



Gheesibai Memorial
MITAL HOSPITAL
& RESEARCH CENTRE
Pushkar Road, Amer-305004 Tel: (0145) 2 603 603 Mob: 80030 53111
info@mittalhospital.com www.mittalhospital.com



16071452

DISCHARGE SUMMARY (Provisional)

Patient's Name	: Mr. ABDUL LATIF	Patient ID	: 26024674
Father's / Husband's Name	: S/O MR.ABDUL MAJEED	IPD No.	: 26008634
Address	: 686 LEKHA NAGAR, WARD NO.1 MUNSHI COLONY BEAWAR	Age / Sex	: 65 Y/ 8 M/ 4 D MALE
Ward	: PRIVATE ROOM	Admission Date	: 14/07/2026
Consultant Name	: Dr. RAHUL GUPTA	Discharge Date	: 16/07/2026
		Room/Bed	: 313-313

DIAGNOSIS :

CAD / ACS / PWMI
P+S to LCX done on 14/07/26
(121.2 / Z 95.5)

CHIEF COMPLAINTS :

C/o

- Chest pain
- Uneasiness
- Ghabrahat
- Sweating +nt

From 5PM on 13/07/26

Primarily treated at Jai clinic Beawar there loading dose given.

HISTORY OF PRESENT ILLNESS :

Patient was apparently asymptomatic before Yesterday 5PM than he developed above mentioned complaints and today admitted in MHRC for further treatment & management.

PAST HISTORY :

- Nothing significant

EXAMINATION :

GC	Low
P	70/min
B/P	120/70 mmHg
TEMP	98.6°F
R/R	20/min
CNS	Conscious & FVC, E4V5M6
CVS	S1 S2 (N)
R/S	B/L AE +nt

DS for Mr. ABDUL LATIF



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CVS	S1 S2 (N)
R/S	B/L AE +nt

DS for Mr. ABDUL LATIF

P/A

Soft, BS++

INVESTIGATIONS:

CORONARY ANGIOPLASTY - Incl Baloon 14/07/2026

CORONARY ANGIOPLASTY - Incl Baloon Attached

PRIMARY ANGIOGRAPHY

14/07/2026

DOMINANCE

RCA

LMCA

Normal

LAD

Proximal to Mid 80-85%

D-I

Ostio-Proximal 80-85%

LCX

Distal 100%, thrombus++

RCA

Mid 70-75%

RECOMMENDATION

Primary PTCA + Stenting to LCX (Two DES)

CARDIAC PANEL- NTPRO BNP CKMB TROP 14/07/2026

CKMB

>80.0

TNI

>10.0

BNP

511

PRE ANGIO INVESTIGATIONS

14/07/2026

Hb

13.2

RBC

4.65

TLC

13490

PLATELET COUNT

241

INR

1.20

RBS

176

CREAT.

0.60

HIV I & II

Non Reactive

HBsAg

Non Reactive

Glucose

176

Blood group

A positive

HbA1C (GLYCOSYLATED HAEMOGLOBIN) 16/07/2026

HbA1C (GLYCOSYLATED HAEMOGLOBIN) Awaited - 6-7

E.C.G.

14/07/2026

Attached

15/07/2026

Attached

PORTABLE ECHO CARDIOGRAPHY

15/07/2026

Concentric LVH (+)

RWMA (+)

LCX Territory severe hypokinetic

LVEF 45%

(Report attached)

PORTABLE X-RAY CHEST PA

14/07/2026

Soft tissues and bony cage under view are normal.
Lung fields are normal.

Mediastinum and domes are normal.

Bilateral Costophrenic angles are clear.

Cardiac size cannot be commented in the present view.

Course During the Stay :

Patient admitted with C/o Chest pain, Uneasiness, Ghabrahat, Sweating +nt, From Yesterday 5PM. All relevant investigations done. Primary CAG + PTCA to LCX done under L/A on 14/07/2026.

Procedure & Post procedure treatment given.

At present patient is conscious, oriented and vitals stable,

DS for Mr. ABDUL LATIF

P/A

Soft, BS++

INVESTIGATIONS:**CORONARY ANGIOPLASTY - Incl Baloon 14/07/2026**

CORONARY ANGIOPLASTY - Incl Baloon Attached

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Mid 70-75%

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CARDIAC PANEL- NTPRO BNP CKMB TROPIN 14/07/2026

CKMB

>80.0

TNI

>10.0

BNP

511

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RBC

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Primary CAG + PTCA to LCX done under L/A on 14/07/2026.

Procedure & Post procedure treatment given.

At present patient is conscious, oriented and vitals stable.

DS for Mr. ABDUL LATIF

So patient is being discharge with following treatment.

TREATMENT GIVEN :

ATORVA TAB 40MG
CONCOR COR TAB 1.25MG
EMESET INJ 2ML
PANTOCID INJ 40MG

ANGIWELL TAB 2.6MG (30S PACK)
CANREAL INJ 50MG
HUMAN ACTRAPID INJ 10ML
SORBITRATE TAB 5MG

BRILINTA TAB 90MG
ECOSPRIN TAB 75MG
MONOCEF INJ 1GM *
ZEDEX -SF SYP 100ML

OPERATIVE PROCEDURE :

Primary CAG + PTCA to LCX done under L/A on 14/07/2026.

CONDITION ON DISCHARGE :

IMPROVED

PULSE: 73/min BP: 130/70mmHg Temp: 98.6

Sensorium: Conscious

ORIENTED

Adv : - Diet and Rest as advised.

- Blood sugar monitoring as advised.

- Consult physician for DM.

TREATMENT ADVISED :

Medicine	M	D	N	Days	Remarks
✓ MONOCEF- O TAB 200MG *	1	0	1	5	
✓ PANTOCID DSR CAP	1	0	0	10	EMPTY STOMACH
✓ ECOSPRIN TAB 75MG	0	1	0	10	
✓ BRILINTA TAB 90MG	1	0	1	10	
✓ ANGIWELL TAB 2.6MG (30S PACK)	1	0	1	10	
✓ SORBITRATE TAB 5MG				10	S/L 1 TAB SOS IF CHEST PAIN
✓ ATORVA TAB 40MG	0	0	1	10	
✓ CONCOR COR TAB 1.25MG	0	1	0	10	
✓ AJADUO TAB 25/5MG(10 TABS PCK)	0	1	0	10	BEFORE LUNCH
✓ ZEDEX -SF SYP 100ML	1	1	1	10	2 TSF TDS

Non Medicine Advice / Special Care Needed

- Diet and precaution as advised.

