

অধ্যাপক ডাঃ আলমগীর কবির

এমবিবিএস, এফসিপিএস(হেমাটোলজি)

রক্ত রোগ বিশেষজ্ঞ

সদস্য, এএসএইচ ও ইএইচএ

অধ্যাপক ও প্রাক্তন বিভাগীয় প্রধান, রক্ত রোগ বিভাগ

ঢাকা মেডিকেল কলেজ ও হাসপাতাল

Prof. Dr. Alamgir Kabir

MBBS, FCPS (Haematology)

Specialist in Blood Disorders

Member, ASH & EHA

Professor & Ex. Head, Department of Haematology

Dhaka Medical College & Hospital

BMDC Reg. No. A-16204

নাম : Md. Abdur Rahim

বয়স : 66y তারিখ : 29/9/2022

B-CLL.

cds: s. bilirubin
SGPT
s. creatinine
RBS
ECG
Echo

please less 35f.

Tab. Moxibae 400mg
O+O+1 ১০/২২

Rx

① Cap. Ibuprofen 140mg

2+0+0 amto. ৭০.

Protocol Recilbia - Ibuprofen Protocol.

② Tab Febux 40mg

0+0+1

③ Tab. Folicin 5mg

④ Cap. Surgel 20mg

1+0+1

Bangladesh Medical College
Hospital.

M.M. PW-2

Referred to R/P medicine)

BMCH.

29.9.2022



● HOUSE # 48, ROAD # 9/A, DHANMONDI, DHAKA-1209, BANGLADESH

● PHONE : 48115270-2, 48114040-1

● E-mail : idic@ibnsinatrust.com

● Web : www.ibnsinatrust.com

IBN SINA DIAGNOSTIC & IMAGING CENTER

ISO 9001:2015 Certified

HAEMATOLOGY REPORT

ID No. : **D357213**

Received : 29/9/2022 5:34PM
Print Date : 29/9/2022 8:48PM

Name : MD. ABDUR RAHIM

Sex: Male

Age: 66 y

Refd. by : Prof. Dr. Alamgir Kabir. MBBS, FCPS (Haematology)

Relevant estimations were carried out by Automated Haematology Analyzer Sysmex XN2000 & checked manually

Parameter	Result	Reference Value
Red Blood Cells		
Haemoglobin	10.9 g/dl	Adult: Men: 15.0±2.0, Women: 13.5±1.5 At birth: 13.5-19.5, 3 Days: 14.5-22.5 1 Month: 11-17, 2-6 Months: 9.5-13.5 2-6 Years: 11-14, 6-12 Years: 11.5-15.5
Total RBC	4.84 million/Cmm.	Men: 5.0±0.5, Women: 4.3±0.5
ESR	50 mm (Auto Analyzer)	Men: 0-10, Women: 0-20
PCV/HCT	0.35 l/l	Men: 0.45±0.05, Women: 0.41±0.05
MCV	71 fl	92±9
MCH	23 pg	29.5±2.5
MCHC	32 g/dl	33.0±1.5
RDW	18 %	12.8±1.2
NRBC	0.0 %	
White Blood Cells		
Total WBC	66,000 /Cmm.	Adult: 4,000-11,000 Child: 5,000-15,000 Infant: 6,000-18,000 At birth: 10,000-25,000
Circulating Eosinophils	120 /Cmm.	50-500
Differential Count		
Neutrophils	13 %	Adult: 40-75 Child: 20-50
Lymphocytes	85 %	Adult: 20-50 Child: 40-75
Monocytes	02 %	2-10
Eosinophils	00 %	2-6
Basophils	00 %	<1.0
Others	00 %	
Platelets		
Total Platelet Count	2,28,000 /Cmm	1,50,000-4,50,000
MPV	11.7 fl	8.0-9.5

Comment : CLL Binet stage A.

Checked by

Md. Fakhru Islam

Sr. Medical Technologist (Lab.) G-II
Ibn Sina Diagnostic & Imaging Center

PROF. DR. ALAMGIR KABIR

MBBS, FCPS (Haematology)
Consultant Haematology
Ibn Sina Diagnostic & Imaging Center

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4717986

2

IMMUNOLOGY REPORT



ID No. : D357213

Name : MD. ABDUR RAHIM

Refd. by : Prof. Dr. Alamgir Kabir. MBBS, FCPS (Haematology)

Specimen : Blood,

Delivery on: 30/9/2022 12:00PM

Printed on : 29/9/2022 9:00PM

Age: 66 y

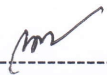
Sex: Male

Collected on: 29/9/2022 5:34PM


Received on: 29/9/2022 5:50PM

Estimations are carried out by Atellica Solution/Vitros 5600/Advia Centaur XPT Random Access Immunoassay Analyzer

Parameter	Test Result	Reference Value
Ferritin	270.60 ng/ml	Male: 12-300 Female: 10-150 Children : Newborn: 25-200 <1 month: 200-600 2-5 months: 50-200 6 months-15 years: 7-142



Checked by


Md. Ashraful Alam Talukder
B.Sc (Hons), M.Sc (Biochemistry) D.U.
Biochemist
Ibn Sina Diagnostic & Imaging Center

অধ্যাপক ডাঃ আলমগীর কবির

এমবিবিএস, এফসিপিএস হেমাটোলজি

রক্ত রোগ বিশেষজ্ঞ

সদস্য, আমেরিকান সোসাইটি অফ হেমাটোলজি

অধ্যাপক, হেমাটোলজি বিভাগ

ঢাকা মেডিকেল কলেজ হাসপাতাল, ঢাকা।

Professor Dr. Alamgir Kabir

MBBS, FCPS (HAEMATOLOGY)

Specialist in Blood Disorders

Member, American Society of Haematology

Professor, Haematology

Dhaka Medical College Hospital, Dhaka.

নামঃ Md. Abdur Rahim

বয়স : 66yrs . তারিখ :

Fever
CRP - 138 mg/L.

Absolute
Lymphocytosis

① Tab. Mezest 160 mg
1+0+0 ২০দিন
Rx
Tab LENOXIN 500 mg
1+0+0 ২০দিন

Tab Cap. Cefixim 200 mg
1+0+1 ২০দিন

adv: Immunophenotyping of CLL panel.

Referred to Prof. Dr. Kazi Rafiqul Abedin pleurless
35f.

25/8/2022

30.8.2022

২০১১৫০- case
s. ferritin

Rx ② Cap. Ibruxen-140mg
1+0+0+0+0 খাবারের পরে
Cap. Ibruxen 140mg
Cell: 01909105764

1+0+0 after food ২০১১৫

③ Tab. Febus 40 mg
0+0+1

④ Tab. Fohison 5 mg
1+0+0

⑤ Cap. Seryl 20 mg
1+0+1

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SL No:	D302396	Lab no: 4441892	
Name:	ABDUR RAHIM	Age: 66 yrs	Sex: Male
Specimen:	Whole Blood	Collected: 25/08/2022	Reported: 27/08/2022

Test Advised: Immunophenotyping- Non-Hodgkin Lymphoma and CLPD panel -Flow Cytometry

Gating strategy: CD45 vs SSC;

Events acquired: 50,000

Percent Cells Gated: 89.0%

The peripheral blood specimen demonstrates a predominant cell cluster in the lymphocyte region (low SSC with bright CD45 expression), which is 61.0% of the total cell population. This population includes 93.0% CD19⁺ B cells, 5% cells are CD3⁺ T cells and the remaining cells are CD56⁺ NK cells.

T cells are polyclonal and appear to be normal mature T cells.

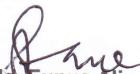
B cells are monoclonal with Lambda light chain restriction. On gating and further analysis of these critical cells express the following immunophenotypic properties-

Markers	Percentage	Intensity	Interpretation
CD19	~ 99.0%	Bright	Positive
CD20	~ 95.0%	Moderate to bright	Positive
CD5	~ 99.0%	Moderate	Positive
CD10	--	--	Negative
CD23	~ 72.0%	Dim to Moderate	Positive
CD200	~99.0%	Bright	Positive
Kappa	--	--	Negative
Lambda	~90.0%	Dim to moderate	Positive
CD79b	~50.0%	Dim	Positive
CD43	~97.0%	Moderate	Positive
CD38	--	--	Negative
CD25	--	--	Negative
CD103	--	--	Negative

Impression:

Flow cytometric analysis reveals a distinct population of atypical cells of which 93.0% are CD19 positive that represents B- lymphocytes. These cells are also positive for CD5, CD23, CD200, CD20, CD79b, CD43 and Lambda light chain but negative for CD10, CD25, CD3, CD5, CD56 and CD103.

