

IF LOST PLEASE RETURN TO :

Name : Mr. Abdul Motin Mia

S/o Late Abdul Sabhan

H/o Mr. Rakya Begum

Permanent Address no 10 road

Rakya Begum (Wife)

To Ram mudi ward

Naras, Po- JHILLYA ST

Gaibandha (S/O) BARILADESH

Police Station : SUNDAR CANAL

PO - A14394397

Nearest Rly. Station : 9635229331

Tel No. 01859127522/018591275

62121

SAROJ GUPTA CANCER CENTRE & RESEARCH INSTITUTE

Mahatma Gandhi Road, Thakurpukur, Kol-63

Dial : +91 33 6123 4343

E-mail : info@sgccri.org

Website : www.cancercentrecalcutta.org

24 Hrs. Help Line No. 90070 87270 / 98312 82955



**SAROJ GUPTA CANCER CENTRE
& RESEARCH INSTITUTE**



REGISTRATION CARD

No. 202404409 Dt. 14/8/24

Name MR ABDUL

MOTIN

MIA

SEX M REL. M APPX. AGE 61 DOB

DIAGNOSIS

BLOOD GROUP

DEPT. CONSULTANT OPD-DAYS

DR. SAYAK ROY
Urology

WEDNESDAY

FRIDAY



SAROJ GUPTA CANCER CENTRE & RESEARCH INSTITUTE

MAHATMA GANDHI ROAD, THAKURPUKUR, KOLKATA - 700 063

Phone : (033) 6123 4343 • E-mail : info@sgccri.org

Website : www.cancercentrecalcutta.org / sgccri.org

24 Hours Help Line No. : 90070 87270 / 98312 16575

ADVICE MEMO



Date 11/8/24

Patient MD Habibur Rahman

UHID. No. 24/4141

Indoor Serial No. SOPD

Indoor Admission in :

I. T. U. / Cabin / Cubicle / General / Chemo Bed No. :

For Days

ITU Charges : Investigation / Ventilator

Pathology Examination :

For Office Use CBL, LFT, WT, Ur, Nat-KT, APTT, Ser, USG, FNAC, ECG, Echo neck. Mar-26
Charges Paid

Proposed Date	Report Dt. (Approx)	Charges
Blood cbc, LFT, ur, co, Nat	Kt P-time APTT	
INR. Serology T3 T4 TSH	ECG, 12 leads.	
Echo cardiography		

Endoscopy : (Please specify)

With / without C.D.

Surgery :

Operation - Special / Major / Minor / Biopsy with / without anaesthesia

Chemotherapy for OPD Cases :

Blood Transfusion Services :

Radiotherapy :

Pay for USG GUIDED FNAC REPORT DELIVERED exposures

Brachytherapy applications

Palliative Care

for

Receipt No. :

Date :

Radiology

Proposed Date

Report Dt. (Approx)

Charges

Diagnostic X-Ray

Signature

USG

Neck

CT Scan

USG guided FNAC for Thyroid swelling.

RRMC Tests :

Cash Dept.

Others :

CECT Thorax

Comments :

SGCCRI / PS / F-8

Signature of the C

EKO Pathology Lab

A Unit of EKO Diagnostic Pvt. Ltd

54, Jawaharlal Nehru Road, Kolkata-700071

Phone : 2282-8106/09/01 Direct : (033) 22828105

WhatsApp: +91 7439397462 * Email : enquiry@ekoxray.com



PATHOLOGY

Final Bill

Bill No : 01-FB-EDPL-24-009663

Requisition No : 01-RQ-PL-24-008202

Date : 17/08/2024 10:06 AM



Reg ID : 01-24-027853

Episode : 1

Name : Mr. ABDUL MOTIM

Age : 62 Yr(s.)

Sex : Male

Address : BANGLADESH

Phone :

Ref. Doctor : Dr. WITHOUT PRESCRIPTION

Corporate :

		Rate	Contrast	Discount	Payable By Patient
INVESTIGATION Urea & Creatinine	Delivery Date 17/08/2024	500	0	0	500.00

Total (Rs.) 500.00

Date 17/08/2024 MR Number 01-MR-24-032063

Amount 500.00

(-) Payment (Rs.) 500.00

Received with thanks

RUPEES FIVE HUNDRED ONLY

for EKO Pathology Lab

Signature

Please produce this receipt for collecting your report on the above mentioned date between 5:30PM-6:30PM or on next working day(s) between 12:00PM-7:00PM



SINCE 1982
42 YEARS AT YOUR SERVICE

EKO - SGCC & RI PET SCAN CENTRE

(A UNIT OF EKO DIAGNOSTIC PVT. LTD.)



DEPARTMENT OF NUCLEAR MEDICINE & PET-CT

WHOLE BODY ^{68}Ga - PSMA PET-CT

Name: Md. Abdul Matin

Requisition No: 02-RQ-PE-24-001124

Age / Sex: 62 Years / Male

Ref. Doctor: Dr. Vikram Chaturvedi

Date: 19-08-2024

HISTORY: TRUS guided prostate biopsy (March 2024) : Acinar adenocarcinoma (Gleason score 4+4).
On ADT. Recent serum PSA (14.05.2024) : 6.86 ng/ml. For evaluation.