REVIEW DATE :

27/07/2026

When To Obtain URGENT CARE:

If fever, chest pain, dyspnoea, uneasiness, SOB occurs then consult in emergency dept.

DS for Mr. ABDUL LATIF

Dr. RAHUL GUPTA
Consultant

Dr. MIL BISWAS

Note: In case of Emergency, please contact CMO on 0145-2603603 or 8003053111

DS for Mr. ABDUL LATIF



Gheesibai Memorial

MITTAL HOSPITAL
& RESEARCH CENTRETax Invoice
FINAL Bill

GSTN: 08AABCM1115A2ZA

Bill No 26108870
Case No. 26008634
Case Name Mr. ABDUL LATIF
Company STAR HEALTH & ALLIED INSURANCE
Admission Date 14/07/26 18:14
Consultant Dr. RAHUL GUPTA
Diagnosis As Per Discharge Summary

Bill Date 16/07/26 15:43
Sex M
Age 65 Years
Discharge Date 16/07/2026

Page : Page 1 of 1

Sr. No.	Service Description	Chg Class	Qty	Rate	Amount
1	HbA1C (GLYCOSYLATED HAEMOGLOBIN)	Pvt Wd	1	660	660
2	PORTABLE ECHO CARDIOGRAPHY	ICU 2	1	3025	3025
3	PORTABLE X-RAY CHEST PA	ICU 2	1	665	665
4	Dr Visit (Dr. SANDIP BAGHE Splst)	Pvt Wd	1	800	800
5	SYRINGE PUMP	ICU 2	1	390	390
6	ATTENDANTS BEDDING B		1	150	150
7	ATTENDANTS BEDDING C		1	200	200
8	CARDIAC PANEL- NTPRO BNP CKMB TROPI	ICU 2	1	5185	5185
9	PHARMACY MEDICINE		10		97584
10	DISCHARGE TIME PHARMACY MEDICINE		1	1848	1848
11	NURSING CHGS (ON ICU STAY)		1	926	926
12	NURSING CHGS (ON Ward STAY)		1	146	146
13	PKG - PRIMARY ANGIOGRAPHY	Pvt Wd	1	14750	14750
14	PKG - CORONARY ANGIOPLASTY c Baloon	Pvt Wd	1	95000	95000

Total : 221329

Add GST Amount : 0

@ 5% on room rent (Excluding ICU) exceeding Rs. 5000 per day

SGST Amt 0.00

CGST Amt 0.00

Final Amount : 221329

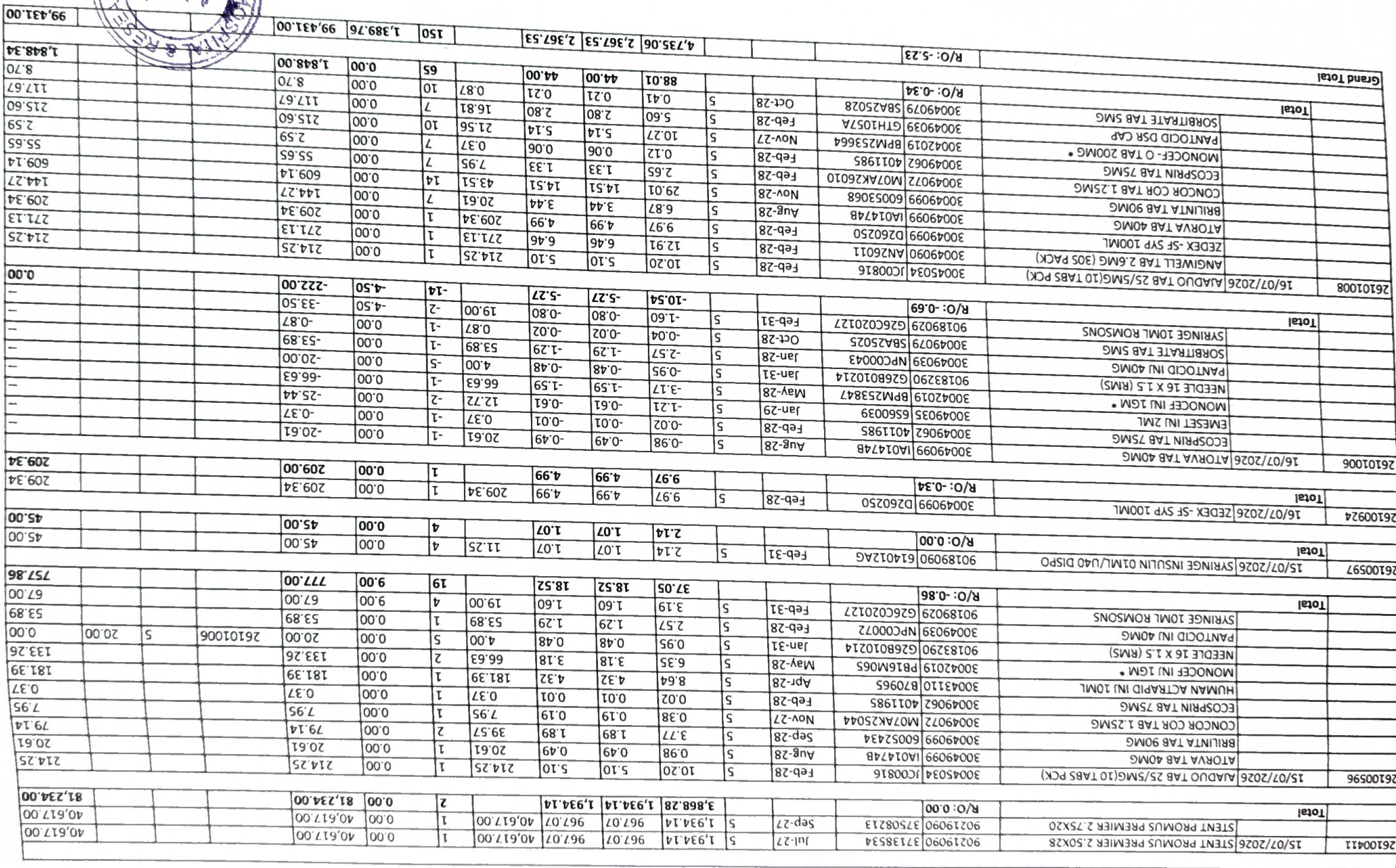


Mittal Pharmacy
(A unit of Mittal Hospital Ltd.)
Pushkar Road, Ajmer - 305004
Pharmacy Bill Details

