

# MY ENT CLINIC

Patient Name : CHHANDA BANDOPADHYAY

Age/Gender : 49/Female

Date : 24/Mar/22

Referred By : SELF

Unit No :



Columella: NAD

Nasal Septum: S SHAPED DNS

Inferior Turbinate: NAD

Middle Turbinate: EDEMATOUS WITH LEFT OMC CLOSED

Middle Meatus: POLYPOIDAL CHANGES SEEN ALONGWITH FUNGAL ELEMENTS AND ALLERGIC MUCIN

Superior Turbinate: NAD

Posterior Pharyngeal Wall: NAD

Lateral Pharyngeal Wall: NAD

IMPRESSION: CHRONIC RHINOSINUSITIS WITH FUNGAL ELEMENTS SEEN IN LEFT MIDDLE MEATUS APPEARS TO COME OUT OF THE LEFT OMC



DR TANIA MUKHERJEE

MS.ENT

ENT



DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	841460
Patient Name	MRS. CHHANDA BANDOPADHYAY	Age/Gender	49 Yrs/Female
Referred By		Bed No/Ward	OPD
Prescribed By	Dr. Tania Mukherjee	Scan Date	
Bill Date	17/03/2022 7:59AM	Report Date	19/03/2022 11:40AM
Company	Cash	Report Status	Final

CT SCAN - CECT PNS ( PARA NASAL SINUSES)

CT SCAN - CECT PNS ( PARA NASAL SINUSES)

Technique: Plain & contrast MDCT (512 slice) PNS done with multiplanar reconstruction.

FINDINGS:

Moderate deviation of nasal septum is noted towards left. No bony spur seen.

Hypertrophy of bilateral inferior and right middle nasal turbinates noted.

Extensive mucosal thickening is noted in bilateral maxillary sinuses with hyperdense content seen in left maxillary sinus.

The frontal, ethmoid and sphenoid sinuses are clear of secretions, mucosal thickening or polyps.

Infundibulum of the bilateral maxillary sinuses, are obliterated.

Frontoethmoidal and the sphenoethmoid recesses are clear.

Bony walls of the sinuses are intact with no evidence of remodelling or erosion.

IMPRESSION:

Moderate deviation of nasal septum is noted towards left. No bony spur seen.

Hypertrophy of bilateral inferior and right middle nasal turbinates noted.



DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	841460
Patient Name	MRS. CHHANDA BANDOPADHYAY	Age/Gender	49 Yrs/Female
Referred By		Bed No/Ward	OPD
Prescribed By	Dr. Tania Mukherjee	Scan Date	
Bill Date	17/03/2022 7:59AM	Report Date	19/03/2022 11:40AM
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CT SCAN - CECT PNS ( PARA NASAL SINUSES)

Extensive mucosal thickening is noted in bilateral maxillary sinuses with hyperdense content seen in left maxillary sinus.

Findings suggestive of infective etiology fungal sinusitis needs consideration.

Suggest clinical correlation.

Investigations have their limitations. Solitary pathological/Radiological and other investigations never confirm the final diagnosis. They only help in diagnosing the disease in correlation to clinical symptoms and other related tests. Please interpret accordingly.

Disclaimer: Report is done through teleradiology after the images acquired by PACS (picture archiving and communication system). This report is not meant for medicolegal purpose.

-----\*\* End Of Report \*\*-----

Dr. Vikash Yogendra Ojha  
MD, Fellow Neuro & MSK, Reg No :  
2013/06/2263





**Department of Laboratory Services**

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	844971
UHID	230785	Sample Date	23/03/2022 9:41AM
Age/Gender	49 Yrs/Female	Receiving Date	23/03/2022 10:11AM
Bed No/Ward	OPD	Report Date	23/03/2022 2:00PM
Referred By		Report Status	Final
Prescribed By	Dr. Tania Mukherjee		

Test Name	Result	Unit	Biological Ref. Range	Method
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**Haematology**

**Bleeding & Clotting Time (BT, CT, Blood)**

Bleeding time.	2.30	min.	2 - 7	Template method
Clotting time	5.30	min.	3 - 10	Capillary tube method

**\*\*End Of Report\*\***

*M. Lodh*

**Dr. Moushumi Lodh**

**MBBS,MD (Biochemistry), MHA, Executive Director- Lab Services, Healthworld Hospitals, Reg No: 71993 (WBMC)**



### Department of Laboratory Services

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	844971
UHID	230785	Sample Date	23/03/2022 9:41AM
Age/Gender	49 Yrs/Female	Receiving Date	23/03/2022 10:11AM
Bed No/Ward	OPD	Report Date	23/03/2022 2:00PM
Referred By		Report Status	Final
Prescribed By	Dr. Tania Mukherjee		

Test Name	Result	Unit	Biological Ref. Range	Method
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#### Clinical Biochemistry

##### Glucose Fasting [F]

Glucose F	89.00	mg/dL	70.00 - 100.00	Sample: Plasma (fluoride) Hexokinase
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##### Serum Urea

Urea	11.3	mg/dL	15 - 40	Sample: Serum Urease, UV
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##### Serum Creatinine

Serum Creatinine	0.65	mg/dL	0.51 - 1.20	Sample: Serum Jaffe, Kinetic
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\*\*End Of Report\*\*

*M. Lodh*

Dr. Moushumi Lodh

MBBS, MD (Biochemistry), MHA, Executive Director- Lab Services, Healthworld Hospitals, Reg No: 71993 (WBMC)



**Department of Laboratory Services**

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	844971
UHID	230785	Sample Date	23/03/2022 9:41AM
Age/Gender	49 Yrs/Female	Receiving Date	23/03/2022 10:13AM
Bed No/Ward	OPD	Report Date	23/03/2022 2:00PM
Referred By		Report Status	Final
Prescribed By	Dr. Tania Mukherjee		

**Microbiology**

**Serology Rapid Screening (HCV, HBSAG & HIV 1&2)**

Sample: Serum

**HEPATITIS B SURFACE ANTIGEN :**

Result: NON-REACTIVE

Test technique: RIT( Rapid immunochromatography test)

Note: This is a screening test based on immunochromatography. False positives and false negatives might occur. Kindly perform sensitive and/or confirmatory tests if clinically indicated.

