-08042025-00047  
Name : RADHESYAM SHARMA  
Age : 68 Year(s), Sex : Male  
Refer By : Dr. S. MUKHERJEE

Bill Date : 08-Apr-2025  
Report Date : 08-Apr-2025

**SERUM ANALYSIS CENTRE**  
Regd. Office & Central Laboratory : 82/4B, Bidh  
Kolkata - 700 004; Phone : +91 62895 32188 / 98  
E-mail : serum.kol@serumanalysis.com  
Website : www.serumanalysis.com  
TOLL FREE NO. : 1800

**DEPARTMENT OF BIOCHEMISTRY  
(LIVER FUNCTION TEST)**

**INVESTIGATION**

**RESULT**

**BIOLOGICAL REFERENCE INTERVAL**

SERUM TOTAL BILIRUBIN (DPD Method)

1.0 mg/dL

Adult : 0.3 - 1.2

0 - 01 Day : 1.4 - 8.7

01 - 2nd Days : 3.4 - 11.5

3rd - 6th Days : 1.5 - 12.0

7th days - 1month : <9.9

( 0 - 0.2 )

SERUM CONJUGATED (DPD Method)

0.3 mg/dL

Adult : 0.3 - 1.0

< 01 Day : < 8.6

2nd Day : 1.1 - 11.3

3rd Days : 0.5 - 12.5

4 - 6 Days : 0.1 - 12.4

7 Days - 1 Month : < 9.8

( 6.6 - 8.3 )

SERUM TOTAL PROTEIN (Biuret Method)

6.6 g/dL

SERUM ALBUMIN (Bromocresol Green)

3.5 g/dL

SERUM GLOBULIN (Calculated)

3.1 g/dL

ALBUMIN : GLOBULIN (Calculated)

1.13

SERUM ALK PHOSPHATASE (PNPP with AMP  
buffer)

110 u/L

SERUM S.G.P.T. ( UV without P5P )

67 U/L

SERUM S.G.O.T. ( UV without P5P )

68 U/L

Male : < 50 , Female : < 35

Male : < 50 , Female : < 30

**NOTE ::** A metabolite of Naproxen , O-desmethylnaproxen , may be shown spurious elevation in Total Bilirubin

**NOTE :: ALL ENZYMES DONE AT 37° C.**

**Note :** All enzymes done at 37°C

**INSTRUMENTS :**

1) Au 480 @ BECKMAN COULTER (JAPAN).

2) Au 680 @ BECKMAN COULTER (JAPAN).

3) DxC 700 Au @ BECKMAN COULTER (JAPAN).

4) VITROS 5,1/FS @ ORTHO-CLINICAL DIAGNOSTICS (U.S.A)

**Comment :** Please correlate with the clinical condition.

# Checked Twice

---END OF REPORT---

Report Validation thru QR  
Code to be validated for  
10 days from report date



#055

Lab Code : AS-RIG-000008062

Reg number : RIG-08042025-00047

Name : RADHESYAM SHARMA

Age : 68 Year(s), Sex : Male

Refer By : Dr. S. MUKHERJEE

Bill Date : 08-Apr-2025

Report Date : 08-Apr-2025

**SERUM**  
ANALYSIS CENTRE (P)Regd. Office & Central Laboratory : 82/4B, Bidhan S  
Kolkata - 700 004, Phone : +91 62895 32188 / 98302

E-mail : serum.kol@gmail.com

Website : www.serumanalysiscentre.com

TOLL FREE NO. : 1800-120-

**REPORT ON RHEMATOLOGY**  
**(By Particle Enhanced Immunoturbidimetric)****INVESTIGATION**

C reactive protein

**RESULT**

1.05 mg/L

**BIOLOGICAL REFERENCE INTERVAL**

&lt;5

Note : All enzymes done at 37°C

**INSTRUMENTS :**

- 1) Au 480 @ BECKMAN COULTER (JAPAN).
- 2) Au 680 @ BECKMAN COULTER (JAPAN).
- 3) DxC 700 Au @ BECKMAN COULTER (JAPAN).
- 4) VITROS 5.1/FS @ ORTHO-CLINICAL DIAGNOSTICS (U.S.A)

Comment : Please correlate with the clinical condition.