Patient 26008634 Mr. ABDUL LATIF
Company STAR HEALTH & ALLIED INSURANCE

GST: 08AABCM1115A2ZA
DL No: 5325-5326

Bill No	Bill Date	Product Name	HSN Code	Batch No	Expiry Dt	GST %	GST Amt	SGST Amt	CGST Amt	MRP (Per Unit)	Qty	ConcAmt	NetAmt	RetBill	RetQty	RetAmt	FinalAmt
26099871	14/07/2026	NS 500ML AMANTA	30049099	30660102	Dec-28	5	1.77	0.89	0.89	37.26	1	0.00	37.26				37.26
		I V SET- ROMSONS	90189032	G26D020158	Mar-31	5	2.32	1.16	1.16	221.00	1	172.37	48.63				48.63
		CANNULA IV 20G (RMS)	90182010	G26E010211	Apr-31	5	1.93	0.97	0.97	226.00	1	185.43	40.57				40.57
		CANNULA FIXATOR (MEDICARE)	300590	M2608ES03	Feb-29	5	0.88	0.44	0.44	88.00	1	69.52	18.48				18.48
		ECG ELECTRODE ROMSONS	90181100	03626S35MO	Dec-27	5	3.66	1.83	1.83	23.25	5	39.40	76.85				76.85
		GLOVES EXAM(M)-KALTEX	40151200	26D9457E	Mar-29	5	6.67	3.34	3.34	23.44	10	94.40	140.00				140.00
		SYRINGE 05ML ROMSONS	90189029	G25L020431	Nov-30	5	1.05	0.53	0.53	11.40	2	0.80	22.00				22.00
		SYRINGE 10ML ROMSONS	90189029	G26C020127	Feb-31	5	2.39	1.20	1.20	19.00	3	6.75	50.25	26101006	2	33.50	16.75
		Total	R/O: -0.04				20.67	10.34	10.34		24	568.67	434.00				400.54
26099877	14/07/2026	ANGIWELL TAB 2.6MG (30S PACK)	30049090	AN26011	Feb-28	5	12.91	6.46	6.46	271.13	1	0.00	271.13				271.13
		ATORVA TAB 40MG	30049099	IA01474B	Aug-28	5	0.98	0.49	0.49	20.61	1	0.00	20.61	26101006	1	20.61	0.00
		BRILINTA TAB 90MG	30049099	60053231	Jan-29	5	2.07	1.04	1.04	43.51	1	0.00	43.51				43.51
		ECOSPRIN TAB 75MG	30049062	4011985	Feb-28	5	0.02	0.01	0.01	0.37	1	0.00	0.37	26101006	1	0.37	0.00
		GLOVES EXAM(M)-KALTEX	40151200	26D9457E	Mar-29	5	6.67	3.34	3.34	23.44	10	94.40	140.00				140.00
		HAND DISINFECTANT 100MLHANDSHI	30049082	H5B/25F006	Oct-28	5	4.71	2.36	2.36	234.38	1	135.38	99.00				99.00
		ECG ELECTRODE ROMSONS	90181100	14426S35MO	Mar-28	5	3.66	1.83	1.83	23.44	5	40.35	76.85				76.85
		PANTOCID INJ 40MG	30049039	NPC00072	Feb-28	5	2.57	1.29	1.29	53.89	1	0.00	53.89				53.89
		SORBITRATE TAB 5MG	30049079	SBA25025	Oct-28	5	0.04	0.02	0.02	0.87	1	0.00	0.87	26101006	1	0.87	0.00
		EMESET INJ 2ML	30049035	5A00614	Nov-28	5	0.61	0.31	0.31	12.72	1	0.00	12.72				12.72
		Total	R/O: -0.95				34.24	17.12	17.12		23	270.13	718.00				697.10
26099923	14/07/2026	CANREAL INJ 50MG	300490	GSF12002A	Nov-27	5	647.23	323.62	323.62	13,591.90	1	0.00	13,591.90				13,591.90
		Total	R/O: -0.90				647.23	323.62	323.62		1	0.00	13,591.00				13,591.90
26099966	15/07/2026	ATORVA TAB 40MG	30049099	IA01474B	Aug-28	5	0.98	0.49	0.49	20.61	1	0.00	20.61				20.61
		BRILINTA TAB 90MG	30049099	60052434	Sep-28	5	1.88	0.94	0.94	39.57	1	0.00	39.57				39.57
		CAP NON-WOVEN MALE (AMKAY)	62101000	80	Jan-31	5	0.56	0.28	0.28	10.00	2	8.24	11.76				11.76
		ECOSPRIN TAB 75MG	30049062	4011985	Feb-28	5	0.02	0.01	0.01	0.37	1	0.00	0.37				0.37
		EMESET INJ 2ML	30049035	6S60039	Jan-29	5	1.82	0.91	0.91	12.72	3	0.00	38.16	26101006	2	25.44	12.72
		GLOVES EXAM(M)-KALTEX	40151200	26D9457E	Mar-29	5	6.67	3.34	3.34	23.44	10	94.40	140.00				140.00
		I V FLOW REGULAR SET (RMS)	901890	G26D010714	Mar-31	5	10.10	5.05	5.05	656.00	1	443.82	212.18				212.18
		NS 500ML ACULIFE	30049099	18260854	Jan-29	5	1.77	0.89	0.89	37.24	1	0.00	37.24				37.24
		ORASEP MOUTH WASH 100ML	33049990	OMW2506	Nov-27	5	4.91	2.46	2.46	103.12	1	0.00	103.12				103.12
		PANTOCID INJ 40MG	30049039	NPC00043	Jan-28	5	2.57	1.29	1.29	53.89	1	0.00	53.89	26101006	1	53.89	0.00
		Total	R/O: -0.90				31.28	15.64	15.64		22	546.46	656.00				577.57
2610317	15/07/2026	CONCOR COR TAB 1.25MG	30049072	M07AK26010	Feb-28	5	0.38	0.19	0.19	7.95	1	0.00	7.95				7.95
		MONOCEF INJ 1GM *	30042019	BPM253847	May-28	5	6.35	3.18	3.18	66.63	2	0.00	133.26	26101006	1	66.63	66.63
		Total	R/O: -0.21				6.73	3.36	3.36		3	0.00	141.00				74.58