The overall immunophenotypic findings are suggestive of Chronic Lymphocytic Leukemia/Small-cell Lymphocytic Lymphoma (CLL/SLL). Correlation with clinical features, peripheral blood smear findings, bone marrow morphology and cytogenetic studies are recommended.



Md. Eunus Ali

BSc (Hon'S) MSc (Biochem & Mol biology),
PGT (Flowcytometry), India
Molecular Biologist
IBN SINA Diagnostic & Imaging centre



Assoc. Prof. Dr. Farzana Rahaman
MBBS, FCPS (Haematology)
Consultant Haematology and Flow Cytometry
IBN SINA Diagnostic & Imaging centre

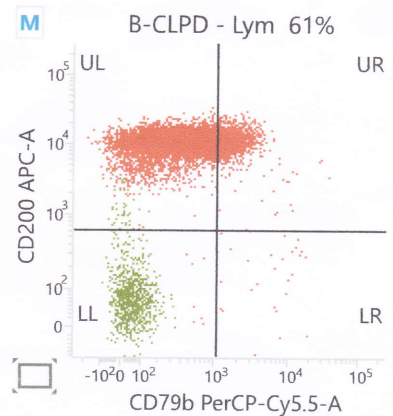
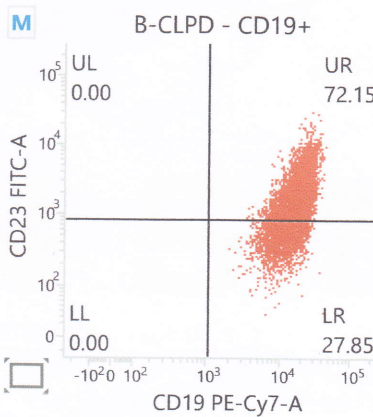
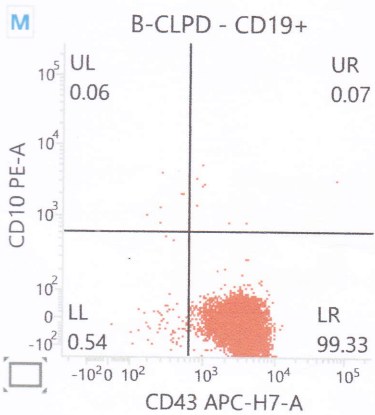
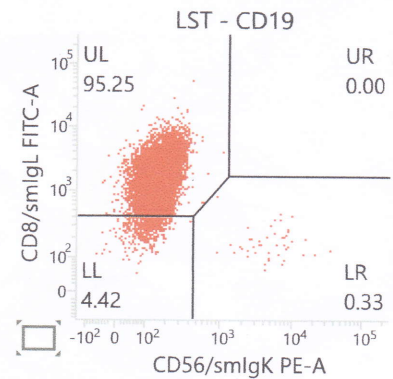
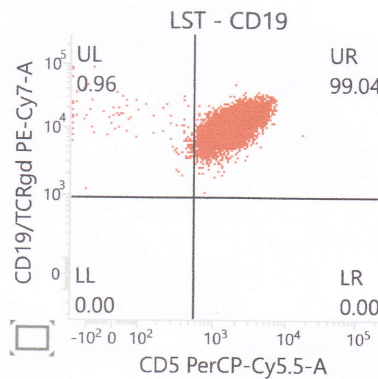
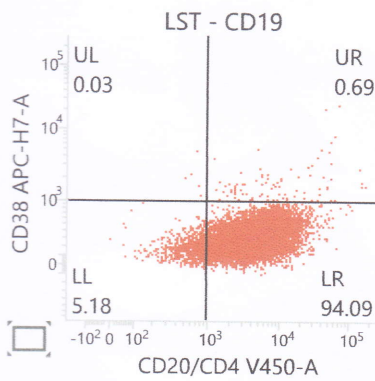
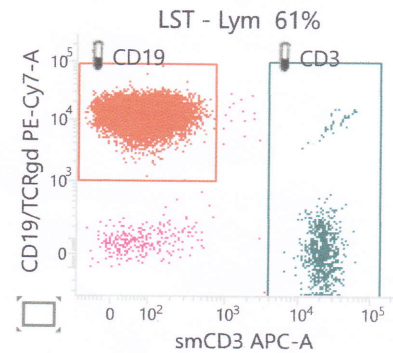
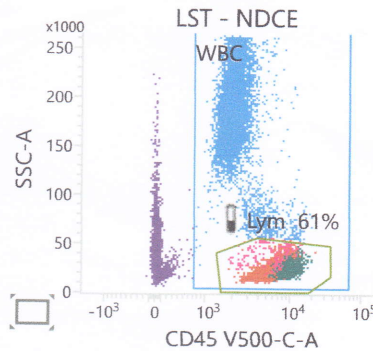
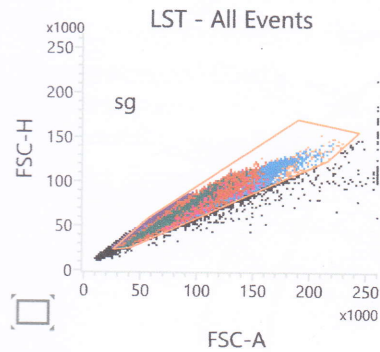


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Experiment: CLPD_D302396

Sample Name:



Md. Eunus Ali
Molecular Biologist

Assoc. Prof. Dr. Farzana Rahaman
MBBS, FCPS (Haematology)

অধ্যাপক ডাঃ আলমগীর কবির

এমবিবিএস, এফসিপিএস হেমাটোলজি

রক্ত রোগ বিশেষজ্ঞ

সদস্য, আমেরিকান সোসাইটি অফ হেমাটোলজি

অধ্যাপক, হেমাটোলজি বিভাগ

ঢাকা মেডিকেল কলেজ হাসপাতাল, ঢাকা।

Professor Dr. Alamgir Kabir

MBBS, FCPS (HAEMATOLOGY)

Specialist in Blood Disorders

Member, American Society of Haematology

Professor, Haematology

Dhaka Medical College Hospital, Dhaka.

নামঃ *Mohammad Abdur
Rahim*

বয়স : 65y

তারিখ : 5/12/2020

*cd4: / CBC, PBF
plean/oss / Bone marrow study
35% / Immunophenotyping of
Chronic Lymphoproliferative
disorder.*

recd

5.12.20.20

07/12/2020

৩৫০০ ৩০.-

৫৮০ ৩০.-

৩৫০০ ৩০.০০

Rx

Rb. Bisjod 15mg

1+0+0 6am

after food

Rb. Neobion

1+0+1 6am

after food.

recd

07/12/2020.



● HOUSE # 48, ROAD # 9/A, DHANMONDI, DHAKA-1209, BANGLADESH
 ● PHONE : 48115270-2, 48114040-1
 ● E-mail : idic@ibnsinatrust.com
 ● Web : www.ibnsinatrust.com

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2

HAEMATOLOGY REPORT



ID No. : **D280221**

Received : 5/12/2020 3:57PM
 Print Date : 6/12/2020 3:04PM

Name : MOHAMMAD ABDUR RAHIM.

Sex: Male

Age: 65 y

Refd. by : Prof.Dr. Alamgir Kabir, MBBS., FCPS (HAEMATOLOGY).