**HEPATITIS C ANTIBODY (Anti-HCV) Test:**

Result:NON-REACTIVE

Test method: Immunoconcentration/ dot and blot immunoassay

Note: This is a screening test based on immunoconcentration. False positives and false negatives might occur. Kindly perform sensitive and/or confirmatory tests if clinically indicated.


**HIV 1 & 2 ANTIBODIES SCREENING TEST:**

Result:NON-REACTIVE

Test method: Immunoconcentration/ dot and blot immunoassay

Note: This is a screening test based on immunoconcentration. False positives and false negatives might occur. Kindly do more sensitive and/or confirmatory tests if clinically indicated.

**\*\*End Of Report\*\***

  
**Dr. Sambit Sahoo**

**MBBS, MD (Microbiology), Consultant, Reg No:73633/15 (DMC)**





DEPARTMENT OF RADIOLOGY & IMAGING

UHID 230785

Patient Name MRS. CHHANDA BANDOPADHYAY

Referred By

Prescribed By Dr. Tania Mukherjee

Bill Date 23/03/2022 9:41AM

Company Cash

RIS No 844971

Age/Gender 49 Yrs/Female

Bed No/Ward OPD

Scan Date

Report Date 23/03/2022 12:21PM

Report Status Final

X-RAY: CHEST PA

Bilateral lung fields are clear.

Bilateral costophrenic angles are clear.

Both hilum are normal.

Cardiac size grossly appear normal.

Visualized bone & soft tissue appear normal.

**IMPRESSION**

**Normal study.**

-----\*\* End Of Report \*\*-----

Dr. Aniket Mondal  
MD,DNB, PDCC  
Consultant – Diagnostic &  
Interventional Radiology



**DEPARTMENT OF LABORATORY SERVICES**

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	847509
UHID	230785	Sample Date	26/03/2022 10:52AM
Age/Gender	49 Yrs/Female	Receiving Date	26/03/2022 11:11AM
Bed No/Ward	OPD	Report Date	26/03/2022 3:26PM
Referred By		Report Status	Final
Prescribed By	Dr. Tania Mukherjee		

**Molecular Testing**

**COVID 19 RTPCR (TRUENAT) (Throat/Nasopharyngeal swab)**

SRF ID:	1970400540950
ICMR ID:	715983841
Sample:	Oropharyngeal and Nasopharyngeal swabs
Result:	<u>NEGATIVE</u>
Ct Value:	NOT DETECTED

**LIMIT OF DETECTION OF Orfla AND E gene WAS ESTIMATED TO BE 480 AND 487 GENOME COPIES/ML RESPECTIVELY**

NOTE: Amplified products are indicated by threshold cycle (Ct) in amplification curve, defined as the number of amplification cycles required for the fluorescent signal to cross the threshold (i.e. exceed the background signal). The lower the Ct level, the greater is the amount of viral RNA in the sample. Negative result does not rule out the possibility of Covid-19 infection. Presence of inhibitors, mutations & insufficient RNA specific to SARS-CoV-2 can influence the test result. Kindly correlate the results with clinical findings. A negative result in a single upper respiratory tract sample does not rule out SARS-CoV-2 infection. Hence, in such cases a repeat sample should be sent. Lower respiratory tract samples like Sputum, BAL, ET aspirate are appropriate samples especially in severe and progressive lung disease. Covid-19 Test conducted as per kits approved by ICMR. Kindly consult referring Physician for appropriate follow up.

**In case of COVID19 POSITIVE report please contact for any information: Call Centre: 1800313444222, 033-23412600; Telemedicine: 03323576001**

**\*\*End Of Report\*\***

**Dr. Sambit Sahoo**

**MBBS, MD (Microbiology), Consultant, Reg No:73633/15 (DMC)**



Female

23.03.2022 10:50:52  
HealthWorld Hospital  
Gandhi More  
Durgapur

Technician:  
Ordering Ph:  
Referring Ph:  
Attending Ph:

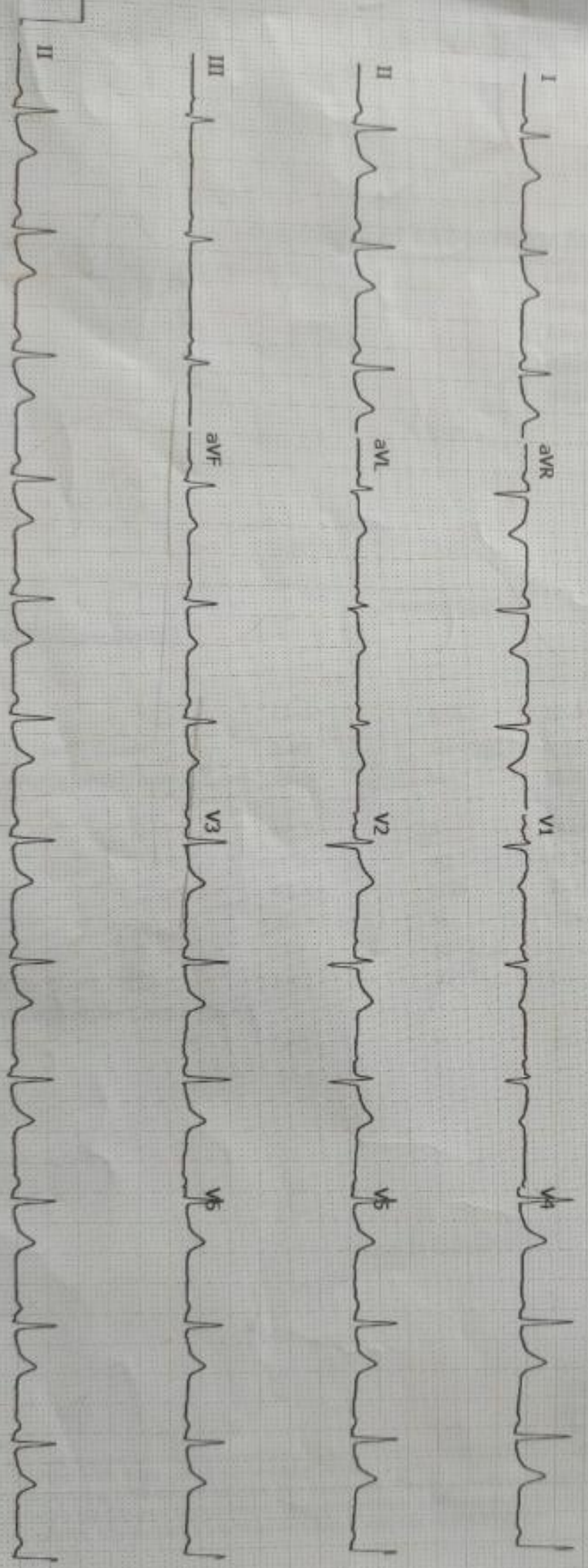
QRS : 64 ms  
QT / QTc Baz : 396 / 442 ms  
PR : 128 ms  
P : 92 ms  
RR / PP : 796 / 800 ms  
P / QRS / T : 39 / 53 / 34 degrees

Normal sinus rhythm  
Normal ECG

Location:  
Order Number:  
Visit:  
Indication:  
Medication 1:  
Medication 2:  
Medication 3:

Room:

75 bpm  
- / - mmHg





### Department of Laboratory Services

<b>Patient Name</b>	MRS. CHHANDA BANDOPADHYAY	<b>Lab No</b>	829039
<b>UHID</b>	230785	<b>Sample Date</b>	28/02/2022 9:33AM
<b>Age/Gender</b>	49 Yrs/Female	<b>Receiving Date</b>	28/02/2022 10:43AM
<b>Bed No/Ward</b>	OPD	<b>Report Date</b>	28/02/2022 2:26PM
<b>Referred By</b>	Dr. S.k Roy	<b>Report Status</b>	Final
<b>Prescribed By</b>	Dr. Self		

Test Name	Result	Unit	Biological Ref. Range	Method
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#### Haematology

#### CBC (Complete Blood Count)

Sample: EDTA  
lood, Whole Blood  
(EDTA)

Hemoglobin	11.1	g/dL	12.0 - 15.0	Cyanide-free sodium lauryl sulphate (SLS)
Red Blood Cell [RBC] Count	3.87	$10^6/\mu\text{L}$	4.20 - 5.40	Electrical resistant impedance
Packed cell volume [PCV]/Haematocrit [HCT]	35.3	%	36.0 - 46.0	Calculated/Manual
MCV	91.2	fL	83.0 - 101.0	Calculated/Manual
MCH	28.6	pg	27.0 - 32.0	Calculated/Manual
MCHC	31.4	g/dL	31.5 - 34.5	Calculated/Manual
RDW CV	13.7	%	11.5 - 15.0	Calculated
Platelet count	177	$10^3/\mu\text{L}$	150 - 410	Electrical resistant impedance
Total Leucocyte Count [TLC]	5.63	$10^3/\mu\text{L}$	4.00 - 10.00	Fluorescence flow cytometry

#### Differential Leucocyte Count [DLC]

Neutrophils	64.1	%	40 - 80	Electrical impedance & Diff channel scattergram
Lymphocytes	25.5	%	20 - 40	Electrical impedance & Diff channel scattergram
Monocytes	8	%	2 - 10	Electrical impedance & Diff channel scattergram
Eosinophils	2.2	%	1 - 6	Electrical impedance & Diff channel scattergram
Basophils	0.2	%	0 - 1	Electrical impedance & Diff channel scattergram

**\*\*End Of Report\*\***

*Dr. Singh*

**Dr. Ranbir Singh**  
MBBS, M.D (Pathology), Consultant, Lab  
Services, Healthworld Hospital, REGD: 85622  
(WBMC)

- \* Parameters marked with # are not in the scope of NABL.
- \* Content of this report is only an opinion not the diagnosis. Please correlate clinically.
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- \* For amended reports, the contents are final and supercede the recalled report.

Printed at 28/02/2022 18:11 Page: 1 Of 4





### Department of Laboratory Services

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	829128
UHID	230785	Sample Date	28/02/2022 10:47AM
Age/Gender	49 Yrs/Female	Receiving Date	28/02/2022 10:59AM
Bed No/Ward	OPD	Report Date	28/02/2022 12:18PM
Referred By	DR S.K. ROY, MD(CAL).CON PHYSICIAN	Report Status	Final
Precribed By	Dr. Self		

Test Name	Result	Unit	Biological Ref. Range	Method
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<b>Clinical Biochemistry</b>				
<b>Total T4 (Thyroxine)</b>				Sample: Serum
Total T4 (TT4) (Thyroxine)	73.55	nmol/L	70.00 - 151.00	ECLIA

Total T4 in Cord blood : 95-168 nmol/L.