Emergency Initial Assessment

Date: 14/7/26

Pt. id-26024674 ipd-26008634 *ABDUL
 Ni LATIF M 65 *S/O MR. ABDUL MAJEED
 *14/07/26 *Dr. RAHUL GUPTA ICU-II
 *9351627242

Address: _____ Phone No.: _____

Nationality: ☒ Indian ☐ Other _____ Time of Arrival in Casualty: 6:00 AM ☐ PM ☒

Weight: _____ kg. Mode: ☒ Stretcher ☐ Wheelchair ☐ Walking ☐ Other _____

PIC ☐ Non PIC ☐ If yes, informed: Yes ☐ No ☐

History Given By (Name): Ms./Mrs./Mr. Heena Relation daughter Sign. Heena

Triage: Red ☐ Yellow ☐ Green ☐ Black ☐ End Time of Triage: 6:02 AM ☐ PM ☐

Return to Emergency Ward within 72 hours: Yes ☐ No ☐

Chief Complaints with duration: As Chest heaviness. Heaviness
uneasiness, once 2 days.

Past History: Medical _____

Surgical _____

Allergies Yes ☐ No ☒ Unknown ☐

Attending RMO: Dr. Heena Consultant: Dr. Rahul Gupta

Pain: Yes ☐ No ☐

Tool Used: Wong-Baker ☐ Numerical ☐ Behavioral ☐ NIPS ☐ FLACC ☐ N-Pass ☐

Pain Score: _____ Type: _____ Location: _____ Duration: _____

Quality: _____ Intervention/Alleviation Measure: _____

General Physical Examination:

Time	Temperature (°F)	HR / min.	SpO ₂ %	BP (mm of Hg)	RR / min.	RBS (mg/dL)	Urine Output (ml)	Pupil	Other
	<u>98.4</u>	<u>75</u>	<u>97</u>	<u>124/60</u>	<u>20</u>	<u>163</u>	<u>0</u>	<u>MMR GCMOD</u>	<u>Li</u>

Systemic Examination:

CNS: Conscious oriented
 GCS: Eye 4 Verbal 5 Motor 6 Total 15
 CVS: 87/32 (10)
 RS: BU Aced
 P/A: Soft
 L/E: Soft
 P/V: Soft
 Other: Soft

Medications on with dose:

- 1) _____
- 2) _____
- 3) _____
- 4) _____
- 5) _____
- 6) _____
- 7) _____

Provisional Diagnosis: CAD ACS. ILMR. RBBB

44548

Medication Administered :

Name of Drugs	Dose	Route	Frequency	Doctors Name	Doctor Sign
It was given Aspirin 300 mg OD				Dr. Manoj	
& Paracetamol 500 mg OD					
It was given					
100 mg OD					

Investigation Advised : Pre op profile ECG RBS 200 mg
in p/bk Cardiac marker or CPT

Order : FD ☐ SD ☒ LD ☐ RTF ☐ NBM ☐ ADD ☐ SRD ☐ RENAL ☐
Errals : 1. 2.

Assessment (If applicable) :									
Time	Temperature (°F)	HR / min.	SpO ₂ %	BP (mm of Hg)	RR / min.	RBS (mg/dL)	Urine Output (ml.)	Pupil	Other

Treatment on Discharge / Transfer

It was given Aspirin 300 mg OD	100 mg OD
It was given Paracetamol 500 mg OD	
It was given	
100 mg OD	

Follow up :

Transferred to : Ward ☐ OT ☐ ICU ☒ OR ☐ DAMA ☐ Expired ☐ Normal Discharge ☐ Refer ☐
Condition on Discharge : Stable ☐ Fair ☐ Critical ☐
Refused Admission : Yes ☐ (Reason :)
Consent for Refusal :

Signature of Consultant / CMO

Name : Dr. Manoj
Date : 14/11/21 Time : 6:40 AM ☐ PM ☐

ID:
Name:
Age:
Gender:

16-07-2026 06:34 AM

AA20W CE

Vent. Rate
PR Interval
QRS Duration
QT/QTc Interval
P/QRS/T Axes

70 bpm
152 ms
138 ms
400/418 ms
67/-134/44 deg

Sinus rhythm

--- Interpretation made without knowing patient's gender/age ---

Severe right axis deviation

Right bundle branch block

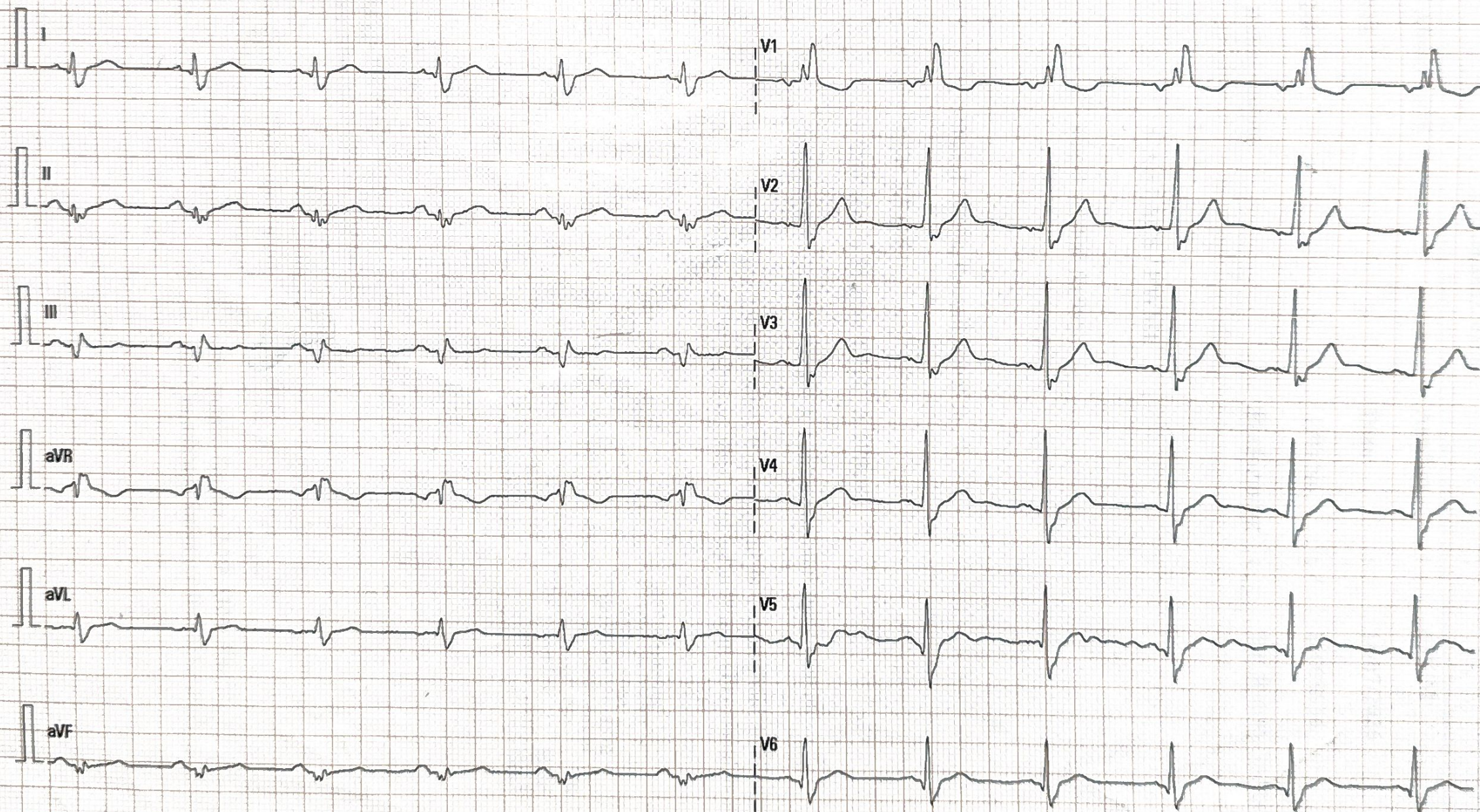
Inferior infarct - age undetermined

Abnormal ECG

Unconfirmed Diagnosis:

ptid-26024674 ipd-26008634 *ABDUL
LATIF M 65 *S/O MR.ABDUL MAJEED
*14/07/26 *Dr. RAHUL GUPTA ICU-II
*9351627242

16/7/20



25 mm/s

10 mm/mV

50 Hz~

BDR 35 Hz

Mittal Hospital & Research Centre Ajmer

02.07.00/V28.4.1

SN:FN-88013720

PTCA REPORT

Pt. Name	: Mr. Abdul Latif	Age/Sex	: 65Y/M
PTCA No.	: P-7718	Date	: 14/07/2026
Reg. No.	: 26024674	IPD No.	: 26008634
Consultant	: Dr. Rahul Gupta	Performing	: Dr. Rahul Gupta

PTCA (S) : LCX
Indication : CAD / ACS / PWMI
Route : Right Radial Artery

Procedure details

Lesion : Distal 100%, thrombus++
Guiding Catheter : EBU 3.5 (6F)
Guide wire : BMW Extra Floppy 0.014" X 190cm
Pre Dilatation : Artimes PTCA Balloon 2.0 X 12mm Inflated upto 14atm
Stent : Promus Primer 2.50 X 28mm Deployed upto 09atm (Mid to Distal)
Promus Primer 2.75 X 20mm Deployed upto 09atm (Proximal to Mid)

Boston Scientific
Promus PREMIER™
2.75mm x 20mm
GTIN 08714729828464
REF H7493925120270
2027-09-04
LOT 37508213
(01)08714729828464
(17)270904(10)37508213



Boston Scientific
Promus PREMIER™
2.50mm x 28mm
GTIN 08714729828570
REF H7493925128250
2027-07-23
LOT 37138534
(01)08714729828570
(17)270723(10)37138534



Post Dilatation Done.

Note:- Risk of Restenosis (1-2% with Drug Eluting Stent)
Risk of Stent Thrombosis 1% with All Stent.


Dr. Rahul Gupta (MD, DM, FACC, FESC, FSCAI)
Sr. Consultant Interventional Cardiologist

TEST REPORT

Lab ID : 00326016341
Name : ABDUL LATIF
Gender / Age : Male / 65 Years
Referred By : RAHUL GUPTA
Source By : Mittal Hospital
Report Status : Final
Sample Type : EDTA Blood

SIN No., Date : 4764135
Collection Date : 14-Jul-2026 06:31 PM
Received Date : 14-Jul-2026 06:31 PM
Report Date : 14-Jul-2026 08:51 PM
Collected at : Mittal Hospital
Receipt No : 26130586
Ward : ICU-II/202/014/Case No: 26008634 - IPD

DEPARTMENT OF HAEMATOLOGY MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
COMPLETE BLOOD COUNT (HEMOGRAM)				
Hemoglobin	L 13.2	14.0 - 17.5	g/dL	SLS
HCT	L 39.50	41.5 - 51.4	%	RBC Pulse High detection
RBC count	4.65	4.5 - 5.9	million/mm ³	DC Detection
MCV	84.9	80 - 96.1	fL	Calculated
MCH	28.4	27.5 - 33.2	pg	Calculated
MCHC	33.4	33.4 - 35.5	g/dL	Calculated
Red Cell Distribution Width (RDW-CV)	14.1	11.8 - 14.5	%	Calculated
Total Leucocyte Count (TLC)	H 13490	4400 - 11300	Cells/cumm	Flow Cytometry
Differential Leucocyte Count				
Neutrophils	H 77.20	42 - 72	%	Flow Cytometry
Lymphocytes	L 13.20	20 - 40	%	Flow Cytometry
Eosinophils	L 0.10	1 - 6	%	Flow Cytometry
Monocytes	9.30	2 - 12	%	Flow Cytometry
Basophils	0.20	<2	%	Flow Cytometry
Absolute Leucocyte Count				
Neutrophils	H 10.41	1.8 - 7.7	1000/mm ³	Calculated
Lymphocytes	1.78	1.0 - 4.8	1000/mm ³	Calculated
Eosinophils	L 0.01	0.2 - 0.45	1000/mm ³	Calculated
Monocytes	H 1.25	0.0 - 0.8	1000/mm ³	Calculated
Basophils	0.03	0.0 - 0.1	1000/mm ³	Calculated
Platelet Count				
Platelet Count	241	150 - 410	10 ³ /μL	DC Detection
MPV	H 11.70	7.8 - 11.0	fL	Calculated