Relevant estimations were carried out by Automated Haematology Analyzer Sysmex XN2000 & checked manually

Parameter	Result	Reference Value
Red Blood Cells		
Haemoglobin	12.9 g/dl	Adult: Men: 15.0±2.0, Women: 13.5±1.5 At birth: 13.5-19.5, 3 Days: 14.5-22.5 1 Month: 11-17, 2-6 Months: 9.5-13.5 2-6 Years: 11-14, 6-12 Years: 11.5-15.5
Total RBC	5.60 million/Cmm.	Men: 5.0±0.5, Women: 4.3±0.5
ESR	01 mm (Auto Analyzer)	Men: 0-10, Women: 0-20
PCV/HCT	0.40 l/l	Men: 0.45±0.05, Women: 0.41±0.05
MCV	72 fl	92±9
MCH	23 pg	29.5±2.5
MCHC	32 g/dl	33.0±1.5
RDW	16 %	12.8±1.2
NRBC	0.0 %	
White Blood Cells		
Total WBC	<u>20,000</u> /Cmm.	Adult: 4,000-11,000 Child: 5,000-15,000 Infant: 6,000-18,000 At birth: 10,000-25,000
Circulating Eosinophils	200 /Cmm.	50-500
Differential Count		
Neutrophils	32 %	Adult: 40-75 Child: 20-50
Lymphocytes	<u>63 %</u>	Adult: 20-50 Child: 40-75
Monocytes	04 %	2-10
Eosinophils	01 %	2-6
Basophils	00 %	<1.0
Others	00 %	
Platelets		
Total Platelet Count	<u>2,78,000</u> /Cmm	1,50,000-4,50,000
MPV	11.6 fl	8.0-9.5

Blood Film :

RBC : Anisochromic and anisocytic.
 WBC : Mature with above distribution.
 Platelets : Adequate.
 Comment : Lymphocytosis.

PROF. DR. ALAMGIR KABIR
 MBBS, FCPS (Haematology)
 Consultant Haematologist
 Ibn Sina Diagnostic & Imaging Center



● HOUSE # 48, ROAD # 9/A, DHANMONDI, DHAKA-1209, BANGLADESH

● PHONE : 48115270-2, 48114040-1

● E-mail : idic@ibnsinatrust.com

● Web : www.ibnsinatrust.com

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2080881

2

BONE MARROW REPORT



ID No. : **D280221**

Received 5/12/2020 3:56PM

Print on :6/12/2020 2:56PM

Name : MOHAMMAD ABDUR RAHIM.

Sex : Male

Age: 65 y

Refd. by : Prof.Dr. Alamgir Kabir, MBBS., FCPS (HAEMATOLOGY).

Specimen : Bone Marrow

Bone marrow examination:

Hypercellular marrow with increased M/E ratio.

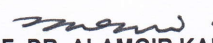
Erythropoiesis is active and normoblastic.

Granulopoiesis is also active and maturing into segmented form.

Megakaryocytes are normal in number and morphology.

However more than 30% marrow nucleated cells are mature lymphocytes.

Comment: Features are consistent with normal active marrow with lymphocytosis.


PROF. DR. ALAMGIR KABIR
MBBS, FCPS (Haematology)
Consultant Haematologist
Ibn Sina Diagnostic & Imaging Center



3

BIOCHEMICAL REPORT



ID No. : D360409

Name : MD. ABDUR RAHIM

Refd. by : Prof. Dr. Alamgir Kabir. MBBS, FCPS (Haematology)

Specimen : Blood,

Age: 66 y

Delivery on: 2/10/2022 3:00PM

Printed on: 1/10/2022 10:10PM

Sex: Male

Collected on: 1/10/2022 8:01PM

Received on: 1/10/2022 9:09PM

Estimations are carried out by Atellica Solution/Vitros 5600/ADVIA 1800 Random Access Chemistry Analyzer

Parameter	Test Result	Reference Value
Plasma Glucose Random	5.88 mmol/L	<11.11
Corr. Urine Sugar	Nil	
S. Creatinine	1.12 mg/dl	Male: 0.70-1.30 Female: 0.50-1.10 Child: 0.30-0.70
S. Bilirubin (Total)	0.23 mg/dl	Adult: 0.30-1.20 Neonatal: 1.50-12.00
S. ALT (SGPT)	30 U/L	Male:<45 Female:<34

Checked by


Md. Abul Kalam Azad
B.Sc (Hons), M.Sc (Biochemistry & Biotechnology)
Biochemist
Ibn Sina Diagnostic & Imaging Center

ID No. : **D360409** Printed at: Oct 01, 2022
Patient's Name : MD. ABDUR RAHIM Age : 66 year(s) Sex: Male
Refd. By : Prof. Dr. Alamgir Kabir. MBBS, FCPS (Haematology)

Thanks for referring the patient to us.

ECHOCARDIOGRAPHIC REPORT
(2-D & M-mode)

MEASUREMENTS

IVST	07	mm	LVIDd	50	mm	EDV		ml	MVA		cm ²
PWT	08	mm	LVIDs	32	mm	ESV		ml	EPSS		mm
RVWT		mm	FS	37	%	EF	66	%	E/A		
RV			LA	23	mm	AO	28	mm	MV ring		mm
RA			PA			ACS	17	mm	AV ring		mm

DESCRIPTION

LV- Cavity size and wall thickness are within normal limits, global and segmental wall motion are normal with good left ventricular function.
LA- Normal.
RV- Normal.
RA- Normal.
PA- Normal.
IAS & IVS- Intact.

- ◆ All cardiac valves are normal in appearance and motion.
- ◆ No pericardial pathology.
- ◆ No thrombus, vegetation or any other intracardiac mass seen.
- ◆ No intracardiac shunt detected.
- ◆ Atrioventricular, Ventriculoarterial & great arteries relationship normal.
- ◆ Pulmonary & systemic venous drainage normal.

Opinion: Echocardiographic findings (2-D & M-mode) are within normal limits.

Amir
21-10-22
Dr. Md. Monsurul Haque
MBBS, (Dhaka), MD (cardiology)
Associate Professor

National Institute of Cardiovascular Diseases (NICVD)

Prepared by-Tosir

Oct- 1-2022 8:13 PM

ID: D. 360409

Name: Md. Abdur Rahim.

Sex: Male

Birth Date:

65 Years

kg mmHg

Vent rate 96 bpm

PR int 146 ms

QRS dur 78 ms

QT/QTc int 320/ 373 ms

P/QRS/T axis 56/ 46/ 70 °

RV5/SV1 amp 1.720/ 0.725 mV

RV5+SV1 amp 2.445 mV

1100 Sinus rhythm
4068 Nonspecific Twave abnormality
9130 ** borderline ECG **

REPORT

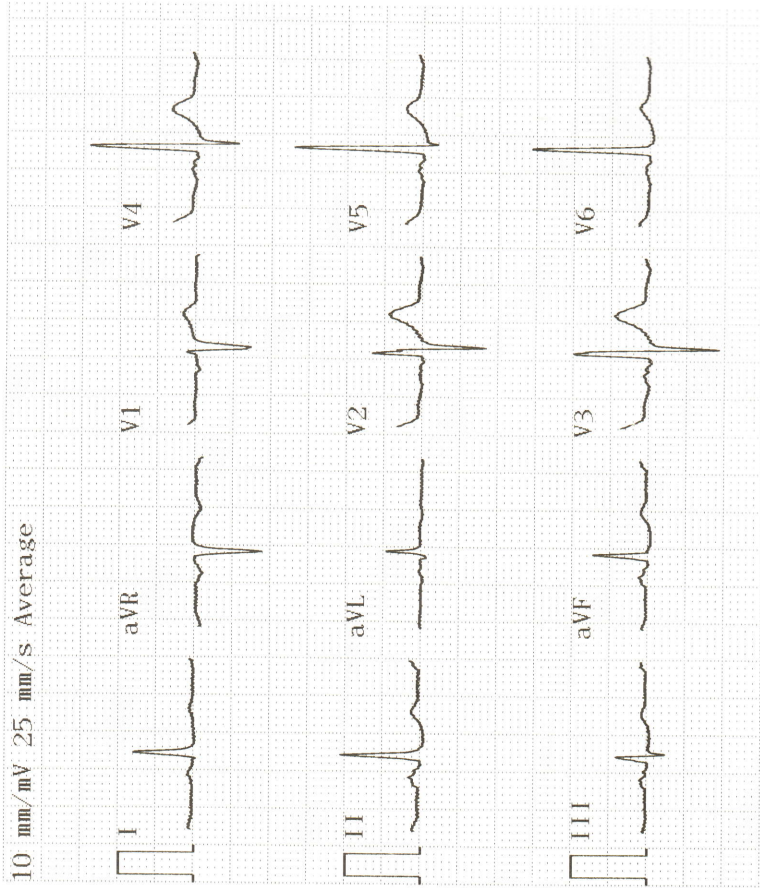
AXIS _____

POSITION _____

ST. SEGMENT _____

T. WAVE _____

OTHERS _____



Unconfirmed Report
Reviewed by:

19.10.22
 Dr. Md. MONSURUL HAQUE
 (Diploma in Cardiology)
 M.B.S. CONSULTANT
 National Institute of Cardiovascular Diseases (NICVD)

Prof. Dr. Kazi Rafiqul Abedin

MBBS, MS (Urology)

Specially Trained in Urogenital Malignancy
and Female Urology (Singapore)

Ex-Professor and Head of the Department (Urology)

National Institute of Kidney Diseases & Urology, Dhaka.

