



ন্যাশনাল হার্ট ফাউন্ডেশন হাসপাতাল অ্যান্ড রিসার্চ ইনস্টিটিউট

NATIONAL HEART FOUNDATION HOSPITAL & RESEARCH INSTITUTE

PLOT NO-7/2, SECTION-2, MIRPUR, DHAKA-1216, BANGLADESH.

Tel : +88-02-58054708-12, Fax: +88-02-48039237, E-mail : nhfadmin@agni.com, admin@nhf.org.bd

Website : www.nhf.org.bd, Facebook: www.facebook.com/bangladesh.heartfoundation

## DISCHARGE CERTIFICATE

Patient Details	Admission Details
HOSPITAL ID: <u>686841-22</u> Admission No. : <u>67-1726/16406-22</u> Name : <b>Mr. Rabindra Nath Biswas</b> Sex : Male      Age : 53y Address : Vill- Chalaban, Hazipara, Daksin Khan, Dhaka  Mobile: 01710677772	Date of admission : 30-Oct-2022 11:37:38 PM Date of discharge : 02/11/2022 Admission Under : <b>Associate Professor Dr. Tawfiq Shahriar Huda</b> Ward/Cabin : WARD 12 (Bari Ward) Bed : 05 Print Date: 02/11/2022      Time: 11:23:50AM
<b>Diagnosis : i-20.0 UA , OMI(high lateral),H/O VT, n-18 CKD e CAG-non critical CAD (india,2021)</b>	
<b>Investigation :</b> <b>Blood Tests :</b> S. Creatinine:-1.9, SGPT (ALT):-28, hs-Troponin I:-0.006, Haemoglobin (Hb)gm:-14.4, Haemoglobin (Hb)%:-90, PCV:-43,  <b>Echo :</b> Regional wall motion abnormality present.Moderate LV systolic dysfunction. LVEF= 38-40%  <b>E.C.G. :</b> Supplied <b>X-Ray :</b> Not Done	
<b>Cardiac Catheterisation / Angiography :</b> Not Done	
<b>Interventional Procedures/PPM :</b> Not Done	



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HOSPITAL ID: 686841-22 Admission No. : 67-1726/16406-22 Name : **Mr. Rabindra Nath Biswas**

নিম্নোক্ত ঔষধ নিয়মিত সেবন করবেন

1	Diet Normal	--	--	
2	Tab. Ecesprin(75 mg)	0+1+0	Continue	After Meal
3	Tab. Clopid(75 mg)	0+0+1	Continue	After Meal
4	Tab. Rosuva(20 mg)	0+0+1	Continue	Before Meal
5	Tab. Bisoren(2.5 mg)	1+0+0	Continue	
6	Tab. Emep(20 mg)	1+0+1	Continue	Before Meal
7	Tab. Ripril(1.25 mg)	0+0+1	Continue	

Tab Eddorin (40/50)

0+1+0 continue

Tab Lanx (40)

1/2+0+0 continue

স্বপ্ন Magnin - ৩ বার x ১ টি - মোট

**ADVICES (উপদেশ)**

- 1| নিয়মিত রক্তচাপ পরীক্ষা করবেন।
- 2| তেল এবং চর্বি জাতীয় খাবার (গরু, খাসীর মাংস, দুধের সরিষা, মাখন, ছানা, নারিকেল, মগজ, ডিমের কুসুম, ডেইরী প্রডাক্ট) কম খাবেন।
- 3| বেশি করে শাক সবজী এবং ফল মূল খাবেন।
- 4| নিয়মিত ঔষধ খাবেন।
- 5| কোন সমস্যা হলে অত্র হাসপাতালের বহিঃ বিভাগে/ জরুরি বিভাগে যোগাযোগ করবেন।
- 6| ..... 4 ..... দিন বিশ্রামে থাকবেন।
- 7| ভাত, আলুসহ অন্যান্য শর্করা জাতীয় খাবার কম খাবেন।
- 8| ধূমপান, পাতে লবণ এবং জর্দা খাওয়া নিষেধ।
- 9| আপনার বিশেষজ্ঞ ডাক্তারের সাথে দেখা করার আগের দিন ০৯৬৬৬৭৫০০৭৫ নাম্বারে ফোন দিবেন। প্রতি দিন সকাল ৮:০০টা - ৯:০০টার মধ্যে (শুক্রবার ও সরকারি ছুটির দিন ব্যতিত)।