**\*\*End Of Report\*\***

*M. Lodh*  
**Dr. Moushumi Lodh**  
MBBS, MD (Biochemistry), MHA, Executive  
Director- Lab Services, Healthworld  
Hospitals, Reg No: 71993 (WBMC)

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## Department of Laboratory Services

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	829039
UHID	230785	Sample Date	28/02/2022 9:33AM
Age/Gender	49 Yrs/Female	Receiving Date	28/02/2022 10:43AM
Bed No/Ward	OPD	Report Date	28/02/2022 2:26PM
Referred By	Dr. S.k Roy	Report Status	Final
Precribed By	Dr. Self		

Test Name	Result	Unit	Biological Ref. Range	Method
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### Glucose Fasting [F]

Glucose F 88.00 mg/dL 70.00 - 100.00 Hexokinase

Sample: PLASMA  
(FLUORIDE)

### Serum Creatinine

Serum Creatinine 0.49 mg/dL 0.51 - 1.20 Jaffe, Kinetic

Sample: Serum

### Serum TSH (Thyroid Stimulating Hormone)

Thyroid Stimulating Hormone (TSH)/Thyrotropin 3.27  $\mu$ IU/mL 0.34 - 4.25 ECLIA

Sample: Serum

#### TSH Values :

Premature 28-36 weeks: 0.7-27 uIU/mL;

Cord blood (>37 Weeks) 2.3-13.2 uIU/mL

pregnancy :1st trimester: 0.3-4.5 uIU/mL, 2nd trimester 0.5-4.6 uIU/mL, 3rd trimester 0.8-5.2 uIU/mL

This test is used in differential diagnosis of hypothyroidism, as an aid in diagnosis of p hyperthyroidism, prediction of TRH stimulated TSH response & monitoring patients on thyroid replacement therapy. Drugs like glucocorticoids, dopamine agonists, somatostatin analogs and rexinoids, etc may effect TSH at the level of the hypothalamus or pituitary. In case of high or low TSH, please check FT3, FT4, Thyroid antibodies & correlate with clinical findings, medication history, radiological tests & other endocrinological test reports. Repeat if necessary.

**\*\*End Of Report\*\***

*M. Lodh*  
**Dr. Moushumi Lodh**  
MBBS, MD (Biochemistry), MHA, Executive  
Director- Lab Services, Healthworld  
Hospitals, Reg No: 71993 (WBMC)

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## Department of Laboratory Services

Patient Name	MRS. CHHANDA BANDOPADHYAY	Lab No	829039
UHID	230785	Sample Date	28/02/2022 9:33AM
Age/Gender	49 Yrs/Female	Receiving Date	28/02/2022 10:43AM
Bed No/Ward	OPD	Report Date	28/02/2022 2:26PM
Referred By	Dr. S.k Roy	Report Status	Final
Prescribed By	Dr. Self		

Test Name	Result	Unit	Biological Ref. Range	Method
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### Clinical Biochemistry

#### Lipid Profile Basic [PANEL] (T.Chol,Trig,HDL,LDL,VLDL)

Sample: Serum

Total Cholesterol	140.48	mg/dL	0 - 200	CHO-POD
Triglyceride	89.35	mg/dL	0 - 150	
HDL Cholesterol	52.52	mg/dL	40 - 60	Homogeneous, Enzymatic
LDL Cholesterol	75.39	mg/dL	0 - 100	Homogeneous, Enzymatic
VLDL Cholesterol	17.87	mg/dL	10 - 38	Calculated
HDL / LDL Cholesterol Ratio	<b>0.70</b>	Ratio	0.30 - 0.40	Calculated
Total Cholesterol / HDL Ratio	<b>2.67</b>	Ratio	3.30 - 4.40	Calculated

#### Liver Function Test [Panel] (Bil-Total, Direct, Indirect, AST,ALT, ALK, GGT, Protein, alb, glob, A/G ratio)

Sample: Serum

Bilirubin Total	0.42	mg/dL	0.10 - 1.20	Diazo Method
Bilirubin Direct	0.17	mg/dL	0.00 - 0.30	Diazo Method
Bilirubin Indirect	0.25	mg/dL	0.00 - 0.75	Calculated
Aspartate Transaminase	16.78	U/L	0.00 - 31.00	IFCC Without P5P
Alanine Transaminase	12.38	U/L	0.00 - 34.00	IFCC Without P5P
Gamma glutamyl transferase	13.30	U/L	9.00 - 58.00	Enzymatic colorimetric
Alkaline Phosphatase [ALP]	100.20	U/L	35.00 - 105.00	IFCC
Total Protein	<b>6.29</b>	g/dL	6.40 - 8.30	Biuret Method
Albumin	4.06	g/dL	3.50 - 5.20	BCG
Globulin	2.23	g/dL	2.00 - 3.50	Calculated
Albumin/Globulin Ratio	1.8		1.0 - 2.0	Calculated

*M. Lodh*  
**Dr. Moushumi Lodh**  
MBBS,MD (Biochemistry), MHA, Executive  
Director- Lab Services,Healthworld  
Hospitals,Reg No: 71993 (WBMC)

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# Apollo Laboratory

RG/8, APOLLO AVENUE, BIDHANNAGAR  
DURGAPUR - 713212, PHONE : (0343) 253 5937 / 9002842230

REG NO. : Apollo Path 2020 / 1  
NAME : Mrs. Chhanda Bandopadhyay  
REF BY : Dr. Tania Mukherjee

AGE : 49 Years  
SEX : Female  
DATE : 15/03/2022

## HAEMOGRAM

TESTS	RESULTS	UNIT	REFERENCE RANGE
Haemoglobin	: 10.2	gm%	12 - 15
Total WBC Count	: 5700	/cmm	4000 - 11000

## DIFFERENTIAL COUNT

Neutrophil	: 61	%	50 - 65
Lymphocytes	: 34	%	20 - 45
Eosinophil	: 03	%	1 - 4
Monocytes	: 02	%	2 - 8
Basophil	: 00	%	0 - 1