Ex-Clinical Associate (Urology)

Singapore General Hospital, Singapore.

অধ্যাপক ডাঃ কাজী রফিকুল আবেদীন

এমবিবিএস, এমএস (ইউরোলজী)

ইউরোলজীক্যাল ক্যান্সার সার্জারী ও

ফিমেল ইউরোলজীতে প্রশিক্ষণপ্রাপ্ত (সিঙ্গাপুর)

ইউরোলজিষ্ট এন্ড এন্ড্রোলজিষ্ট

মাবেক-অধ্যাপক ও বিভাগীয় প্রধান (ইউরোলজী)

ন্যাশনাল ইন্সটিটিউট অব কিডনী

ডিজিজেস এন্ড ইউরোলজী, ঢাকা।

Mr. Abdeea Rahim
65yrs.

28 AUG 2022

H/o Invasive TCC u/B.
→ Radical cystectomy +
Iliac Conduit surgery
- 2013

NW 90 Fever - recurrent attack
- 2 months
±

Diagnosis:
- Loxoroso Anemia (+)
- Abdomen Stomal hernia
Best urine draining
well into the collecting bag.
Bx. gonitales (-)
Oedema (-)

27.8.22

Immunophenotyping
- Non Hodgkin Lymphoma
→ Chr. Lymphocytic
Leukemia

Recommended:
Chr. Lymphocytic Leukemia
TWBC - 35900/ul
L - 81%
CBC - Hb - 10.6 g/dl
ESR - 38
S. Creatinine - 90 μmol/L
PSA, RBS, HSAIC - 6.5 μg/L
6.3 μmol/L
H/o Radical cystectomy +
u/B - NOT best
Iliac Conduit
hernia +
- Ref to Dr. Debashis
Ganguly.

24 hrs urinary output
- 2600cc.

Chamber :

COMFORT TOWER (3rd Floor)

167/B, Green Road, Dhaka.

Consulting Hour : 5.00 PM - 8 PM

সিরিয়ালের জন্য (মিজান : ০১৯১৭-২৮৩৭৬৮), ০১৭৩১-৯৫৬০৩৩

Prior Appointment for Consultations
will be appreciated.

Friday and Govt. Holiday-Closed

Phone :

01911-355040 (Mob)

02-222246338

02-222246339

30 AUG 2022

△ CLL

H₀ UB TCC (invasive)

→ Radical cystectomy
ileal conduit - 2013.

For proper management of CLL

Ref to Prof. Md Alauque Chowdhury
for proper management of CLL please.





Head Office : 167 /B, Green Road, Dhanmondi, Dhaka - 1205, Phone : 02-222246338-41 (Master Line)
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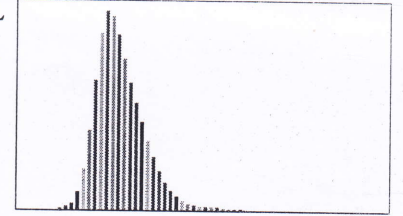
HAEMATOLOGY REPORT

Patient Id : D4952 Seq. No: 21625 Bed : Test Date : 29/08/2022 08:17:59 PM
 Patient's Name : Mr. Abdur Rahim Age : 66 Yrs Sex : Male
 Ref. By : Prof. (Dr.) Kazi Rafiqul Abedin MBBS, MS.

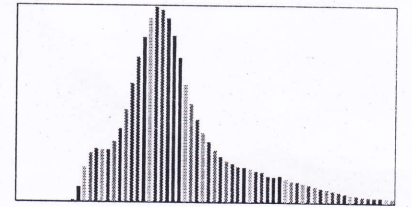
(Relevant estimations were carried out by mythic 22 Automated 5 Part Haematology Analyzer with checked manually)

Parameter	Results	REFERENCE RANGE
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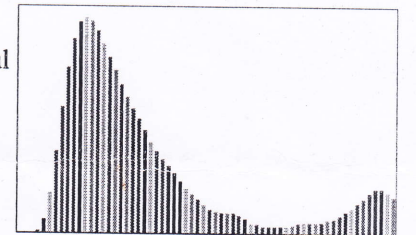
Haemoglobin(Hb)	10.6	g/dL	M:13-18, F:11.5-16.5 g/dL
CR(Westergren)	38	mm/1st hr	M:0-10, F:0-20 mm/1st hr
TOTAL WBC COUNT	35,900	/cumm	4,000 - 11,000 /cumm
DIFFERENTIAL COUNT			
Neutrophils	16	%	(40 - 70) %
Lymphocytes	81	%	(20 - 40) %
Monocytes	02	%	(02 - 10) %
Eosinophils	01	%	(01 - 06) %
Basophil	00	%	(00 - 01) %
Blast/Atypical		%	%
Myelocytes		%	%
TOTAL CIR. EOSINOPHIL COUNT		/cumm	50 - 400 /cumm
TOTAL PLATELET COUNT(PC)	354,000	/cumm	1,50,000-4,50,000 /cumm
MPV	9.1	fL	7.0 - 11.0 fL
PDW	16.6	%	10 - 18 %
PCT	0.323	%	0.200 - 0.500 %
RBC COUNT	4.89	m/ul	M: 4.5-6.5, F: 3.8-5.8 m/ul
T/PCV	33.7	%	M: 40-54%, F: 37-47%
MCV	68.9	fL	76-94 fL
MCH	21.7	pg	27-32 pg
MCHC	31.5	g/dL	29-34 g/dL
RDW	18.9	%	10-16%
Reticulocyte Count			0.2 - 2.3 %
Malarial Parasite			
Bleeding Time			01 - 07 Min
Coagulation Time			03 - 11 Min
Blood Film			



RBC CURVE



WBC CURVE



PLT CURVE

Tanong
 Checked by

Medical Technologist

Dr. Md. Kamrul Hasan
 MBBS, MD (Clinical Haematology)
 Associate Professor
 Colonel Malek Medical College, Manikganj

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BIOCHEMICAL EXAMINATION REPORT

Name	Mr. Abdur Rahim			Age	66 Y,0 M,0 D	
Memo	D49520822	Sex	Male	Date	29-AUG-22	
Refd. By	Prof.(Dr).Kazi Rafiqul Abedin MS(Urology)				663689	
Specimen	Blood			Print Time	8/29/2022 13:22:31 PM	

TEST NAME	RESULT	UNIT	NORMAL VALUE
Plasma Glucose Random	6.3	mmol/L	< 7.8 CUS Not Supplied
S.Creatinine	90	μmol/L	M:62-120; F:53-100 Child: 43-89
Hb A1C	6.5	%	Normal: 4.0% - 5.6% Prediabetes: 5.7% - 6.4% Diabetes: 6.5% and above

Medical Technologist

Verified by

Consultant
KAZI NAZRUL ISLAM
B.Sc(Hon's)M.Sc
Biochemistry & Molecular Biology(N.U)
Dept.of Biochemistry & Immunology
Comfort Diagnostic Centre(Pvt.)Ltd.

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Uttara Branch : 22, Rabindra Sarani, Sector # 7, Uttara, Dhaka, Phone : 58954726, 58956388, 01758-578205

IMMUNOLOGICAL ANALYSIS REPORT

Name	Mr. Abdur Rahim			Age	66 Y,0 M,0 D
Memo No	D49520822	Sex	Male	Date	28-AUG-22
Refd. By	Prof.(Dr).Kazi Rafiqul Abedin MS(Urology)				663725
Specimen	Blood			Print Time	8/29/2022 13:43:57 PM

Estimations are carried out by ARCHITECTi-1000-SR (Abbott) system

Multibatch random access Immunoassay Analyzer.

TEST NAME	RESULT	NORMAL VALUE
PSA	0.08 ng/ml	< 4.00 ng/ml

Medical Technologist

Verified By

Consultant
KAZI NAZRUL ISLAM
B.Sc(Hon's)M.Sc
Biochemistry & Molecular Biology(N.U)
Dept.of Biochemistry & Immunology
Comfort Diagnostic Centre(Pvt.)Ltd.