---END OF REPORT---

#OSS

Lab Code : AS-RIG-000008062

Reg number : RIG-08042025-00047

Name : RADHESYAM SHARMA

Age : 68 Year(s), Sex : Male

Refer By : Dr. S. MUKHERJEE

Bill Date : 08-Apr-2025

Report Date : 08-Apr-2025



# SERUM

ANALYSIS CENTRE (P) LTD.

Regd. Office & Central Laboratory : 82/4B, Bidhan Sarani,  
Kolkata - 700 004, Phone : +91 62895 32188 / 98302 74990

E-mail : serum.kol@gmail.com

Website : www.serumanalysiscentre.com

TOLL FREE NO. : 1800-120-2014

**REPORT ON THE EXAMINATION OF WHOLE BLOOD**

| INVESTIGATION                                                 | RESULT                   | BIOLOGICAL REFERENCE INTERVAL |
|---------------------------------------------------------------|--------------------------|-------------------------------|
| <b>(Sample Type: EDTA Blood)</b>                              |                          |                               |
| HB% (HAEMOGLOBIN)                                             | 9.7 gm/dl                | ( 13 - 17 )                   |
| Method-Non Cyanmethaemoglobin                                 |                          |                               |
| Packed Cell Volume (PCV) [Derived from Impedance]             | 29.1 %                   | ( 40 - 50 )                   |
| Mean Corpuscular Volume (MCV) [Calculated]                    | 90.94 FL                 | ( 83 - 101 )                  |
| Mean Corpuscular Hemoglobin (MCH) [Calculated]                | 30.31 pg                 | ( 27 - 32 )                   |
| Mean Corpuscular Hemoglobin Conc. (MCHC) [Calculated]         | 33.33 gm/dl              | ( 31 - 34 )                   |
| <b>TOTAL COUNT (Sample Type: EDTA Blood)</b>                  |                          |                               |
| RBC (Total) [Electronic Impedance]                            | 3.2 millions/cumm        | ( 4.5 - 5.5 )                 |
| WBC (Total) [Electronic Impedance]                            | 4700 /cumm               | ( 4000 - 11000 )              |
| Platelet Count (Thrombocyte) [Electronic Impedance]           | 342000 /cumm             | ( 150000 - 410000 )           |
| <b>Differential Leucocyte Count (Sample Type: EDTA Blood)</b> |                          |                               |
| Neutrophil (Microscopic)                                      | 53 %                     | ( 40 - 80 )                   |
| Lymphocyte (Microscopic)                                      | 40 %                     | ( 20 - 40 )                   |
| Eosinophil (Microscopic)                                      | 04 %                     | ( 1 - 6 )                     |
| Monocyte (Microscopic)                                        | 03 %                     | ( 2 - 10 )                    |
| <b>PERIPHERAL BLOOD SMEAR (Sample Type: EDTA Blood)</b>       |                          |                               |
| Morphology of RBC                                             | Normocytic, Normochromic |                               |
| Morphology of WBC                                             | No immature cells seen   |                               |
| <b>ESR (Westergreen Method) Sample Type : Citrated Blood</b>  |                          |                               |
| 1st HOUR                                                      | 78 mm./hr.               | ( 0 - 10 )                    |

**INSTRUMENTS USED :**

AUTOMATED CELL COUNTER NIHON KOHDEN 3 PART CELLTAC-a MEK-6420P

**COMMENT : PLEASE CORRELATE WITH THE CLINICAL CONDITION.**

Method : Electronic Impedance &amp; Microscopy

# Checked Twice

---END OF REPORT---

Report validated thru QR  
(QR) to be validated for  
15 days from report dateDr. AYAN KUNDU  
MBBS, MD, Pathologist  
Reg. No 68432 (WBMC)Dr. Chirashi Goswami  
M.D Pathology  
Reg. No 54767 (WBMC)Dr. Arnab Chowdhury  
MBBS, MD (PATHOLOGY)  
Reg. No- 74373 (WBMC)Dr. Siddhartha Chaudhuri  
MBBS (CAL), MD (BIO) (CAL)  
Reg. No 53119 (WBMC)