## RBC Indices

Haematocrit (HCT)	: 31.7	%	36 - 46
R.B.C. count	: 3.64	mil./cmm	3.8 - 5.8
MCV	: 87.1	fL	76 - 96
MCH	: 28.0	pg	27 - 32
MCHC	: 32.2	gm/dl	32 - 36
RDW-CV	: 13.3	%	11.5 - 14.5
RDW-SD	: 45.9	fL	36 - 56
Platelet Count	: 194000	/cmm	150000 - 450000
Absolute Eosinophil Count	: 171	/cumm	40 - 400

\*\*\*End of Report\*\*\*

**Dr. Shyamali Dutta**

MD (Path), DM (Hematopathology) A.I.I.M.S, New Delhi

**Dr. S.K. Kaitkay**

MD (Path)

Hormone assays, Biopsy, Pap Smear  
Specialist Consultation for Haematological (Blood) Diseases by Appointment  
Lab Timings 8 A.M. to 7 P.M. (Saturday Closed)

HOME COLLECTION FACILITY AVAILABLE





# Apollo Laboratory

RG/8, APOLLO AVENUE, BIDHANNAGAR  
DURGAPUR - 713212, PHONE : (0343) 253 5937 / 9002842230

REG NO. : Apollo Path 2020 / 1

NAME : Mrs. Chhanda Bandopadhyay

REF. BY : Dr. Tania Mukherjee

AGE : 49 Years

SEX : Female

DATE : 15/03/2022

## BIOCHEMISTRY

TESTS	RESULTS	UNITS	REFERENCE RANGE
Serum Urea	: 21.6	mg/dl	10 - 45
Serum Creatinine	: 0.89		<1.5 mg/dl

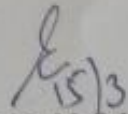
## SEROLOGY REPORT

C-Reactive Protein (Nephelometry)	8.36		<10 mg/L
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\*\*\*End of Report\*\*\*

**Dr. Shyamali Dutta**

MD (Path), DM (Hematopathology) A.I.I.M.S, New Delhi

  
**Dr. S.K. Kaitkay**

MD (Path)

Hormone assays, Biopsy, Pap Smear  
Specialist Consultation for Haematological (Blood) Diseases by Appointment  
Lab Timings 8 A.M. to 7 P.M. (Saturday Closed)

HOME COLLECTION FACILITY AVAILABLE



# SERUM

ANALYSIS CENTRE (P) LTD.

#OSS

Lab Code : A5-DGP-000259193

Bill Date : 15-Mar-2022

Reg number : DGP-15032022-00117

Report Date : 16-Mar-2022

Name : CHHANDA BANDOPADHYAY

Age : 49 Year(s), Sex : Female

Ref Doctor : Dr. TANIA MUKHERJEE

Regd. Office &amp; Central Laboratory : 82/4B, Bidhan Sarani, Kolkata - 700 004

North Kol. Centre : 13/1, Bhupen Bose Avenue, Kolkata - 700 004

South Kol. Centre : 8/42B, Fern Road, Gariahat, Kolkata - 700 019

Salt Lake Centre : 517, Shantinagar, Salt Lake, Sec-IV, Kolkata - 700 096

Howrah Centre : 177, Netaji Subhas Road, Haldia Para, Howrah - 711 101

Asansol Centre : 1345, Apur Garden (West) Near Bhagat Singh More, Asansol - 713 204

Siliguri Centre : 47, S. F. Road, Siliguri Bazar, Dist. Darjeeling, Pin - 734 006

Mumbai City Office : 533, Master Mind IV, Royal Palm Goregaon East, Mumbai - 400 065

## REPORT ON THE EXAMINATION OF BLOOD

### INVESTIGATION

SERUM IgE.

Ig E1

Ig E2

Ig E3

### RESULT

26.81 IU/ml

32 %

15 %

53 %

### BIOLOGICAL REFERENCE INTERVAL

UPTO 100

UPTO 60%

UPTO 24%

UPTO 16%

**REMARK:-**RISE IN SUBTYPE E1 INDICATES ALLERGY TO EXOGENOUS ALLERGENS eg POLLENS, DANGERS, DUST etc. RISE IN SUBTYPE E2 INDICATES U.R.T.I ASSOCIATED ALLERGIC PHENOMENA. SUBTYPE E3 RISE IN INDICATIVE ENDOGENOUS & FOOD RELATED ALLERGENS.

### INSTRUMENTS USED :

1. AUTOMATED PC-RIA MAS STRATEC, GERMANY.
2. BECKMAN COULTER ACCESS® 2, U.S.A.
3. BECKMAN COULTER UNICCEL™ DXI 600, U.S.A.
4. ADVIA Centaur (SIEMENS, U.S.A.)
5. VITROS ECI, Johnson & Johnson, (U.S.A).
6. AUTOMATED ELISA PLATE READER.

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

# Checked Twice

---END OF REPORT---



Dr. Chirashi Goswami  
M.D Pathology

Dr. Siddhartha Chaudhuri  
MBBS(CAL), MD (BIO)(CAL)



DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	829076
Patient Name	MRS. CHHANDA BANDOPADHYAY	Age/Gender	49 Yrs/Female
Referred By	DR S.K. ROY, MD(CAL).CON PHYSICIAN	Bed No/Ward	OPD
Prescribed By	Dr. Self	Scan Date	
Bill Date	28/02/2022 10:00AM	Report Date	28/02/2022 1:34PM
Company	Cash	Report Status	Final

**X-RAY: CHEST PA**

Visualized lung fields are clear. No air space opacity seen.

Both the Costophrenic angles are clear.

Trachea is central in position. No mediastinal displacement seen.

Both the hila are normal.

Cardiac size and silhouette is normal.

Both hemi-diaphragms are normal in position and contour.

Bony thorax is normal.

Soft tissues of the chest are normal.