NAME	Mr. Abdur Rahim	MEMO NO.	D49520822
AGE	66 Yrs	SEX	Male
REFD. BY	Prof. Dr. Kazi Rafiqul Abedin, MBBS, MS	DATE	29.08.2022

ULTRASONOGRAM: WHOLE ABDOMEN

Clinical information: Invasive TCC UB.
Radical cystectomy with ileal conduit surgery on 2013.

Findings :

HEPATO BILIARY SYSTEM

LIVER:

The organ is normal in size (13.9 cm) and regular in outline. Hepatic parenchyma is homogeneous in echotexture with uniformly fine level echoes. No focal or diffuse lesion is seen. Portal vein, hepatic vein & their tributaries are normal. Porta-hepatis appears normal.

**** Power Doppler imaging shows no alteration of vascular flow (shown in photograph).**

BILIARY TREE:

Both intra & extrahepatic biliary tree are not dilated. CBD is of normal caliber.

GALL BLADDER:

Well filled with normal amount of fluid bile content & normal in contour. Fundus, body & neck appear normal in sonomorphology. Wall thickness is within normal limit. No echogenic structure is seen within its lumen.

PANCREAS:

Gland is normal in size. Head, neck, body & tail appear normal in shape & smooth in contour. Parenchyma is homogeneous in echotexture. Diameter of pancreatic head is 29 mm. Main pancreatic duct is not dilated.

SPLEEN:

Normal in size with uniform echopattern. Bipolar diameter of spleen is 11.7 cm. Splenic hilar vessels appear normal.

RENAL SYSTEM (KUB)

KIDNEYS:

Both the kidneys are normal in size, shape and position with well defined cortex and medulla. Cortical echogenicity, its thicknesses & cortico-medullary ratios are within normal limit in both the kidneys. Pelvicalyceal systems are not dilated. Diameters of right kidney are about 10.3 X 5.7 cm and of left kidney are about 10.7 X 5.9 cm. Cortical thickness in right kidney is about 1.1 cm & in left kidney is about 1.3 cm. Both the perinephric spaces are clear.

URINARY BLADDER:

Urinary bladder is not visualized (H/o radical cystectomy).

Neo-bladder (ileal conduit) is constructed in the right lower abdomen which is herniated across right lower anterior abdominal wall.

*** Please see the next page.

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Uttara Branch : 22, Rabindra Sarani, Sector # 7, Uttara, Dhaka, Phone : 58954726, 58956388, 01758-578205

NAME	Mr. Abdur Rahim	MEMO NO.	D49520822
AGE	66 Yrs	SEX	Male
		DATE	29.08.2022

LOWER ABDOMEN

PROSTATE:

Not visualized.

OTHERS:

No abnormal fluid collection is seen in the peritoneal cavity.

No abdomino-pelvic lymphadenopathy is noted.

- Impression:**
- Neo-bladder (ileal conduit) is constructed in the right lower abdomen which is herniated across right lower anterior abdominal wall.
 - POST RADICAL CYSTECTOMY STATUS.

With compliments for referring this patient:

Composed By : Jasmine

N.B.: Please bring this report & relevant doctor's paper for follow-up USG scan.
বিঃদ্রঃ পরবর্তী আল্ট্রাসোনোগ্রামের সময় এই রিপোর্ট এবং ডাক্তারের কাগজ-পত্র সঙ্গে আনতে হবে।

Dr. Debashish Ganguly

MBBS (DU), M. Phil (Radiology & Imaging)

ADMS (Canada), MACR (USA)

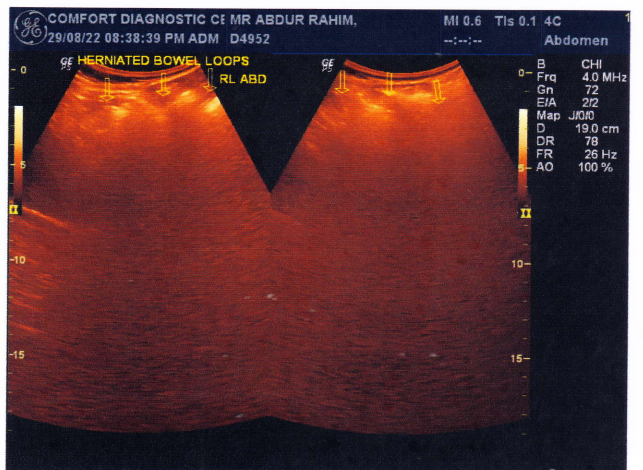
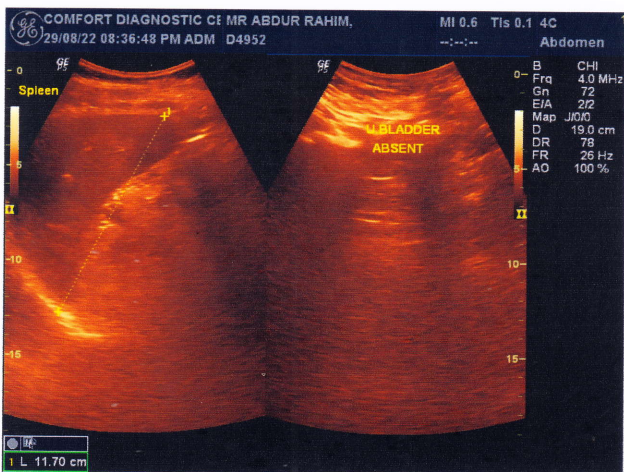
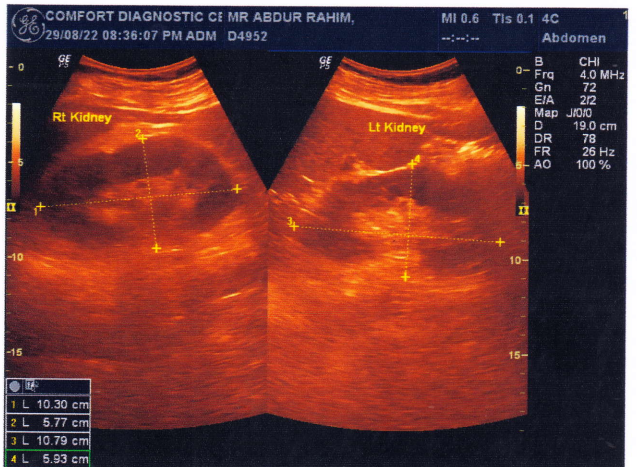
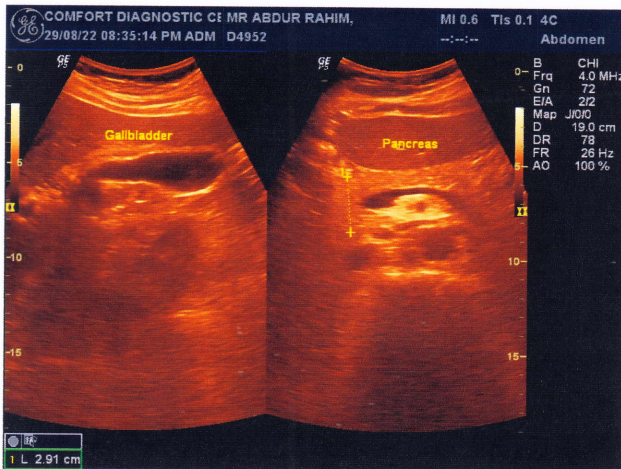
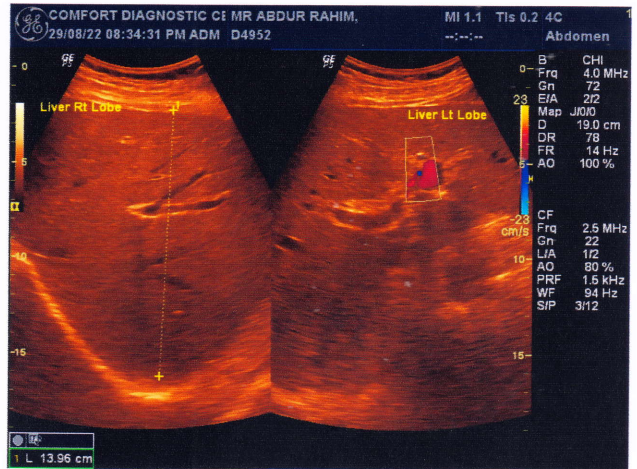
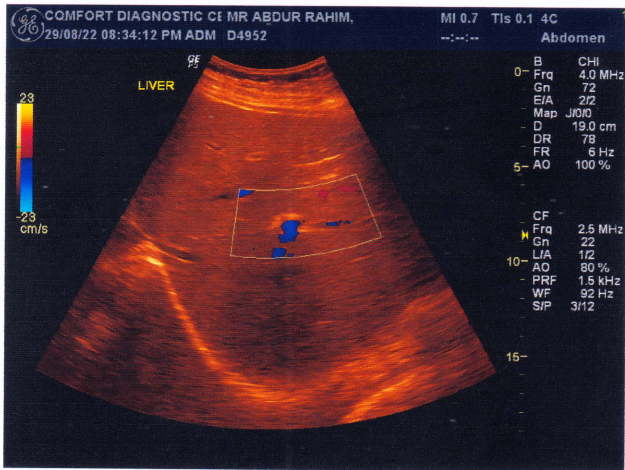
Sr. Consultant Radiologist