#QSS

Lab Code : AS-RIG-000021514

Reg number : RIG-22042025-00023

Name : RADHESYAM SHARMA

Age : 68 Year(s), Sex : Male

Refer By : Dr. S. MUKHERJEE

Bill Date : 22-Apr-2025

Report Date : 22-Apr-2025


**SERU**  
**ANALYSIS CENTRE**

 Regd. Office & Central Laboratory : 82/4B, Bidh  
 Kolkata - 700 004; Phone : +91 62895 32188 / 9

E-mail : serum.kol

Website : [www.serumanalysiscentre.com](http://www.serumanalysiscentre.com)

TOLL FREE NO. : 1800

## REPORT ON THE EXAMINATION OF WHOLE BLOOD

| INVESTIGATION                                                 | RESULT                   | BIOLOGICAL REFERENCE INTERVAL |
|---------------------------------------------------------------|--------------------------|-------------------------------|
| <b>(Sample Type:EDTA Blood)</b>                               |                          |                               |
| HB% (HAEMOGLOBIN)                                             | 10.2 gm/dl               | ( 13 - 17 )                   |
| Method-Non Cyanmethaemoglobin                                 |                          |                               |
| Packed Cell Volume (PCV) [Derived from Impedance]             | 30.6 %                   | ( 40 - 50 )                   |
| Mean Corpuscular Volume(MCV) [Calculated]                     | 90.0 FL                  | ( 83 - 101 )                  |
| Mean Corpuscular Hemoglobin(MCH)                              | 30.0 pg                  | ( 27 - 32 )                   |
| [Calculated]                                                  |                          |                               |
| Mean Corpuscular Hemoglobin Conc.(MCHC)                       | 33.33 gm/dl              | ( 31 - 34 )                   |
| [Calculated]                                                  |                          |                               |
| <b>TOTAL COUNT (Sample Type:EDTA Blood)</b>                   |                          |                               |
| RBC (Total) [Electronic Impedance]                            | 3.4 millions/cumm        | ( 4.5 - 5.5 )                 |
| WBC (Total) [Electronic Impedance]                            | 2200 /cumm               | ( 4000 - 11000 )              |
| Platelet Count (Thrombocyte)                                  | 194000 /cumm             | ( 150000 - 410000 )           |
| [Electronic Impedance]                                        |                          |                               |
| <b>Differential Leucocyte Count (Sample Type: EDTA Blood)</b> |                          |                               |
| Neutrophil (Microscopic)                                      | 60 %                     | ( 40 - 80 )                   |
| Lymphocyte (Microscopic)                                      | 35 %                     | ( 20 - 40 )                   |
| Eosinophil (Microscopic)                                      | 02 %                     | ( 1 - 6 )                     |
| Monocyte (Microscopic)                                        | 03 %                     | ( 2 - 10 )                    |
| <b>PERIPHERAL BLOOD SMEAR (Sample Type: EDTA Blood)</b>       |                          |                               |
| Morphology of RBC                                             | Normocytic, Normochromic |                               |
| Morphology of WBC                                             | A case of Leucopenia     |                               |
| <b>ESR(Westergreen Method) Sample Type : Citrated Blood</b>   |                          |                               |
| 1st HOUR                                                      | 46 mm./hr.               | ( 0 - 10 )                    |

### INSTRUMENTS USED :

AUTOMATED CELL COUNTER NIHON KOHDEN 3 PART CELLTAC-a MEK-6420P

**COMMENT : PLEASE CORRELATE WITH THE CLINICAL CONDITION.**

Method : Electronic Impedance &amp; Microscopy

# Checked Twice

---END OF REPORT---

Patient Name : Mr. Radheshyam Sharma Age : 68 Yrs  
Exam : Colour Doppler Echocardiography Gender : Male  
Ref. By : Dr. Bikash Routh, GP Exam Date : 09.03.2025

### DISCUSSION

#### M-MODE / 2 DIMENSIONAL / DOPPLER

#### S/P - C/O - COUGH

#### M-MODE & 2D

1. Normal left ventricular size, thickness, wall motion and systolic function (LVEF - 58%).
2. Normal left atrium, right ventricle, right atrium and aorta. Normal right ventricular systolic function at present (TAPSE - 19 mm).
3. Mildly thickened aortic valve leaflets with normal aortic valve opening. Aortic sclerosis present.
4. Both anterior mitral leaflet (AML) and posterior mitral leaflet (PML) normal. Mitral annular calcification present.
5. Normal tricuspid & pulmonary valves.
6. Intact interatrial & interventricular septum. No PDA seen.
7. Evidence of pericardial effusion - around 5 mm posteriorly, 2 mm anteriorly & 3 mm laterally seen.
8. No evidence of intra cardiac clot, thrombus or vegetation.