**IMPRESSION: Normal Radiograph.**

-----\*\* End Of Report \*\*-----

Dr. Srikanth Rathod  
MD (Radio Diagnosis)  
Consultant- Radiologist





DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	829076
Patient Name	MRS. CHHANDA BANDOPADHYAY	Age/Gender	49 Yrs/Female
Referred By	DR S.K. ROY, MD(CAL).CON PHYSICIAN	Bed No/Ward	OPD
Prescribed By	Dr. Self	Scan Date	
Bill Date	28/02/2022 10:00AM	Report Date	28/02/2022 6:16PM
Company	Cash	Report Status	Final

CT SCAN -NCCT BRAIN /HEAD / SKULL

*Technique: Plain MDCT (512 slice) Brain done with multiplanar reconstruction.*

**OBSERVATION**

A well defined fluid attenuating dome shaped lesion noted in floor of the right maxillary sinus (likely mucus retention cyst).

Moderate mucosal thickening associated with central hyperdense content noted in floor of the left maxillary sinus. No bony erosions noted (likely acute fungal sinusitis.)

Brain parenchyma normal with normal gray white matter differentiation.

Ventricular systems are normal. No hydrocephalus.

Septum midline.

Brain stem & cerebellum normal.

Sellar and parasellar regions normal.



DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	829076
Patient Name	MRS. CHHANDA BANDOPADHYAY	Age/Gender	49 Yrs/Female
Referred By	DR S.K. ROY, MD(CAL).CON PHYSICIAN	Bed No/Ward	OPD
Prescribed By	Dr. Self	Scan Date	
Bill Date	28/02/2022 10:00AM	Report Date	28/02/2022 6:16PM
Company	Cash	Report Status	Final

CT SCAN -NCCT BRAIN /HEAD / SKULL

IMPRESSION

- Mucus retention cyst in right maxillary sinus.
- Moderate mucosal thickening associated with central hyperdense content in floor of the left maxillary sinus. (Likely Acute fungal sinusitis)

-----\*\* End Of Report \*\*-----

Dr. Srikanth Rathod  
MD (Radio Diagnosis)  
Consultant- Radiologist



**DEPARTMENT OF CARDIAC SCIENCES**

UHID :	230785	RIS No. :	844971
Patient Name :	Mrs. Chhanda Bandopadhyay	Age/Gender :	49 Y/F
Referred By :	Dr. Tania Mukherjee	Bed No/Ward :	OPD
Bill Date :	23/03/2022 9:41AM	Scan Date :	23/03/2022 9:41AM
Report Date :	23/03/2022 10:37AM	Report Status :	Final

**ECHOCARDIOGRAM WITH DOPPLER**

**SUMMARY**

- Normal chamber size.
- Normal valve morphology and function.
- No RWMA.
- Great arteries normal in size and relation.
- Interatrial and interventricular septum intact.
- Normal LV systolic function.
- Normal diastolic function.
- Systemic and pulmonary venous drainage normal.
- No PAH.
- Pericardium normal.

**FINAL IMPRESSION :**

- No RWMA.
- Normal LV systolic function.
- No PAH.

Dr. Ashok Kumar Parida  
MD (Gen. Med.), DNB (Cardio.)  
MNAMS, FACC, FESC  
Regn. No.: 73445 (WBMC)

Dr. (Major Retd.) INDRANIL DEV.  
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Regd. No.: 64993 (WBMC)

Dr. Priya Ranjan Kumar  
MD (Paed), DM (Cardio)  
Regn. No.: 85818 (WBMC)

Dr. Subhaji Mukherjee  
MD (Physician), PGDCC  
Regn. No.: 11-41972 (MCI)  
Non Invasive Cardiology  
Regd. No.: 11-41972 (MCI)

Dr. Ashok Kumar Giri  
MD (Physician), PGDCC  
Regn. No.: 80007 (WBMC)





**DEPARTMENT OF CARDIAC SCIENCES**

UHID :	230785	RIS No. :	844971
Patient Name :	Mrs. Chhanda Bandopadhyay	Age/Gender :	49 Y/F
Referred By :	Dr. Tania Mukherjee	Bed No/Ward :	OPD
Bill Date :	23/03/2022 9:41AM	Scan Date :	23/03/2022 9:41AM
Report Date :	23/03/2022 10:37AM	Report Status :	Final

**ECHOCARDIOGRAM WITH DOPPLER**

**M-mode Measurements Values :**

Aorta	25 mm	LV ed	50 mm
LA	39 mm	LV es	31 mm
RV	22 mm	IVS ed	09 mm
FS	30%	PW (LV)	09 mm
LVEF	60%	IVC	11/05 mm

**VALVES:-**

**MITRAL VALVE**

**Morphology**

:

:

AML Normal ;

PML Normal

No vegetation seen.

Subvalvular deformity (absent). E/E' = 9.1, E>A, DT = 148 ms, E/A ratio = 1.23

**Doppler**

:

Normal.

**Mitral stenosis**

:

Absent

**Mitral Regurgitation**

:

Absent

**TRICUSPID VALVE**

:

Morphology. No vegetation seen.

**Doppler**

:

Normal

**Tricuspid Stenosis**

:

Absent

**Tricuspid regurgitation**

:

Absent

TV Peak Gradient = 18 mm of Hg

**PULMONARY VALVE**

:

Normal. No vegetation seen.

**Morphology**

:

Normal

**Doppler**

:

Absent

**Pulmonary stenosis**

:

Absent

**Pulmonary regurgitation**

:

PASP = 23 mm of Hg

**AORTIC VALVE**

:

Normal. No vegetation seen.

**Morphology**

:

3

**No of cusps**

:

Normal

**Doppler**

:

Absent

**Aortic stenosis**

:

Absent

**Aortic regurgitation**

:

AV Peak Gradient = 5.5 mm of Hg

**CHAMBERS**

:-

Cavity normal. Walls normal in thickness and motion.