COMFORT DIAGNOSTIC CENTRE (PVT) LTD

Name: MR ABDUR RAHIM
Age

Patient Id: D4952
Sex

Date: 29/08/2022



Prof. Dr. Kazi Rafiqul Abedin

MBBS, MS (Urology)

Specially Trained in Urogenital Malignancy
and Female Urology (Singapore)

Ex-Professor and Head of the Department (Urology)

National Institute of Kidney Diseases & Urology, Dhaka.

Ex-Clinical Associate (Urology)

Singapore General Hospital, Singapore.

অধ্যাপক ডাঃ কাজী রফিকুল আবেদীন

এমবিবিএস, এমএস (ইউরোলজী)

ইউরোলজীক্যাল ক্যান্সার সার্জারী ও

ফিমেল ইউরোলজীতে প্রশিক্ষণপ্রাপ্ত (সিঙ্গাপুর)

ইউরোলজিষ্ট এন্ড এন্ড্রোলজিষ্ট

আবেক-অধ্যাপক ও বিভাগীয় প্রধান (ইউরোলজী)

ন্যাশনাল ইন্সটিটিউট অব কিডনী

ডিজিজেস এন্ড ইউরোলজী, ঢাকা।

Mr. Abdeer Rahim
64 yrs.

18 DEC 2021

Inv. Invasive TCC
WB.
→ Radical cystectomy
ileal conduit - 2013

Now for f/up.

Cl - Pain ±
Swelling ++
around stoma.

OBx

Stomal hernia

Stoma - draining draining well.

Recommended:

1. CBC. Hb - 12.2 g/dl
103/104
5.9
TWTSC - 27500/ μ L
L - 80%
3. Electrolytes - WNL.
2. USG Abdomen. - KSAJ
3. CX Ray - WNL
4. X-Ray Knees - WNL

Chamber :

COMFORT TOWER (3rd Floor)

167/B, Green Road, Dhaka.

Consulting Hour : 8.00 PM - 10 PM

সিরিয়ালের জন্য (মিজন : ০১৯১৭-২৮৩৭৬৮), ০১৭৩১-৯৫৬০৩৩

Prior Appointment for Consultations
will be appreciated.

Friday and Govt. Holiday-Closed

Phone :

01911-355040 (Mob)

02-222246338

02-222246339

25 DEC 2021

Adv:

1. CBC

TWBC - 25000/mm.
L - 73%
N - 22%

Comments on PBF.

- Ref to Prof. Alan Andrew

Haematologist.

- ? iron deficiency
- ? ~~anemia~~
- Leucocytosis

Medinova diagnostic cent.

~~San~~ Shanmardi

Rd - 4/A.

22 JAN 2022

Adv:



Haematologist's consultation. Please.



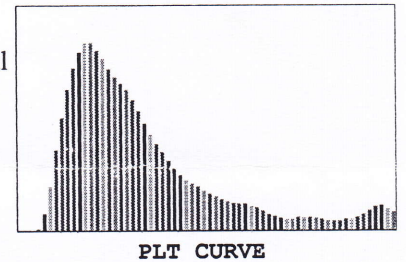
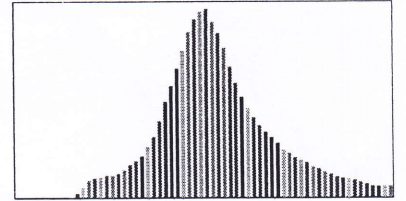
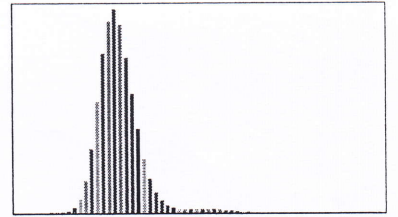


HAEMATOTOLOGY REPORT

Patient Id : D2639 Seq. No: Bed : Test Date : 19/12/2021 09:28:27 AM
 Patient's Name : Mr. Abdur Rahim Age : 64 Yrs Sex : Male
 Ref. By : Prof. (Dr.) Kazi Rafiqul Abedin, MBBS, MS.

(Relevant estimations were carried out by mythic 22 Automated 5 Part Haematology Analyzer with checked manually)

Parameter	Results	REFERENCE RANGE
Haemoglobin(Hb)	12.2 g/dL	M:13-18, F:11.5-16.5 g/dL
ESR(Westergren)	06 mm/1st hr	M:0-10, F:0-20 mm/1st hr
TOTAL WBC COUNT	27,500 /cumm	4,000 - 11,000 /cumm
DIFFERENTIAL COUNT		
Neutrophils	17 %	(40 - 70) %
Lymphocytes	80 %	(20 - 40) %
Monocytes	02 %	(02 - 10) %
Eosinophils	01 %	(01 - 06) %
Basophil	00 %	(00 - 01) %
Blast/Atypical	%	%
Myelocytes	%	%
TOTAL CIR. EOSINOPHIL COUNT	/cumm	50 - 400 /cumm
TOTAL PLATELET COUNT(PC)	247,000 /cumm	1,50,000-4,50,000 /cumm
MPV	10.0 fL	7.0 -11.0 fL
PDW	17.5 %	10 - 18 %
PCT	0.247 %	0.200 - 0.500 %
RBC COUNT	5.11 m/ul	M: 4.5-6.5, F: 3.8-5.8 m/ul
HCT/PCV	37.1 %	M: 40-54%, F: 37-47%
MCV	72.6 fL	76-94 fL
MCH	23.9 pg	27-32 pg
MCHC	32.9 g/dL	29-34 g/dL
RDW	15.2 %	10-16%
Reticulocyte Count		0.2 - 2.3 %
Malarial Parasite		
Bleeding Time		01 - 07 Min
Coagulation Time		03 - 11 Min



Blood Film Note : ? CLL.

Checked by

Medical Technologist

Dr. Md. Kamrul Hasan
 MBBS, MD (Clinical Haematology)
 Associate Professor
 Colonel Malek Medical College, Manikganj

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Uttara Branch : 22, Rabindra Sarani, Sector # 7, Uttara, Dhaka, Phone : 58954726, 58956388, 01758-578205

BIOCHEMICAL EXAMINATION REPORT

Name	Mr. Abdur Rahim			Age	64 Y,0 M,0 D	
Memo	D26391221	Sex	Male	Date	19-DEC-21	
Refd. By	Prof.(Dr).Kazi Rafiqul Abedin MS(Urology)				602065	
Specimen	Blood			Print Time	12/19/2021 12:55:01 PM	

TEST NAME	RESULT	UNIT	NORMAL VALUE
Plasma Glucose Random	5.9	mmol/L	< 7.8 CUS Not Supplied
S.Creatinine	103	µmol/L	M:62-120; F:53-100 Child: 43-89
Hb A1C	6.3	%	Normal: 4.0% - 5.6% Prediabetes: 5.7% - 6.4% Diabetes: 6.5% and above
Sodium(Na+)	140	mmol/L	136-145
Potassium(K+)	3.8	mmol/L	3.5-5.0
Chloride (Cl-)	101	mmol/L	96-106
Total Co2 (TCO2)	28	mmol/L	M-25-30/F-23-27

Medical Technologist

Verified by

Consultant

KAZI NAZRUL ISLAM

B.Sc(Hon's)M.Sc

Biochemistry & Molecular Biology(N.U)

Dept.of Biochemistry & Immunology

Comfort Diagnostic Centre(Pvt.)Ltd.