### DOPPLER

1. V<sub>max</sub> across aortic valve at present - 1.7 M/sec.
2. Mild tricuspid regurgitation. (TR jet velocity recorded at present - 1.4 M/sec.)
3. Trivial mitral regurgitation.
4. S' (Peak systolic velocity of tricuspid annulus by pulsed wave DTI) at present - 10 cm/sec.

### IMPRESSION

- Normal left ventricular wall motion & systolic function. (LVEF - 58%).  
Pericardial effusion as described above.  
Mild TR.  
Mitral annular calcification present. Trivial MR.  
Aortic sclerosis as described above.

- Note : 1. No left ventricular wall motion abnormality seen at present.  
2. No pulmonary arterial hypertension (PAH) seen at present.

Advice : 1. Regular clinical and Echocardiographic follow up.

2. Further detailed evaluation & management in a tertiary care cardiac centre.

R.P.S. CHOUHAN

B.B.S(Cal), M.D (medicine, Cal),

N.B (Cardiology, PGT at NHI New Delhi),

|                           |                            |                            |            |
|---------------------------|----------------------------|----------------------------|------------|
| Patient's Name :          | Mr. Radheshyam Sharma      | Age : 68 Yrs               | Sex : Male |
| Adv. By: Dr.              | Dr. BIKASH ROUTILOP        | Reporting Date:-09.03.2025 |            |
| Collect by : SPR II (Lab) | Lab Code:- LC- 20250309-75 | Specimen:                  | BLOOD      |

| Investigation:-           | Result:- | Unit:-      | Normal Range                      | Methodology       |
|---------------------------|----------|-------------|-----------------------------------|-------------------|
| TOTAL COUNT               | 3,100    | /cmm        | (4,100-11,000/cmm)                |                   |
| DIFF. COUNT: NEUTROPHILLS | 54       | %           | ( 40-65% )                        |                   |
| LYMPHOCYTES               | 44       | %           | ( 20-40% )                        |                   |
| EOSINOPHILLS              | 02       | %           | ( 01-04% )                        |                   |
| MONOCYTES                 | 00       | %           | ( 01-06% )                        |                   |
| BASOPHILLS                | 00       | %           | ( 00-03% )                        |                   |
| HAEMOGLOBIN(CMG)          | 5.9      | gm/dl       | ( F-12-14 gm/dl<br>M-14-16gm/dl ) | Cyanmethemoglobin |
| S.R. 1 <sup>ST</sup> Hour | 70       | mm          | (02-15mm )                        | Westerngren       |
| PLATELETS COUNTS          | 57,000   | Cells/cmm   | (1,50,000-4,00,000/cmm)           |                   |
| R.B.C                     | 1.13     | million/cmm | (3.5-5.5million/cmm)              |                   |
| H.V                       | 16.2     | %           | ( 30 - 50 % )                     |                   |
| H.V                       | 143.4    | f1          | ( 70 - 95f1 )                     |                   |
| H                         | 52.2     | p g         | ( 27 - 32 p g )                   |                   |
| HC                        | 36.4     | %           | ( 31 - 37 % )                     |                   |
| W-CV                      | 19.5     | %           |                                   |                   |

done by SYSMEX XP-100 Hematology analyzer

-:End of Report:-

Dr. Siddhartha Roy  
MBBS, DCP, MNDI (MUM) RCGP (UK)

Dr. Swarup Ghosh  
MD (Pathologist)  
Reg.No.- 52140 (W.B.M.C)

Dr. Rupak  
MD (Biochemistry)  
Reg.No.- 54140 (W.B.M.C)

Services of:  
Dr. Roy, C.T.Scan,  
Ultrasound E.C.G., 4D USG, Liver Elastography, Echo Cardiography, Colour Doppler, Endoscopy, E.E.G., M.C.V. Computerized

|                           |                            |                      |         |
|---------------------------|----------------------------|----------------------|---------|
| Patient's Name :          | Mr. Radheshyam Sharma      | Age : 68 Yrs         | Sex : M |
| Adv. By: Dr. :            | Dr. BIKASH ROUTH, GP       | Reporting Date: -09/ |         |
| Collect by : SPR II (Lab) | Lab Code:- LO- 20250309-75 | Specimen:            | BLOOD   |