পরবর্তী চিকিৎসার জন্য সুপারিশ (Recommendations) :

CCU as early as possible

Followup (পরবর্তী সাক্ষাৎ):

Consultant/Registrar

Fazlul  
Prepared By

D. S. Biswas  
Medical Officer

5/26  
D. S. Biswas  
11.2.22

W-12



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NATIONAL HEART FOUNDATION HOSPITAL & RESEARCH INSTITUTE

**ECHOCARDIOGRAPHY REPORT**

Echo 2D and M-mode

Patient Id : 686841-22	Token : 0	Order No : 249944	Echo Date : 01/11/2022
Patient Name : Mr. Rabindra Nath Biswas		Requisition No : 67-1726/16406-22	
Age : 53y	Gender : Male	Ref. From : INPATIENT	Printing Date & Time: 01/11/2022 11:18:02AM
Height : 0.00 cm	Weight: 0.00 Kg	BSA (m2): 0.00	Ref. By : Associate Professor Dr. Tawfiq Shahriar Huq

TEST	RESULT	UOM	TEST	RESULT	UOM
AOD	26	mm	Mitral EF Slope		cm/sec
LAD	29	mm	MV Annulus		mm
ACS		mm	TV Annulus		mm
IVST	08	mm	PV Annulus		cm <sup>2</sup>
LVPWd	08	mm	MV Area		mm
LVIDd	52	mm	AV Area		-
LVIDs	42	mm	AV Ring		mm
LVEF	38-40	%	RVIDd		mm
FS	20 *	%	RVOT		mm
EPSS		mm			

Note: LVEF by Global Eye-ball estimation

Descriptions :	
ECHO Window	Good
Pericardium	Normal pericardium. No effusion seen
LV Wall Motion	Anteroseptum, mid to apical anterior wall, apex, mid to apical lateral wall & apical IVS are almost akinetic. Basal anterior wall, mid IVS are severely hypokinetic. Moderate LV systolic dysfunction.
Valves	All valves are normal in morphology and motion.
Chambers	Normal
Wall Thickness	Normal
IAS	Intact
IVS	Intact
Intracardiac mass	No thrombus or vegetation seen.

**Comments :**

- Regional wall motion abnormality present.
- Moderate LV systolic dysfunction. LVEF= 38-40%

*S. M. R.*  
Dr. Md. Shamim Chowdhury  
MBBS, MD (Cardiology)  
Registrar  
National Heart Foundation Hospital &  
& Research Institute.

Prepared By: Shila

Consultation Summary

**Patient MRN** : 10010000603805  
**Patient Name** : Mr Rabindra Nath Biswas  
**Gender/Age** : Male, 53 Years  
**Patient Phone No** : 008801914198987-918101687809  
**Patient Address** : Chota Khagra Baria, Khagrabaria, Kashiani, Gopalganj, BANGLADESH., BANGLADESH., 0002

**Consultation Date** : 24/09/2021 11:34 AM  
**Consultant** : Dr. Partha Pratim Dey (CARDIOLOGY - ADULT)  
**Consultation Type** : OP, REVISIT



**VITALS**

Blood Pressure: 100/70 mmHg      Heart Rate: 68 /bpm      SPO2: 98 %  
Weight: 71 kg