DIGITAL X-RAY REPORT

NAME.....	Mr. Abdur Rahim	MEMO NO...	12/D- 2639
AGE.....	64 Yrs	SEX... M	DATE..... 19.12.2021
REFD BY...	Prof. (Dr.) Kazi Rafiqul Abedin MBBS, MS (Urology)*		

Thank you for the courtesy of this referral

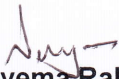
Chest P/A view:

Diaphragm is smooth in outline & seen in normal position.
Costophrenic angles are clear on either side.
Cardiac size and contour> Normal.
Lungs: The hila are normal in size and density.
The lung fields are clear.
No pleural effusion is seen.
Bony thorax appears normal.

Comment: Normal study.

KUB:

No abnormal radio-opaque shadow seen in KUB region.
No abnormal soft tissue shadow is noted in KUB region.


Dr. Nayema Rahman
MBBS, M.Phil (Radiology & Imaging.)
Assoc. Professor
BIRDEM

ULTRASONOGRAPHY REPORT

NAME	Mr. Abdur Rahim	MEMO NO.	D26391221
AGE	64 Yrs	SEX	Male
REFD. BY	Prof.(Dr.) Kazi Rafiqul Abedin, MBBS,MS	DATE	18.12.2021

ULTRASONOGRAM: WHOLE ABDOMEN

Clinical information: H/o Radical cystectomy due to bladder mass on 2013.
Findings :

HEPATO BILIARY SYSTEM

LIVER:

The organ is normal in size (13.6 cm) and regular in outline. Hepatic parenchyma is homogeneous in echotexture with uniformly fine level echoes. No focal or diffuse lesion is seen. Portal vein, hepatic vein & their tributaries are normal. Porta-hepatis appears normal.

**** Power Doppler imaging shows no alteration of vascular flow (shown in photograph).**

BILIARY TREE:

Both intra & extrahepatic biliary tree are not dilated. CBD is of normal caliber.

GALL BLADDER:

Well filled with normal amount of fluid bile content & normal in contour. Fundus, body & neck appear normal in sonomorphology. Wall thickness is within normal limit. No echogenic structure is seen within its lumen.

PANCREAS:

Gland is normal in size. Head, neck, body & tail appear normal in shape & smooth in contour. Parenchyma is homogeneous in echotexture. Diameter of pancreatic head is 29 mm. Main pancreatic duct is not dilated.

SPLEEN:

Normal in size with uniform echopattern. Bipolar diameter of spleen is 11.2 cm. Splenic hilar vessels appear normal.

RENAL SYSTEM (KUB)

KIDNEYS:

Both the kidneys are normal in size, shape and position with well defined cortex and medulla. Cortical echogenicity, its thicknesses & cortico-medullary ratios are within normal limit in both the kidneys. Pelvicalyceal systems are not dilated. Diameters of right kidney are about 9.6 X 4.4 cm and of left kidney are about 10.2 X 4.6 cm. Cortical thickness in right kidney is about 1.5 cm & in left kidney is about 1.7 cm. Both the perinephric spaces are clear.

URINARY BLADDER:

Urinary bladder is not visualized (H/o radical cystectomy due to bladder mass).

NAME	Mr. Abdur Rahim	MEMO NO.	D26391221
AGE	64 Yrs	SEX	Male
		DATE	18.12.2021

LOWER ABDOMEN

PROSTATE:

Normal in size & outline. Echotexture is homogeneous.
It measures about 2.9 X 2.6 X 3.5 cm and weighs about 14 gm.

SEMINAL VESICLES:

Both the seminal vesicles appear normal.

OTHERS:

No abnormal fluid collection is seen in the peritoneal cavity.
No abdomino-pelvic lymphadenopathy is noted.

Summary:

- * Normal sized regular outlined homogeneous echotextured LIVER.
- * Biliary Tree is normal & not dilated.
- * Gall Bladder is normal showing no echogenic structure within its lumen.
- * Pancreas is normal in size & echotexture.
- * Spleen is normal in size with uniform echotexture.
- * Well differentiated cortex & medulla with normal size & cortical echogenicity infer NORMAL KIDNEYS.
- * **Urinary Bladder is not visualized (H/o radical cystectomy due to bladder mass).**
- * Prostate is normal.

Impression: ➤ Normal Ultrasonographic findings of Whole Abdomen.
➤ Urinary bladder is not visualized (H/o radical cystectomy due to bladder mass).

Photograph enclosed

Composed By : Jasmine

N.B.: Please bring this report & relevant doctor's paper for follow-up USG scan.
বিঃদ্রঃ পরবর্তী আল্ট্রাসোনোগ্রামের সময় এই রিপোর্ট এবং ডাক্তারের কাগজ-পত্র সঙ্গে আনতে হবে।

Dr. Debashish Ganguly

MBBS (DU), M. Phil (Radiology & Imaging)
ADMS (Canada), MACR (USA)
Sr. Consultant Radiologist

Dr. Debashish Ganguly
18.12.21



DISCHARGE SUMMARY

File No.	2853/10/2013
Cabin No.	709
Name of the patient	Md. Abdur Rahim
Age	55 Yrs
Sex	Male
Consultant	Assoc. Prof. (Dr.) Kazi Rafiqul Abedin, MBBS, MS (Urology)
Date of Admission	20.10.2013
Date of Discharge	01.11.2013
Diagnosis	TCC of urinary bladder with BHP
Type of discharge	D with A

OPERATION NOTE

Name of the Operation	Cysto-prostato-urethrectomy + Ileal conduit
Date of Operation	25.10.2013
Name of Anaesthesia -	G/A
Name of Surgeon	Assoc. Prof. (Dr.) Kazi Rafiqul Abedin, MBBS, MS (Urology)
Name of Anaesthetist	Dr. Nargis
Name of Assistants	Dr. Salam, Dr. Zikrur, Dr. Alam, Dr. Pavel
INDICATION	Ca-urinary bladder.
Incision	Lower midline + Perineal

Procedure: UB approached through midline incision dissected free from all sides. Ureter slinged dissected down ligated and divided. Urethra mobilized and dissected upto ex. meatus through perineal incision bulbar and membranous prostate ureteric dissected free. Cysto-prostato-urethrectomy accomplished. Ileal conduit made from distal ileum, implanting both ureter in it. Ileostomy fixed. Haemostasis ensured. Dressing. Wound closed in layers.

Treatment to be continued at home:

- Cap. Cef-3 (200 mg): ১ + ০ + ১ - ৭ দিন
- Cap. Losectil (20 mg): ১ + ০ + ১ (খাবার আগে) - ৪ সপ্তাহ
- Inj. Kacin (500 mg): ১২ ঘন্টা পরপর - ৩ দিন
- Tab. Filmet (400 mg): ১ + ১ + ১ - ৫ দিন
- Tab. Purifen (200 mg): ১ + ০ + ১ - ৫ দিন
- Syp. Dexomethopan: ২ চামচ করে দিনে তিনবার - ৭ দিন

Advice:

- নিয়মিত ঔষধ খাবেন।
- কুসুম গরম পানিতে বসবেন দিনে দুইবার - ৭ দিন।
- ৬/১১/২০১৩ইং তারিখে স্যারের চেম্বারে এসে দেখা করবেন।

Dr. Sonia Ashraf Boudh

MEDICAL OFFICER
DATE: 01.11.2013

HISTOPATHOLOGY REPORT

H- 2693 to 2698

Name	Md. Abdur Rahman				REG.NO.	10/H-0492
Age	55 Yrs	SEX	M	C -709	REC. DATE	25-10-13
Refd By	Assoc. Prof. (Dr.) Kazi Rafiqul Abedin, MS.				REP. DATE	28-10-13

Material	1. Whole urinary bladder (Resected) 2. Tissue from rt. ureter (Biopsy) 3. Tissue from lt. ureter (Biopsy)
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GROSS DESCRIPTION

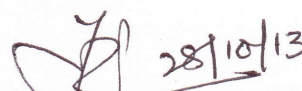
- : Specimen received in formalin with proper lab no. consists of urinary bladder with prostate and urethra, measuring 11 x 8 x 6 cm. Cut section shows a tumour involving almost the whole bladder, measuring 9 x 7 cm. Cut sections of the tumour is greyish. 4 blocks from the tumour, 1 block from the base of the tumour, 3 blocks from the prostate, 2 blocks from urethra, 1 block from the VUJ, 1 block from the fatty tissue. Total 12 blocks are embedded.
- Specimen received in formalin with proper lab no. consists of a greyish tissue, measuring about 1 cm. All embedded as such.
- Specimen received in formalin with proper lab no. consists of a greyish tissue, measuring about 1 cm. All embedded as such.