Investigation:- Result:- Unit:- Normal Range Metho

### LIVER FUNCTION TEST:-

|                         |   |       |       |                                                                                                                                                             |
|-------------------------|---|-------|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| SERUM BILIRUBIN : TOTAL | : | 3.11  | mg/dl | (0.2-1.1mg/dl)                                                                                                                                              |
| DIRECT                  | : | 0.57  | mg/dl | (0.1-0.3mg/dl)                                                                                                                                              |
| INDIRECT                | : | 2.54  | mg/dl | (0.2-0.7mg/dl)                                                                                                                                              |
| ALT                     | : | 23    | u/l   | (05-46u/l)                                                                                                                                                  |
| AST                     | : | 42    | u/l   | (5-45u/l)                                                                                                                                                   |
| ALPINE PHOSPHATASE      | : | 63    | IU/L  | ( 20-50 yrs M & F Nor : 50-125IU/L,<br>> 60yrs M : upto 112 IU/L, F upto 143IU/L.<br>In growing Children ( Age 10-17 yrs ) Nor : 350-<br>g/dl (6.4-8.3g/dl) |
| TOTAL PROTEIN           | : | 6.22  | g/dl  | (6.4-8.3g/dl)                                                                                                                                               |
| ALBUMIN                 | : | 3.90  | g/dl  | (3.5-5.0g/dl)                                                                                                                                               |
| GLOBULIN                | : | 2.42  | g/dl  | (2.0-3.5g/dl)                                                                                                                                               |
| ALB/GLOB RATIO          | : | 1.6:1 |       |                                                                                                                                                             |

### LIPID PROFILE TEST :-

|                   |   |       |       |                                                                      |
|-------------------|---|-------|-------|----------------------------------------------------------------------|
| TOTAL CHOLESTEROL | : | 80    | mg/dl | ( Nor: <200 DESIRABLE,<br>200 -239 BORDERLINE,<br>>240 HIGH mg/dl ). |
| TRIGLYCERIDE      | : | 130.4 | mg/dl | ( Nor: [<161 Mg/dl ],<br>>161-199 HIGH mg/dl).                       |
| HDL CHOLESTEROL   | : | 22.9  | mg/dl | ( Nor: M: 35.3-79.5, F: 42.0-5                                       |
| LDL CHOLESTEROL   | : | 51.2  | mg/dl | ( Nor: < 129. DESIRABLE<br>130-159 BORDERLINE,<br>>160 HIGH mg/dl )  |
| VLDL CHOLESTEROL  | : | 26.08 | mg/dl | ( Nor: 12- 35 mg/dl ).                                               |

-:End of Report:-

Dr. Siddhartha Roy  
 MBBS, DCP, MNDI (MUM) RCGP (UK)

Dr. Swarup Ghosh  
 MD (Pathologist)  
 Reg.No.- 52140 (W.B.M.C)

Dr. F  
 Reg

s of:  
 Ray, C.T.Scan.

All reference ranges mentioned here, are according to the the reference range mentioned in the kit. Reference range



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|----------------|-----------------------|------------|-------------|----------------|--------------|
| Invoice No.    | 6202/DGI/24-25        | Report No. | 16769/24-25 | Collection Dt. | 24/03/25     |
| Patient ID.    | 5685/HRN/24-25        |            |             | Report Dt.     | 24/03/25     |
| Patient Name   | RADHESHYAM SHARMA     |            |             | Age / Sex      | 68 Yrs./MALE |
| Referred By Dr | S SAMANTA,MD MEDICINE |            |             | Bed No.        | (04(MGW))    |