**CLINICAL DIAGNOSIS**

- DCM.
- LV SYST DYSFUNCTION, EF 40%
- DOCUMENTED SUSTAINED VT.
- M CAD.
- HTN
- CKD III

*non-diabetic*

*Ect. normal sinus / 1 in L1, arr*

**INVESTIGATION ORDER**

- ✓ SERUM CREATININE
- ✓ SERUM POTASSIUM - SMVDNSH

*1144*

*ma (139)*

*HAAIC (5.7)*

*PPBS (120)*

**MEDICATION ORDER**

DRUG NAME	DOSAGE
1) ROSUVASTATIN+ASPIRIN-TABLET-10MG+75MG- <u>ROZAVELA</u> <i>(evening, ap)</i>	Start Date : Sep 24, 2021, Once Daily, (0-0-0) - 1) Tablet, After Food for TILL_REVIEW Refill : 0
2) FAMOTIDINE-TABLET-40MG- <u>FAMTAC</u> <i>(evening, ap)</i>	Start Date : Sep 24, 2021, Once Daily, (0-0-1) - 0) Tablet, Before Food for TILL_REVIEW Refill : 0
3) BISOPROLOL FUMARATE-TABLET-2.5MG- <u>CONCOR COR</u> <i>10AM</i>	Start Date : Sep 24, 2021, Once Daily, (1-0-0) - 0) Tablet, After Food for 1 Till_review Refill : 0
4) AMIODARONE-TABLET-100MG- <u>CORDARONE</u>	Start Date : Sep 24, 2021, Once Daily, (0-0-0) - 0) Tablet, After Food for TILL_REVIEW Refill : 0
5) CLONAZEPAM-TABLET-0.5MG- <u>RIVOTRIL</u>	Start Date : Sep 24, 2021, Once Daily, (0-0-0) - 1) Tablet, At Bed Time for TILL_REVIEW Refill : 0

*OP: 1) Rozavel (10) - 1 tab after x x 10PM  
2) ECOSPRIN (150) - 1 tab after x x 10PM (after dinner)*

**MEDICATION ORDER**

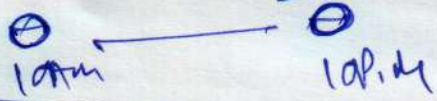
DRUG NAME

6) SACUBITRIL+VALSARTAN-TABLET-49MG+51MG-AZMARDA

*Nymada (100)*

DOSAGE

Start Date : Sep 24, 2021, Twice Daily, (1/2 - 0 - 0 - 1/2) Tablet, After Food for TILL\_REVIEW  
Refill : 0



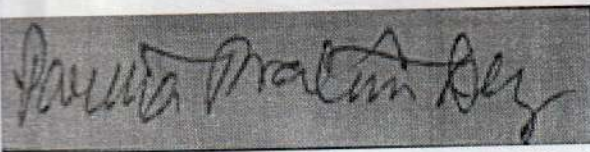
**ADVICE**

AICD - implant - urgent.

- ADVISE ADMISSION IF SYMPTOMS RECUR OR PERSIST
- TO REVIEW WITH THE REPORTS AS EARLY AS POSSIBLE

*after 1 month - Partha Dr*

**CONSULTANT DETAILS**



Dr. Partha Pratim Dey, ASSOCIATE CONSULTANT, CARDIOLOGY - ADULT

*24/9/2021*

*Adv HbA1c  
PPBS (2 hrs after lunch)*

One free consultation with the same doctor within next 6 days.

Printed By: Dr. Partha Pratim Dey | Printed On: 24.09.2021 11:59

*07/11/2021*  
*stable*  
*HR 42-64/min*  
*BP 100/70*  
*SpO2 98%*  
*wt 70kg*

*To continue all*  
*Add*  
*CTD (6.25) - 1 tab on Sunday*  
*9 AM*  
*Monday to continue*  
*To review after 3 months Partha Dr*  
*Sandip (10) - 1 tab OOAD*  
*(Before Breakfast)*  
*to continue*

609F

Name : Mr. Rabindra Nath Biswas Age / Gender : ~~48 Years/ Male~~  
Patient Number : 10010000603805 Visit Number : Unit of Narayana Health  
CATH Number : 142072 Procedure Date : 10/11/2016

**Coronary Angiogram Report**

Operators : Dr. P.V Suresh, Dr. D Ramachandran  
Diagnosis : CAD, DCM  
ECHO : RWMA Present, Reduced LV systolic function, LVEF – 30%  
Procedure : Coronary Angiography Right Radial Percutaneous Approach  
Catheters : LCA: 5F Tiger RCA: 5F Tiger  
Contrast : Omnipaque