**Left Ventricle**

:

Normal ; No clots seen

**Left Atrium**

:

Normal.

**Right Atrium**

:

Normal.

**Right Ventricle**

:

Normal.

**OTHERS**

:-

Normal in size and relation

**GREAT ARTERIES**

:

Normal.

**PERICARDIUM**

:



PATIENT INFORMATION

Patient Name: MRS. CHHANDA BANDOPADHYAY

Handedness: RIGHT

History: ? Seizure

UHID NO: 230785

Age/Sex: 49Y /Female

OPD/IPD: OPD

TEST INFORMATION

State of consciousness: Awake

Referring By: DR. S.K ROY

Technologist: AYAN MONDAL, RIYA PAL

Test Date: 28.02.2022

Hyperventilation: Uneventful

Photic stimulation: Uneventful

**FINDINGS:**

Awake EEG Showed back ground of 7-8Hz,

Responses to visual stimuli seen symmetrically.

During hyperventilation and photic stimulation, no significant changes observed.

There were no abnormal epileptiform discharges seen in this tracing.

**IMPRESSION: NORMAL AWAKE EEG. Please correlate clinically.**

DR. UPENDRA KUMAR SHAH

MD (Med), DM (Neuro)

Consultant Neurologist





DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	829076
Patient Name	MRS. CHHANDA BANDOPADHYAY	Age/Gender	49 Yrs/Female
Referred By	DR S.K. ROY, MD(CAL).CON PHYSICIAN	Bed No/Ward	OPD
Prescribed By	Dr. Self	Scan Date	
Bill Date	28/02/2022 10:00AM	Report Date	28/02/2022 12:28PM
Company	Cash	Report Status	Final

USG - WHOLE ABDOMEN

Liver is normal in size, position, contour and outline. *Parenchymal echotexture is mild to moderately increased.* No focal lesion seen. Intra – hepatic vascular and biliary radicles appear normal. Right lobe of liver measuring 14.5 cm.

Portal vein is normal in course and caliber. Normal hepatopetal flow seen with normal velocity. No collaterals seen. Portal vein measuring 8.4 mm at porta hepatis.

Gallbladder is normal in position, distension, size, shape and wall thickness. No calculus seen within its lumen. No mass lesion seen. No pericholecystic collection seen. No enlarged portal lymph nodes seen.

Common bile duct is normal in course and caliber. No intraluminal focal lesion or calculus seen. CBD is measuring 2.0 mm in its max luminal diameter.

Pancreas is normal in position, size, shape, outline and echopattern. No focal mass lesion seen. Pancreatic duct is not dilated. No calcification seen. No peripancreatic collection seen.

Spleen is normal in position, size, shape, outline and homogeneous echopattern. No focal lesion seen. Splenic vein at hilum is normal. Spleen measuring 8.9 cm in long axis.

Right kidney is normal in size, shape, position, outline and axis. Cortical echotexture is normal. Cortico-medullary differentiation is preserved. No evidence of hydronephrosis or renal calculi seen. No focal solid or cystic lesion seen. Right kidney measures: 9.8 x 3.6 cm.

Right ureter is not dilated.

Left kidney is normal in size, shape, position, outline and axis. Cortical echotexture is normal. Cortico-medullary differentiation is preserved. No evidence of hydronephrosis or renal calculi seen. No focal solid or cystic lesion seen. Left kidney measures: 9.9 x 4.7 cm.

Left ureter is not dilated.





DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	829076
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Referred By	DR S.K. ROY, MD(CAL).CON PHYSICIAN	Bed No/Ward	OPD
Prescribed By	Dr. Self	Scan Date	
Bill Date	28/02/2022 10:00AM	Report Date	28/02/2022 12:28PM
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USG - WHOLE ABDOMEN

**Urinary bladder** is distended with normal in size, shape, position, distension and wall thickness. Content is anechoic and without any abnormal echoes. No calculus is seen. No focal mass lesion is seen.

**Uterus** is normal in position, size, shape and anteverted. Homogeneous myometrial echo seen. No focal lesion seen in myometrium. The endometrial canal echoes appear normal. Endometrial thickness measuring 3.1 mm, central and echogenic. No focal lesion or collection seen in endometrium.  
Uterus measuring 7.0 x 2.4 x 4.4 cm.

**Both ovaries** are not visualized.

No adnexal mass lesion or collection seen. No POD fluid seen.

No enlarged retroperitoneal lymph nodes seen. Retroperitoneal structure appears normal.

No free fluid seen in abdomen and pelvis.

Both iliac fossa appear normal. No focal lesion or collection is seen.

**IMPRESSION:**

- Fatty liver grade I to II.



DEPARTMENT OF RADIOLOGY & IMAGING

UHID	230785	RIS No	829076
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Prescribed By	Dr. Self	Scan Date	
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Company	Cash	Report Status	Final

USG - WHOLE ABDOMEN

-----\*\* End Of Report \*\*-----

Dr. Shis Mahammad Pail  
MBBS, MD (Radio-Diagnosis), Regn  
No:73040 (WBMC)  
Consultant - Radiology





**DEPARTMENT OF CARDIAC SCIENCES**

UHID :	230785	RIS No. :	829076
Patient Name :	Mrs. Chhanda Bandopadhyay	Age/Gender :	49 Y/F
Referred By :	Dr. Self	Bed No/Ward :	OPD
Bill Date :	28/02/2022 10:00AM	Scan Date :	28/02/2022 10:00AM
Report Date :	28/02/2022 1:04PM	Report Status :	Final

**ECHOCARDIOGRAM WITH DOPPLER**

**SUMMARY**

- Normal chamber size.
- **Valves: Mild TR.**
- No RWMA.
- Great arteries normal in size and relation.
- Interatrial and interventricular septum intact.
- Normal LV systolic function.
- **Grade I diastolic dysfunction.**
- Systemic and pulmonary venous drainage normal.
- No PAH.
- Pericardium normal.