### HAEMATOLOGY REPORT

| Investigations                      | Result                   | Reference - Range                                            |
|-------------------------------------|--------------------------|--------------------------------------------------------------|
| <b>COMPLETE HAEMOGRAM :</b>         |                          |                                                              |
| Haemoglobin                         | <u>4.7 g/dl</u>          | (M) 13.5 - 18.0 g/dl<br>(F) 11.5 - 16.4 g/dl                 |
| PCV                                 | 12.6                     | Men : 40 - 50<br>Women : 36 - 46                             |
| RBC count                           | 1.50 million/cmm         | Men : 4.5 - 5.5 million/cmm<br>Women : 3.8 - 4.8 million/cmm |
| MCV                                 | 152.1 fl                 | 83 - 101 fl                                                  |
| MCH                                 | 49.5 pg                  | 27.0 - 32.0 pg                                               |
| MCHC                                | 32.0 g / dL              | 31.5 - 34.5 g / dL                                           |
| RDW                                 | 19.9 %                   | 11 - 16 %                                                    |
| Total Leucocyte count               | <u>1,600 /cu mm</u>      | 4500 - 11500 /cu mm                                          |
| <b>Differential Leucocyte Count</b> |                          |                                                              |
| Neutrophil                          | 58 %                     | 40 - 80 %                                                    |
| Lymphocyte                          | 39 %                     | 20 - 40 %                                                    |
| Monocyte                            | 01 %                     | 2 - 10 %                                                     |
| Eosinophil                          | 02 %                     | 1 - 6 %                                                      |
| Basophil                            | 00 %                     | < 1 - 2 %                                                    |
| Platelet count                      | 0.60 lakh/cu mm          | 1.5 - 4.0 lakh/cu mm                                         |
| ESR                                 | <u>95 mm in 1st hour</u> | 10 - 20 mm in 1st hour                                       |

B:- The result relate only to the items tested.

The test report shall not be reproduced except in full, without written approval of the authority.

-; Please correlate with clinical conditions :-

- End of Report -

**Dr. D. Ghosh**  
MBBS, MD(Path)  
Consultant Pathologist

**Dr. Subhadi**  
MBBS, MD(P  
Consultant Path



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Invoice No. 0217/D31/24-25 Report No. 10827/24-25  
Patient ID. 56854HRN/24-25  
Patient Name RADHESHYAM SHARMA  
Referred By Dr. S SAMANTA, MD MEDICINE  
Collection Dt.  
Report Dt.  
Age / Sex 68  
Bed No. (02)

| Investigations               | Result            | Reference                          |
|------------------------------|-------------------|------------------------------------|
| <b>COMPLETE HAEMOGRAM :</b>  |                   |                                    |
| Haemoglobin                  | 7.7 g/dl          | (M) 13.5 - 18.0<br>(F) 11.5 - 16.4 |
| CV                           | 21.5              | Men : 40 - 50<br>Women : 36 - 4    |
| RBC count                    | 2.77 million/cmm  | Men : 4.5 - 5.5<br>Women : 3.8 -   |
| MCV                          | 109.6 fl          | 83 - 101 fl                        |
| MCH                          | 40.6 pg           | 27.0 - 32.0 pg                     |
| MCHC                         | 37.1 g / dL       | 31.5 - 34.5 g /                    |
| RDW                          | 31.1 %            | 11 - 16 %                          |
| Total Leucocyte count        | 1,700 /cu mm      | 4500 - 11500                       |
| Differential Leucocyte Count |                   |                                    |
| Neutrophil                   | 52 %              | 40 - 80 %                          |
| Lymphocyte                   | 44 %              | 20 - 40 %                          |
| Monocyte                     | 02 %              | 2 - 10 %                           |
| Eosinophil                   | 02 %              | 1 - 6 %                            |
| Basophil                     | 00 %              | < 1 - 2 %                          |
| Platelet count               | 0.50 lakh/cu mm   | 1.5 - 4.0 lakh                     |
|                              | 80 mm in 1st hour | 10 - 20 mm i                       |

The result relate only to the items tested.  
The test report shall not be reproduced except in full, without written approval of the aut  
- Please correlate with clinical conditions :-  
- End of Report -

Dr. D. Ghosh

Lab No.

Patient ID.

Patient Name

Referred By Dr.

6217/DGI/24-25

5685/HRN/24-25

RADHESHYAM SHARMA

S SAMANTA, MD MEDICINE

Report No.

16823/24-25

Collection Dt.

Report Dt.

Age / Sex

Bed No.

27/11

68 Yrs./M

02 (MC)

## Investigations

## IMMUNOLOGY & SEROLOGY

Result

78.2 mg / L

Reference - Range

0 - 6 mg / L

C-Reactive Protein  
(Turbidimetric Method)

N.B:- The result relate only to the items tested.  
The test report shall not be reproduced except in full, without written approval of the authority.