**Pressure Data**

AO:120/80

**Coronary Angiogram Report**

LMCA : Normal  
LAD : Type III vessel, slow flow present, mild plaquing  
Diagonals : Normal  
Ramus : Fair sized vessel, normal ✓  
LCX : Non dominant, normal ✓  
Marginals : Normal ✓  
RCA : Dominant, normal ✓  
PDA/PLV : Normal ✓  
LV : Not done ✓  
Final Diagnosis : Minor CAD, Slow Flow in LAD, Reduced LV systolic function (Echo)  
Recommendations : ✓

Dr. P.V Suresh  
Senior Consultant Cardiologist

*Ray*  
Dr. D Ramachandran  
Fellow in Interventional Cardiology

Typed By Devaraj N



**Narayana Hrudayalaya Limited**

(Previously Narayana Hrudayalaya Pvt. Ltd.) CIN: L85110KA2000PLC027497

NH Health City, 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

Fax: +91 80 2783 2648. info.nics@nhhospitals.org, www.narayanahealth.org

Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

Corporate Office: 261/A, 2nd Floor, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

## TRANS-THORACIC ECHO REPORT

Patient MRN	: 10010000603805	Report Date & Time	: 05/11/2016 13:19
Patient Name	: Mr Rabindra Nath Biswas	Age / Gender	: 48 Years 7 Months / MALE

### M-MODE / 2D MEASUREMENTS

LVEF (>55)%	: 30	LVID(d) (40-56) mm	: 53	LVID (s) mm	: 35
TAPSE (>16) mm	: 22	IVS (d) (6-10) mm	: 11	LV-EDV ml	: 136
LA (<39) mm	: 34	PWD (d) (6-10) mm	: 10	LV-ESV ml	: 53
RA (<44) mm	: 32	RV (<35) mm	: 25	BSA m <sup>2</sup>	: 1.72

### DOPPLER MEASUREMENTS

MITRAL VALVE	: E/A - 0.6/0.9 M/S, MILD LV DIASTOLIC DYSFUNCTION, MR - MILD (CENTRAL JET)
AORTIC VALVE	: NORMAL / PG - 5 MMHG.
TRICUSPID VALVE	: TR - TRIVIAL.
PULM. VALVE	: NORMAL / PG - 4 MMHG.
PA PRESSURE	: PASP - 22 MMHG, NORMAL PA PRESSURE.

### FINDINGS

SITUS SOLITUS, LEVOCARDIA, AV AND VA CONCORDANT, NORMAL GREAT ARTERY RELATIONSHIP

### VALVES

MITRAL	: SPECKS OF CALCIUM NOTED ON AML TIP WITH NORMAL LEAFLET MOBILITY.
AORTIC	: NORMAL
TRICUSPID	: NORMAL
PULMONARY	: NORMAL

### CHAMBERS

LV	: NORMAL SIZED, REDUCED LV SYSTOLIC FUNCTION.
RV	: NORMAL SIZED, NORMAL RV FUNCTION.
RWMA	: MID INFEROSEPTUM, DISTAL SEPTUM, APEX, APICAL ANTEROLATERAL WALL THINNED AND AKINETIC, BASAL INFEROPOSTERIOR WALL THINNED AND HYPOKINETIC.
LVOT / RVOT	: NORMAL
LEFT ATRIUM	: NORMAL SIZED.
RIGHT ATRIUM	: NORMAL SIZED.

### Coronary Angiogram Report

Name : **Rabindra Nath Biswas** Hospital No : 10010000603805  
Sex : Male Age : 53 years  
Cath No : 1475/2021 Date : 17.09.21

Done by Doctor : **Sunandan Sikdar**

Clinical Diagnosis : DCM, Recent VT,CKD III,Hypertension

#### Non - Invasive Investigations

ECG : Narrow QRS with pathological Q in I,aVL  
ECHO : RWMA present in LAD territory,LV systolic dysfunction with LVEF=40%

Procedure : Coronary Angiography Right Femoral percutaneous approach

Catheters : LCA: 6F JL RCA: 6F JR

Contrast : Omnipaque.