PROTOCOL:

Whole body PET-CT scan was performed 60 minutes after intravenous injection of 6.4 mCi of ^{68}Ga -PSMA using a SIEMENS Biograph mCT 16 slice PET-CT scanner. Contrast enhanced CT scan of brain, head & neck, chest, abdomen & pelvis was also acquired after administration of intravenous contrast. Transaxial, coronal, sagittal & 3D MIP images of attenuation corrected PET, CT & fused PET-CT were reconstructed. Semiquantitative analysis of PSMA uptake was performed by calculating SUV values corrected for dose administered & patient's body weight.

FINDINGS:

Physiological ^{68}Ga -PSMA distribution is noted in lacrimal and salivary glands, liver, spleen, small intestine, bilateral kidneys and urinary bladder.

Brain: No focal abnormally increased radio-tracer concentration is seen in bilateral cerebral or cerebellar hemispheres.

Head & Neck: No focal lesion with abnormal radio-tracer uptake is seen involving nasopharynx, oropharynx, hypopharynx or larynx.

Both lobes of thyroid gland appear unremarkable with no abnormal radio-tracer uptake.

No significant cervical or supraclavicular lymphadenopathy with abnormal radio-tracer uptake is seen.



Name: Md. Abdul Matin, 62 Yrs. / Male

PSMA PET-CT /Date: 19-08-2024

Thorax & Mediastinum: Bilateral axillae appear unremarkable.

The trachea and both main bronchi appear normal.

Mild diffuse emphysematous changes are seen in both lungs.

Rest of the bilateral pulmonary parenchyma appear unremarkable & shows no abnormal soft tissue nodule.

There is no evidence of pleural effusion on either side.

No abnormal PSMA expressing mediastinal or hilar lymphadenopathy is seen.

Abdomen & Pelvis: Mild PSMA expressing ill-defined lobulated soft tissue lesion is seen involving mid gland and apex of prostate gland, infiltrating left seminal vesicle and anterior wall of rectum, measures ~ 3.2 x 2.5 x 2.5 cm, SUV max 14.8).

Mild PSMA expressing multiple hypodense lesions of varying sizes are seen scattered throughout both lobes of liver (largest – segment VIII – 2.7 x 2.5 cm, SUV max 15.0).

There is no evidence of significant abdomino-pelvic lymphadenopathy with abnormal PSMA expression.

Gall bladder, spleen, pancreas, adrenals and kidneys appear unremarkable with no evidence of abnormal PSMA expression.

The stomach, small bowel and large bowel loops appear unremarkable with no evidence of abnormal PSMA expression.

No free peritoneal fluid is seen.

Musculo-skeletal System: Multiple residual sclerotic skeletal lesions are seen in the following sites with minimal PSMA expression in some - right 10th and 11th ribs, L1 vertebra, sacrum (SUV max – 8.8) and multiple bilateral pelvic bones (right ischium – SUV max 5.6).

Name: Md. Abdul Matin, 62 Yrs. / Male

PSMA PET-CT /Date: 19-08-2024

IMPRESSION:

- Mild PSMA expressing ill-defined lobulated soft tissue lesion involving mid gland and apex of prostate gland, infiltrating left seminal vesicle and anterior wall of rectum as described – represents residual primary neoplastic pathology.
- Mild PSMA expressing multiple hypodense lesions of varying sizes scattered throughout both lobes of liver as described – appear residual metastatic.
- Multiple residual sclerotic skeletal lesions with minimal PSMA expression in some as described above.
- No evidence of abnormal PSMA expression elsewhere in the present whole body scan.

DR. S. K. SHARMA
MD
DIRECTOR


DR. SUDIPTA NAG
MBBS, DNB
CONSULTANT NUCLEAR MEDICINE



EKO DIAGNOSTIC PATHOLOGY

(a Unit of EKO DIAGNOSTIC PVT. LTD.)

NAME : Mr. ABDUL MOTIM
AGE : 62 Yr(s) MALE
REQ. NO. : 01-RQ-PL-24-008202
REF. BY : Dr. WITHOUT PRESCRIPTION

REG. NO. : 01-24-027853
REG. DATE : 17/08/2024
REQ. DATE : 17/08/2024
REP. DATE : 17/08/2024

BIOCHEMISTRY

<u>INVESTIGATION</u>	<u>RESULT</u>	<u>UNIT</u>	<u>REFERENCE RANGE</u>
Urea	18	mg/dl	10-40
Creatinine	0.94	mg/dl	0.5-1.5

[Note : Incase of lack of correlation due to technical / typing error the laboratory should be informed immediately for rectification / review / resampling & re-testing etc.]

Dr. Swapan Samanta, MD,
PGIMER (Chandigarh)


Dr. Rupa Rao Heejebu, MD
(Pathology)

Dr. Aruna Chakraborty,
Ph.D (Biochemistry)

P.B. : S. D.

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04 MAR 2029



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