~ Please correlate with clinical conditions ~  
- End of Report -

**Dr. D. Ghosh**  
MBBS. MD(Path)  
Consultant Pathologist

**Dr. Subh**  
MBBS.  
Consultant

|               |                     |              |                  |
|---------------|---------------------|--------------|------------------|
| Patient Name: | RAJESH KUMAR SAKSHI | Age:         | 45 YRS           |
| Patient ID:   | 1234                | Ref. By:     | DR. S. S. SAKSHI |
| Sex:          | M                   | Report Date: | 24/10/2023       |
| Study Date:   | 24/10/2023 10:00:00 |              |                  |

## Report of X-RAY CHEST PA VIEW

### Observation-

Soft tissue and bony cage are unremarkable.

Both domes of the diaphragm are normal in position and contour.

Both costophrenic angles are clear.

Cardiomegaly

Both hila are normal in position, size, density and configuration.

Both lung fields are well expanded. No focal lesion is noted.

Vascular markings are normal

**IMPRESSION: Cardiomegaly**

**Suggest: 2D echo**

Disclaimer: This is a computer-generated radiology report based on the medical images and clinical data provided. All medical interpretations are based on the information available at the time of the examination. This investigation may be repeated or rechecked by other tests. Due to lack of physical patient identification, as a result of this technology, this report may not be used for any medical legal purpose.

*D. B. Patil*

**Dr. Dipti B Patil**  
MBBS, DMRF (RADIO-DIAGNOSIS)  
CONSULTANT RADIOLOGIST  
Reg No: 2002020841

# Spandan

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Unit-2

Sardar Rajbari, Near Post Office, N.S.B. Road, R.  
Dist. Paschim Bardhaman (W.B.), Pin-713347,

Ph. 0341-2443298, Mob. 8296170664

spandanimg2010@gmail.com

|              |                                   |           |              |
|--------------|-----------------------------------|-----------|--------------|
| Patient Name | : Mr. Radheshyam Sharma           | Age       | : 68 Yrs     |
| Exam         | : Colour Doppler Echocardiography | Gender    | : Male       |
| Ref. By      | : Dr. Bilkash Routh, GP           | Exam Date | : 09.03.2025 |

## DEPARTMENT OF CARDIOLOGY

### Echocardiography report

#### **A** **MEASUREMENTS**

|                                |      |                    |
|--------------------------------|------|--------------------|
| Aortic Root Dimension          | : 31 | (20-37mm)          |
| Left Atrial Dimension          | : 30 | (19-40mm)          |
| Right Vent. Dimension          | : 23 | (07-23mm)          |
| Left Vent. Dimension ED        | : 40 | (37-56mm)          |
| Left Vent. Dimension ES        | : 28 | (22-40mm)          |
| Int. Vent. Septum Thickness ED | : 11 | ES 14 ED (06-12mm) |
| Lv Post Wall Thickness : ED    | : 11 | ES 14 ED (06-11mm) |

#### **B**

#### **INDICES OF LEFT VENTRICULAR FUNCTION**

|                               |            |          |
|-------------------------------|------------|----------|
| Left Vent. Ejection fractions | : 58%      | (50-80%) |
| Mitral E- Septal Separation   | : < 0.9 cm | < 0.9 cm |

Cont..... Pg. II.

# Spandan

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21-B, N.B.S. Road, Opp. Marw  
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Unit 2  
Bearsula Rajbari, Near Post Of  
Dist Paschim Bardhaman (W.B.)  
Ph. 0341-2443298, Mob. 92  
spandanmg2010@gmail.co

Pg. H.

## VALVES

### MITRAL:

EF SLOPE (50-150 MM/EEG) IN DE L4 FLOW

ANT LEAFLET

POST LEAFLET

### TRICUSPID:

EF SLOPE (50-150 MM/EEG) DE FLOW

ANT LEAFLET

POST LEAFLET

### PULMONARY:

EF SLOPE (6-11 MM/SEC) "A" WAVE (2.7 MM) FLOW L1

### AORTIC:

CUSP OPENING: L5 FLOW L7

CLOSURE LINE: (CUSPS)

LEFT VENTRICULAR WALL MOTION: Normal

Cont. Pg. H1.