Pressure Data : A O : 130/70/90

#### Report

LMCA : Small caliber ✓

LAD : Minor plaque in proximal part. ✓


LCX : Non-dominant,normal. ✓

RCA : Dominant, normal. ✓

LV : RWMA present in LAD territory,LV systolic dysfunction with LVEF=40%  
(On Echocardiogram)

Final Diagnosis : Minor coronary artery disease .

Recommendation : Continue medical management for coronary arteries and advised  
AICD for recent VT.

  
Dr. Sunandan Sikdar  
MD, DM, (Cardio)  
Consultant Interventional Cardiologist

Report typed by  
Baishali

**NB: In case of chest pain, haematoma in puncture site, fever, urticaria / drug allergy, please contact the hospital at 40363636/25622280**

**Narayana Multispeciality Hospital**

(A unit of Narayana Hrudayalaya Limited) CIN: LB5110KA2000PLC027497

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Email: info.brs.kolkata@narayanahealth.org | [www.narayanahealth.org](http://www.narayanahealth.org)

Appointments

**1800-309-0309 (Toll Free)**

Emergencies

**9836-75-0808**



Mr Rabindra Nath Biswas (10010000603805)

SIGNATURE *Nesupama*  
NAME  
RELATION - *relative*

DATE

Prepared By: Nisha Ram, (317920) | Prepared On: 17.09.2021 18:35  
Generated By: Nisha Ram, (317920) | Generated On: 17.09.2021 18:57

**TRANSTHORACIC ECHO REPORT**

<b>Patient ID</b> :	100100000603805	<b>Report Date</b> :	08/09/2021
<b>Patient Name:</b>	Rabindra Nath Biswas		
<b>Age / Gender</b> :	53 Years/ Male	<b>Render No</b> :	

**M MODE MEASUREMENT**

**AO** : 29 ( 20 - 40 )mm      **LVID(d)** : 54 ( 36 - 52 )mm      **IVS** : 12 ( 6 - 11 )mm  
**LA** : 42 ( 19 - 40 )mm      **LVID s** : 44 ( 23 - 39 )mm      **PWD** : 11 ( 6 - 11 )mm  
**EF** : 40%

**2D FINDINGS VALVES**

**MITRAL VALVE** : Morphologically normal, Mild MR  
**AORTIC VALVE** : Morphologically normal  
**TRICUSPID VALVE** : Morphologically normal, Trivial TR, TRPG 18mmHg  
**PULMONARY VALVE** : Morphologically normal

**CHAMBERS**

**LEFT ATRIUM** : Mildly dilated (42mm)  
**RIGHT ATRIUM** : Normal  
**LEFT VENTRICLE** : Eccentric LVH, Thinned out & Dyskinetic apex and hypokinetic mid-antero-septum & mid anterior wall. LV systolic dysfunction with EF 40%.  
Grade I Diastolic dysfunction  
**RIGHT VENTRICLE** : Normal in size, Good RV systolic function  
TAPSE 27mm, TASV 14cm/sec

**SEPTAE**

**IVS** : Intact  
**IAS** : Intact

**GREAT ARTERIES**

**AORTA** : Normal  
**PULMONARY ARTERY** : Normal, No PH

**DOPPLER DATA**

**MITRAL** : E: Velocity: 67cm/sec, A : Velocity78cm/sec  
**AORTIC** : Vmax :120cm/sec, Peak PG 5.7mmHg  
**TRICUSPID** : Vmax :61cm/sec, Peak PG 2.1 mmHg  
**PULMONARY** : Vmax 115cm/sec, Peak PG 5.3mmHg

**VEGETATION/THRO** : NIL  
**MBUS**  
**PERICARDIUM** : Normal

**OTHER FINDINGS**

IVC 14mm with normal respiratory variation

**FINAL DIAGNOSIS**

Eccentric LVH  
RWMA as described  
LV systolic dysfunction with EF 40%  
Grade I Diastolic dysfunction  
Mildly dilated LA  
Good RV systolic function  
No PH

  
Dr. Partha Pratim Dey  
Dept. Of Non-invasive Cardiology

***N.B: Limitation of ECHO:*** The science of cardiology imaging is based on the presentation of various shadows produced by normal, abnormal tissues & different organs of the body. Hence, it is not confirmatory or conclusive for the diagnosis of the disease process. So, clinical correlation & further related investigations are necessary for the clinician to reach to a final diagnosis.