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



Dr. Madhu Kabra

MD Pathology
RMC 23639/54073

Booking Centre :- Mittal Hospital

Processing Lab :- Mittal Hospital, C/O Mittal Hospital & Research Centre, Pushkar Road, Ajmer



MC-6600



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TEST REPORT

Lab ID : 00326016341	SIN No., Date : 4764135
Name : ABDUL LATIF	Collection Date : 14-Jul-2026 06:31 PM
Gender / Age : Male / 65 Years	Received Date : 14-Jul-2026 06:31 PM
Referred By : RAHUL GUPTA	Report Date : 14-Jul-2026 08:51 PM
Source By : Mittal Hospital	Collected at : Mittal Hospital
Report Status : Final	Receipt No : 26130586
Sample Type : Citrate Plasma	Ward : ICU-II/202/014/Case No: 26008634 - IPD

DEPARTMENT OF HAEMATOLOGY MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
Patient Plasma	H 16.3	12.23 - 15.47	Seconds	Citrated plasma, Optical clot detection (CLAUSS)
Mean Normal Prothrombin Time (MNPT)	13.8	13.8	Seconds	Calculated
Prothrombin Ratio (PR)	1.18			Calculated
International Normalized Ratio (INR)	H 1.20	0 - 1	Seconds	Citrated plasma, Optical clot detection (CLAUSS)



Dr. Madhu Kabra
 MD Pathology
 RMC 23639/54073

Booking Centre :- Mittal Hospital
 Processing Lab :- Mittal Hospital, C/O Mittal Hospital & Research Centre, Pushkar Road, Ajmer



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TEST REPORT

Lab ID	: 00326016341	SIN No., Date	: 4764135
Name	: ABDUL LATIF	Collection Date	: 14-Jul-2026 06:31 PM
Gender / Age	: Male / 65 Years	Received Date	: 14-Jul-2026 06:31 PM
Referred By	: RAHUL GUPTA	Report Date	: 14-Jul-2026 08:51 PM
Source By	: Mittal Hospital	Collected at	: Mittal Hospital
Report Status	: Final	Receipt No	: 26130586
Sample Type	: Fluoride Plasma	Ward	: ICU-II/202/014/Case No: 26008634 - IPD

DEPARTMENT OF CLINICAL-BIOCHEMISTRY

MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
Glucose (Random)				
Glucose (R)	176	< 200	mg/dL	Glucose Oxidase-Peroxidase

Interpretation:-

Criteria for the diagnosis of DM (males and non-pregnant females) (one of the following):

- Symptoms of DM pulse casual (Random) plasma/serum Glucose Concentration ≥ 200 mg/dL
- Fasting plasma Glucose (FPG)=126 mg/dL
- A1c=6.5%. Test should be performed in laboratory using a method NGSP certified and standardized to the DCCT assay.
- **Two-hour postload glucose(PG)=200 mg/dl during an GTT. The test should be performed using a 75g Glucose Load.**
- In the absence of unequivocal hyperglycemia with acute metabolic decompensation, these criteria should be confirmed by repeat testing on a separate day. The third measure (OGTT) is not recommended for routine clinical use.
- For diagnosis of DM in non pregnant adults at least 2 values of OGTT should be increased (or fasting serum Glucose ≥ 140 mg/dl on more than one occasion) and other causes of transient glucose intolerance must be ruled out.

Remarks:-

- For the above test, a prior diet of >150 g of carbohydrate daily, no alcohol and a restricted activity for 3 days before the test.
- OGTT should never be used for the evaluation of reactive hypoglycemia.
- OGTT has limited value for the diagnosis of DM in children..
- Fasting is defined as no caloric intake (No food or liquids except water) for at least 8 hrs.
- Post Glucose (PG) means the test should be performed using Glucose load as per the requirement (usually 75gm as per ADA & WHO Guidelines)
- Postprandial (PP) means 2 hours after intake of a meal counting from the first bite of food.
- Random is defined as anytime the day irrespective of the time of the meal or when you have severe symptoms of diabetes.
- HbA1c and Microalbuminuria are important tests for diagnosis and follow-up on Diabetes Mellitus.



Dr. Madhu Kabra

MD Pathology
 RMC 23639/54073

Booking Centre :- Mittal Hospital

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TEST REPORT

Lab ID	: 00326016341	SIN No., Date	: 4764135
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Referred By	: RAHUL GUPTA	Report Date	: 14-Jul-2026 08:51 PM
Source By	: Mittal Hospital	Collected at	: Mittal Hospital
Report Status	: Final	Receipt No	: 26130586
Sample Type	: Serum	Ward	: ICU-II/202/014/Case No: 26008634 - IPD

DEPARTMENT OF CLINICAL-BIOCHEMISTRY

MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
CREATININE				
Creatinine, Serum	0.60	0.6 - 1.3	mg/dL	Enzymatic Method
eGFR	107.13	>=90	ml/min./1.73m ²	Calculated

Remarks:-

eGFR unit : ml/min./1.73m²

eGFR < 60 for >= 3 months : Indicative of renal impairment.

eGFR is inaccurate for Hemodynamically unstable patients.

For Individuals of 19 years or more this calculator is used.

eGFR for less than 19 years of age is not applicable.



Dr. Madhu Kabra

MD Pathology
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Gender / Age	: Male / 65 Years	Received Date	: 14-Jul-2026 06:31 PM
Referred By	: RAHUL GUPTA	Report Date	: 14-Jul-2026 08:55 PM
Source By	: Mittal Hospital	Collected at	: Mittal Hospital
Report Status	: Final	Receipt No	: 26130586
Sample Type	: Serum	Ward	: ICU-II/202/014/Case No: 26008634 - IPD

SEROLOGY AND IMMUNOLOGY

MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
-----------	--------	--------------------------	------	--------

HIV RAPID METHOD(SERUM)

Final Result Non-Reactive

Remarks

- HIV-1/2 Test is rapid Immunochromatography test used for the qualitative detection of HIV-1 & HIV2 antibodies.
- Human immunodeficiency Virus (HIV) rapid screening assay, has overall 99.5% sensitivity and 99.9% specificity.
- For diagnostic purposes, the results obtained from this assay should always be used in combination with the clinical examination, medical history of the patient and other findings.