**FINAL IMPRESSION :**

- No RWMA.
- Normal LV systolic function.
- No PAH.

Dr. Joy Sanyal  
MD (Gen. Med.), DM (Cardio.), FESC  
Regn. No.: 77499 (WBMC)

Dr. Ashok Kumar Parida  
MD (Gen. Med.), DNB (Cardio.),  
MNAMS, FACC, FESC  
Regn. No.: 73445 (WBMC)

Dr. (Major Retd.) Indranil Dev  
MD (Gen. Med.), DNB (Cardiology)  
Regn. No.: 54678 (WBMC)

Dr. Satyendra Nath Dutta  
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Regn. No.: 64993 (WBMC)

Dr. Priya Ranjan Kumar  
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Dr. Subhajit Mukherjee  
MD (Physician), PGDCC  
Regn No.: 11-41972 (MCI)

Dr. Ashok Kumar Giri  
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Non invasive Cardiology  
Regn No. 80007 (WBMC)





## DEPARTMENT OF CARDIAC SCIENCES

UHID :	230785	RIS No. :	829076
Patient Name :	Mrs. Chhanda Bandopadhyay	Age/Gender :	49 Y/F
Referred By :	Dr. Self	Bed No/Ward :	OPD
Bill Date :	28/02/2022 10:00AM	Scan Date :	28/02/2022 10:00AM
Report Date :	28/02/2022 1:04PM	Report Status :	Final

## ECHOCARDIOGRAM WITH DOPPLER

### M-mode Measurements Values :

Aorta	25 mm	LV ed	46 mm
LA	39 mm	LV es	31 mm
RV	22 mm	IVS ed	10 mm
FS	30%	PW (LV)	10 mm
LVEF	60%	IVC	11/05 mm

### VALVES:-

#### MITRAL VALVE

##### Morphology

AML Normal ;  
PML Normal  
No vegetation seen.

Subvalvular deformity (absent). E/E' = 09, A>E, DT = 187 ms, E/A ratio = 0.7

##### Doppler

Mitral stenosis

Mitral Regurgitation

#### TRICUSPID VALVE

##### Doppler

Tricuspid Stenosis

Tricuspid regurgitation

Morphology. No vegetation seen.  
Abnormal.  
Absent  
Mild  
TV Peak Gradient = 20 mm of Hg

#### PULMONARY VALVE

##### Morphology

##### Doppler

Pulmonary stenosis

Pulmonary regurgitation

Normal. No vegetation seen.  
Normal  
Absent  
Absent  
PASP = 25 mm of Hg

#### AORTIC VALVE

##### Morphology

No of cusps

##### Doppler

Aortic stenosis

Aortic regurgitation

Normal. No vegetation seen.  
3  
Normal  
Absent  
Absent  
AV Peak Gradient = 08 mm of Hg

### CHAMBERS

Left Ventricle

Left Atrium

Right Atrium

Right Ventricle

### OTHERS

GREAT ARTERIES

PERICARDIUM

Cavity normal. Walls normal in thickness and motion.  
Normal ; No clots seen  
Normal.  
Normal.  
Normal in size and relation  
Normal.



## DEPARTMENT OF NON INVASIVE CARDIOLOGY

NAME	MRS. CHHANDA BANDOPADHYAY	AGE/SEX	49 YEARS/FEMALE
REF. DR.	DR. S. K. ROY	DATE	28.03.2022
UHID NO.	230785	OPD / IPD	OPD
DONE BY DR.	Dr. A. Ganguly / Dr. A.K. Parida / Dr. I. Dev / Dr. J. Sanyal / Dr. S.N. Dutta / Dr. S. Mukherjee / Dr. A.K. Giri		

### REPORT OF HOLTER MONITORING (24 HOURS)

INDICATION	:	Syncope
BASIC RHYTHM	:	Sinus rhythm
MINIMUM HEART RATE	:	65 Beats/Min at 02:50:24 am.
MAXIMUM HEART RATE	:	132 Beats/Min for sinus tachycardia at 17:40:38 pm.
AVERAGE HEART RATE	:	85 Beats/Min.
TOTAL BEATS ANALYSED	:	120637 Beats.
SUPRAVENTRICULAR PREMATURE COMPLEXES	:	00 (< 1% of total QRS complexes)
VENTRICULAR PREMATURE COMPLEXES	:	14 (< 1% of total QRS complexes)
TACHYARRHYTHMIA	:	Episodes of sinus tachycardia seen (10% Total), Few isolated ventricular ectopic noted.
BRADYARRHYTHMIA	:	No episodes of sinus bradycardia seen (0 % Total),
PAUSE	:	The longest R-R interval was 0.97 sec. at 11:40:42 am. No significant pause (>2.5 Sec) or AV block noted.
ISCHAEMIC EPISODES	:	No significant ST depression seen.

### IMPRESSION :-

1. Baseline sinus rhythm with episodes of sinus tachycardia.
2. Few isolated ventricular ectopics seen.
3. No significant pause (>2.5 sec) or AV block seen.
4. No significant ST depression seen.
5. Patient did not report any symptom.

Dr. Ashok Kumar Parida  
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MNAMS, FACC, FESC  
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Dr. Joy Sanyal  
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Regn. No.: 77499 (WBMC)

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Regn. No.: 54678 (WBMC)

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MD (General Med.), DM (Cardio.)  
Regn. No.: 64993

Dr. Subhajit Mukherjee  
MD (Physician.), PGDCC  
Regn. No.: 11-41972 (MCI)

Dr. Ashok Kumar Giri  
MD (Physician), PGDCC  
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Associate Consultant  
Non Invasive Cardiology  
Regn. No. 80007 (WBMC)