Please intimate us for any typing mistakes & send the report for correction within 7 days.

Patient Name : Rabindra Nath Biswas

Page 2 of 3 Typed by : Swarup Kumar  
Dutta

MRN : 100100000603805

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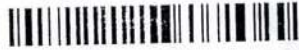
Appointments

**1800-309-0309 (Toll Free)**

Emergencies

**9836-75-0808**

# DISCHARGE SUMMARY



**Patient MRN** : 10010000603805  
**Patient Name** : Mr Rabindra Nath Biswas  
**Gender/Age** : Male , 53 Years  
**Patient Phone No** : 008801914198987-918101687809  
**Admission No** : INP-1760-2109000385  
**Admission Date** : 17/09/2021 11:49 AM  
**Discharge Date** : 17/09/2021 05:50 PM  
**Discharge Reason** : Normal Discharge  
**Referred By** : -  
**Admitting Consultant:** Dr. Sunandan Sikdar(CARDIOLOGY - ADULT), Dr. Partha Pratim Dey(CARDIOLOGY - ADULT)

## FINAL DIAGNOSIS

L.V SYSTOLIC DYSFUNCTION.  
DOCUMENTED SUSTAINED V.T  
MINOR CORONARY ARTERY DISEASE.  
HYPERTENSION  
CKD III ( eGFR 42)

## ADMISSION REASON

- CAG

## CHIEF COMPLAINTS & HISTORY OF PRESENT ILLNESS

Chest discomfort while exertion.

## COURSE IN HOSPITAL

Mr. Rabindra Nath Biswas, a 53-year-old gentleman was admitted with complaints of chest discomfort while exertion. He has h/ o VT. His EF is 40 %. CAG done. Post operative procedure is uneventful. Now patient is being discharged in a stable condition.

## ADVICE AT DISCHARGE

Option of AICD discussed  
Plan of cardiac MRI discussed  
Fluid 1.5 lit / day  
F/ u with Dr P P Dey after 7 days

## MEDICATION AT DISCHARGE

- ✓ Tab. PANTODAC (40 mg) 1 tab once daily before breakfast x continue.
- ✗ Tab. DYTOR (5 mg) 1 tab once daily at 9 am.

**MEDICATION AT DISCHARGE**

- ✓ Tab ROZAVEI. (10 mg) 1 tab once daily at bedtime. *A (100mg) ✕ - ✕ ✕*
- ✕ Tab. Ecosprin (75) 1 tab once daily at bedtime
- ✓ Tab. CONCOR - COR (2.5 mg) 1 tab. once daily at 9AM x continue. *✕*
- ✓ Tab. Cordarone 100 mg 1 tab once daily at bedtime x continue
- ✓ Tab. Rivotril (0.5 mg) 1/2 tab at bedtime x continue.
- ✓ Tab Azmarda 100 mg 1/2 tab twice daily at 9 am and 9 pm x continue.  
Tab. Cetil 500 mg 1 tab twice daily at 7 am and 7 pm x 3 days.

**EMERGENCY MANAGEMENT**

Contact Details: In case of any queries or emergencies please contact, Phone No: 18003090309

**CARE TEAM DETAILS**

Dr. Sunandan Sikdar  
CONSULTANT

  
Dr. Partha Pratim Dey  
ASSOCIATE CONSULTANT

**SIGNOFF DETAILS**

*Sunandan Sikdar*

Dr. Sunandan Sikdar  
CONSULTANT  
CARDIOLOGY - ADULT

This summary and medication has been explained in the language I understand, and printed copy has been issued to me