Dr. Madhu Kabra

MD Pathology
 RMC 23639/54073

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Processing Lab :- Mittal Hospital, C/O Mittal Hospital & Research Centre, Pushkar Road, Ajmer



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TEST REPORT

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Referred By	: RAHUL GUPTA	Report Date	: 14-Jul-2026 08:55 PM
Source By	: Mittal Hospital	Collected at	: Mittal Hospital
Report Status	: Final	Receipt No	: 26130586
Sample Type	: Serum	Ward	: ICU-II/202/014/Case No: 26008634 - IPD

SEROLOGY AND IMMUNOLOGY

MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
HBsAg RAPID METHOD(SERUM)				
HBsAg (Serum)	NON REACTIVE	NON REACTIVE		Rapid Immunochromatography Assay

Remarks:

- HBsAg rapid card is used for detection of surface antigen of the hepatitis B virus. It can detect all the eleven sub-types of HBsAg. It has a sensitivity of 100% and Specificity: 99.4% according to WHO Evaluation.
- For diagnostic purposes, the results obtained from this assay should always be used in combination with the clinical examination, medical history of the patient and other findings.

----- End Of Report -----

Pending Services
 ABO & RH TYPING (BLOOD GROUP) BY TUBE AGGLUTINATION



Dr. Madhu Kabra

MD Pathology
 RMC 23639/54073

Booking Centre :- Mittal Hospital
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Gender / Age	: Male / 65 Years	Received Date	: 14-Jul-2026 06:31 PM
Referred By	: RAHUL GUPTA	Report Date	: 14-Jul-2026 10:26 PM
Source By	: Mittal Hospital	Collected at	: Mittal Hospital
Report Status	: Final	Receipt No	: 26130586
Sample Type	: EDTA Blood	Ward	: ICU-II/202/014/Case No: 26008634 - IPD

DEPARTMENT OF HAEMATOLOGY, MHRC PRE ANGIO PANEL

Test Name	Result	Biological Ref. Interval	Unit	Method
ABO & RH TYPING (BLOOD GROUP) BY TUBE AGGLUTINATION				
ABO & RH TYPING (BLOOD GROUP)	"A" POSITIVE			Tube Agglutination

----- End Of Report -----



Dr. Madhu Kabra

MD Pathology
 RMC 23639/54073

Booking Centre :- Mittal Hospital

Processing Lab :- Mittal Hospital, C/O Mittal Hospital & Research Centre, Pushkar Road, Ajmer



MC-6600



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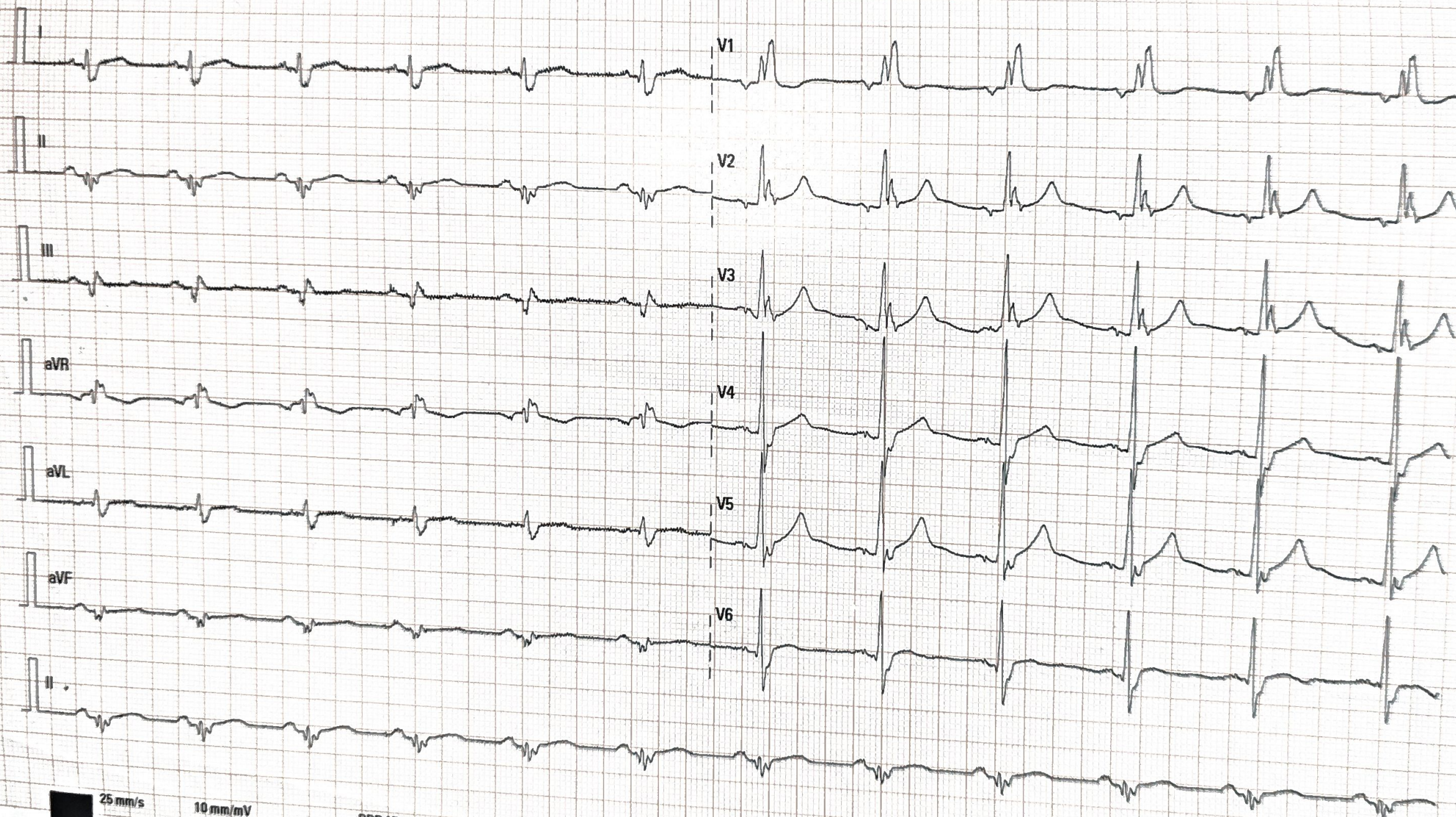
ID: 26008634
Name: abdul
Age: 65 Years
Gender:

15-07-2026 06:47:57

Vent. Rate 71 bpm
PR Interval 150 ms
QRS Duration 136 ms
QT/QTc Interval 418/437 ms
P/QRS/T Axes 62/-133/46 deg
QTc:Hodges

Sinus rhythm
--- Interpretation made without knowing patient's gender ---
Severe right axis deviation
Right bundle branch block
Inferior infarct - age undetermined
Abnormal ECG

Unconfirmed Diagnosis.