MICROSCOPIC DESCRIPTION

- : Sections from urinary bladder growth show a high grade Transitional cell Carcinoma.
Histological subtype : Papillary type.
Histologi type : Poorly differentiated
Additional Histologic pattern : Not found.
Tumor necrosis : Seen.
Histological Grade : Grade - III/High grade Urothelial Carcinoma (WHO/ISUP).
Depth of invasion : The tumour has invaded the muscularis mucosa, lamina propria, muscularis propria.
{Jewett-Marshall stage (pT2)}
Vascular invasion : Not seen.
Lymphatic invasion : Not seen.
Sections from the fatty tissue show no tumour tissue.
Sections from the prostate show marked inflammatory infiltration but no malignancy is seen.
Sections from the proximal and distal resected margin of urethra show no malignancy.
Sections from the VUJ are free from tumour.
Section from the rt. ureteric tissue is free from tumour.
Sections from the lt. ureteric tissue is free from tumour.

DIAGNOSIS

- : **Whole urinary bladder (Resected)** : Transitional cell Carcinoma,
Grade - III /High grade Urothelial Carcinoma (WHO/ ISUP).
Tissue from rt. ureter (Biopsy) : No malignancy is seen.
Tissue from lt. ureter (Biopsy) : No malignancy is seen.


ASSTT.PROF. DR. A. K. M. YOUNUS ZAMAL
MBBS, M. Phil (Path)
Histopathologist & Cytopathologist
NIDCH, Mohakhali, Dhaka

CT SCAN REPORT

NAME	Mr. Abdur Rahim	REG. NO.	10/C-0058
AGE	55 Yrs.	SEX	M
REFD BY	Assoc. Prof.(Dr.) Kazi Rafiqul Abedin, MS	SL. NO.	1761
PART STUDIED	CT scan of Whole Abdomen with contrast	DATE ...	20.09.2013

Thank you for referring the patient.

Clinical information : H/O TURBT on 11.10.2013.

Technique:

10 mm pre and post contrast axial slices of whole abdomen were obtained with oral administration of contrast medium.

Findings:

Liver is normal in size and shows no focal lesion.
Intra and extrahepatic bile ducts are not dilated.
Gall bladder is normal in appearance. No radio opaque calculus within it.
Pancreas and spleen are normal in appearance.
Both suprarenal glands are normal in appearance.
Both kidneys are normal in appearance and shows normal excretion of the contrast media.
Urinary bladder: Base of the urinary bladder appears irregular in outlined. Multiple lobulated and sheath like iso to hyperdense structures are seen along the urinary bladder wall - more marked on the left side.
Prostate and seminal vesicles are normal.
No para aortic lymphadenopathy or ascites is detected.

Impression:

Suggestive of residual tumour lesion urinary bladder SOL.

Prof. Dr. Salahuddin Al-Azad

MBBS, DMRD, FCPS (Radiology)

Chairman & Professor

Department of Radiology & Imaging

Bangabandhu Sheikh Mujib Medical University



DISCHARGE SUMMARY

File No.	2804/10/2013
Cabin No.	709
Name of the patient	Md. Abdur Rashid <i>Rahim</i> .
Age	55 Yrs
Sex	Male
Consultant	Assoc. Prof. (Dr.) Kazi Rafiqul Abedin, MBBS, MS (Urology)
Date of Admission	10.10.2013
Date of Discharge	13.10.2013
Diagnosis	TCC of urinary bladder with BHP.
Histopathology	Tissue from prostatic urethra: TCC. Tissue from bladder tumour : TCC, low grade.

Case summary: This patient presented with recurrent (several) episodes of haematuria for 1 year, sometimes painful with dysuria. The patient had moderate lower urinary tract symptoms. He is normotensive, nondiabetic, nonasthmatic benign prostate.

OPERATION NOTE

Name of the Operation	TUR-BT
Date of Operation	11.10.2013
Name of Anaesthesia -	SAB
Name of Surgeon	Assoc. Prof. (Dr.) Kazi Rafiqul Abedin, MBBS, MS (Urology)
Name of Anaesthetist	Dr. Nargis
Name of Assistants	Dr. Zikrur
INDICATION	TCC urinary bladder

Procedure : With all aseptic precaution U/C done.

Findings : Multiple growth involving whole of prostatic urethra upto veru.

Bladder neck - completely surrounded by the tumour.

Urinary bladder – multiple tumour involving the whole of the urinary bladder, all its walls.

Tumour resected from the prostatic urethra, bladder neck and urinary bladder. Complete resection was impossible tissue collected and sent for histopath separately. Haemostasis. 20 Fr. 3 way Foley's catheter with 40 ml d/w indwelling. N/S wash started wash out clear.

Treatment on discharge:

- খাবার : স্বাভাবিক
- Tab. Ancipro (500 mg): ১ + ০ + ১ - ১৪ দিন
- Cap. Cosec (20 mg) : ১ + ০ + ১ - ১৪ দিন
- Voltalin Suppository (50 mg): ১ টা প্লিক পায়খানার রাস্তায় - খুব বেশী ব্যথা হলে
- Cap. Uromax (0.4 µgm): ০ + ০ + ১ - চলবে
- Cap. Urodat (0.5 mg): ১ + ০ + ০ - চলবে
- Cap. Traxyl (500 mg): ১ + ১ + ১ - ৭ দিন
- Syp. Avolac : ৩ চামচ দিনে ২ বার - চলবে

Advice:

- দিনে ৩ লিটার পানি খাবেন (খাবার স্যালাইন সহ)।
- CT scan of Whole Abdomen, LFT করে Assoc. Prof.(Dr.) Kazi Rafiqul Abedin sir – এর সাথে রিপোর্টসহ যোগাযোগ করবেন।

Next plan : Cysto-prostato-urethrectomy with ileal conduit.

MEDICAL OFFICER
DATE: 14.10.2013

HISTOPATHOLOGY REPORT

H- 2645, 2646

Name	Md. Abdur Rahim			REG.NO.	10/H-0235	
Age	55 Yrs	SEX	M	C - 810	REC. DATE	11-10-13
Refd By	Assoc. Prof. (Dr.) Kazi Rafiqul Abedin, MS.			REP. DATE	13-10-13	


Thanks for kind courtesy of your referral

Material	1. Tissue from prostatic urethra (Biopsy) 2. Tissue from bladder tumour (Biopsy)
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GROSS DESCRIPTION : 1. Specimen received in formalin with proper lab no. consists of greyish tissue, measuring about 1 cc. Embedded as such.
2. Specimen received in formalin with proper lab no. consists of greyish tissue, measuring about 1 cc. Embedded as such.

MICROSCOPIC DESCRIPTION : 1. Sections from the prostatic urethral tissue show Papillary Transitional cell Carcinoma
2. Sections from urinary bladder tumour show a low grade Transitional cell Carcinoma
Histological subtype : Papillary type. The cells are disordered, heavily crowded.
Additional Histologic pattern : Not found.
Tumor necrosis : Not seen.
Histological Grade : Grade - I/Low grade Urothelial Carcinoma (WHO/ISUP).
Depth of invasion : The lamina propria show invasion by the tumour but the muscle layer is not present in the sample.
{Jewett-Marshall stage (pT1)}
Vascular invasion : Not seen.
Lymphatic invasion : Not seen.

DIAGNOSIS : 1. Tissue from prostatic urethra (Biopsy) : Transitional cell Carcinoma.
2. Tissue from bladder tumour (Biopsy) : Transitional cell Carcinoma, Grade-I/Low grade Urothelial Carcinoma (WHO/ISUP).



ASSOC. PROF.(DR.) FERDOUS AHMED

MBBS, M. Phil (Path)

Histopathologist & Cytopathologist

Dhaka Community Medical College & Hospital