25 mm/s

10 mm/mV

BDR 150 Hz

mittal hospital & research centre

02.10.00/V28.4.1

SN:FN-27036777

ID: 26008634
Name: ABDUL LATIF
Age: 65 Years
Gender: Male

POST PTCA

14-07-2026 21:34:32

A&W CE

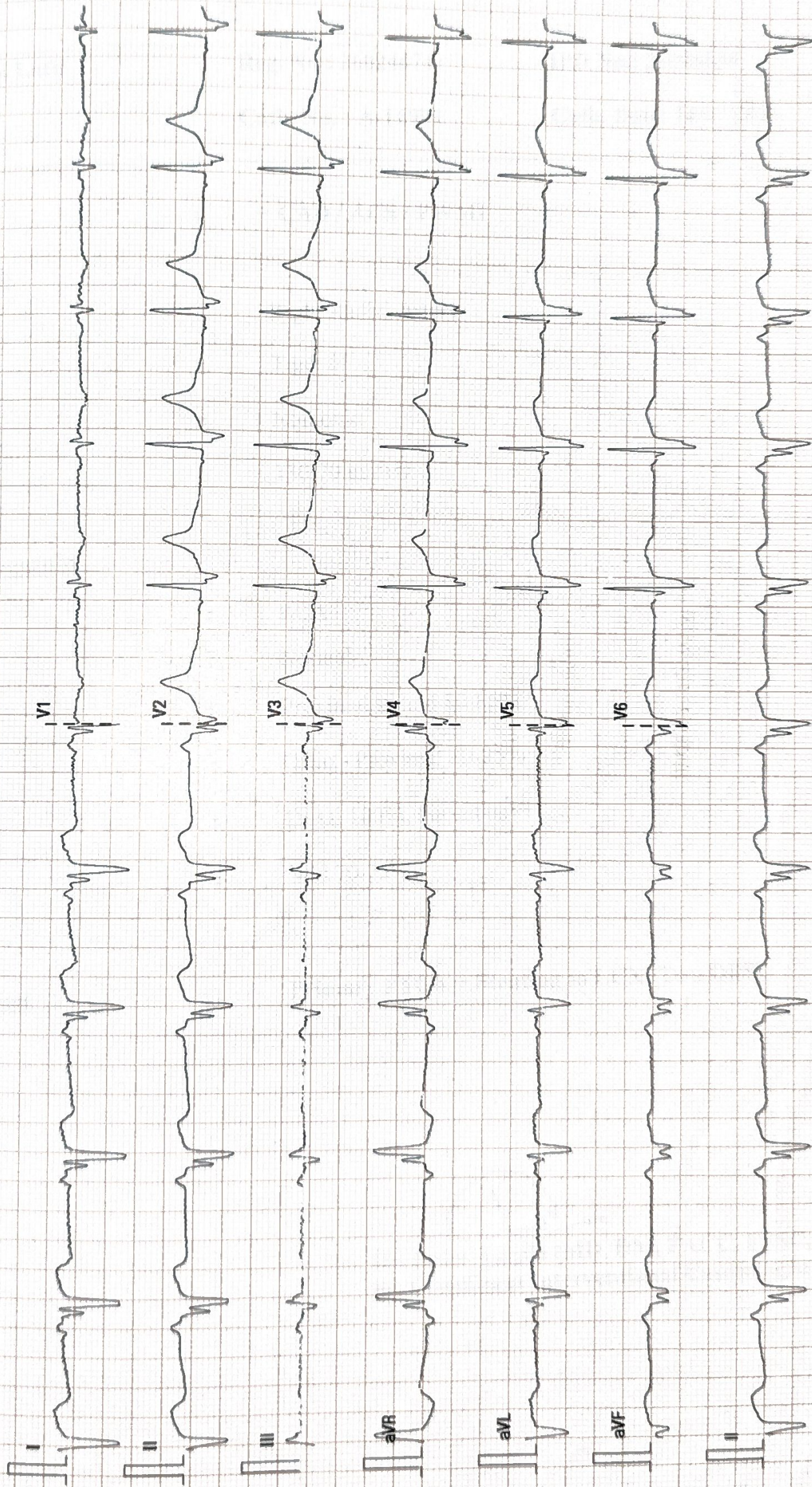
Heart Rate
PR Interval
QRS Duration
QT/QTc Interval
P/QRS/T Axes
QTc-Hodges

61 bpm
136 ms
148 ms
448/450 ms
85/-162/71 deg

Sinus rhythm
Lead(s) unsuitable for analysis: V4
Severe right axis deviation
Right bundle branch block
Inferior infarct - age undetermined
Lateral infarct - age undetermined

Abnormal ECG

Unconfirmed Diagnosis



25 mm/s

50 Hz

BDR 35 Hz

MITT HORT

02.07.00/V28.4.1

SN FN-79009479

CORONARY ANGIOGRAM REPORT

Name: Mr. Abdul Latif

Reg. No.: 26024674

IPD No.: 26008634

Age: 65Y/M

Cath. No. : A-14991

Cath. Date: 14/07/2026

Indication

: CAD / ACS / PWMI

Procedure Details

Route

: Right Radial Artery

Catheters

: Tiger 5F

Contrast

: Nonionic

Aortic Pressure

: 130/70 mmHg

Coronary Angiography

Dominance

: RCA

LMCA

: Normal

LAD

: Proximal to mid 80-85%

D-I

: Ostio - Proximal 80-85%

LCX

: Distal 100%, thrombus++

RCA

: Mid 70-75%

Recommendation

: Primary PTCA + Stenting to LCX (Two DES)


Dr. Rahul Gupta (MD, DM, FACC, FESC, FSCAI)
Sr. Consultant Interventional Cardiologist



DEPARTMENT OF CARDIOLOGY

NAME : ~~ATIF M 65~~ *S/O MR.ABDUL MAJEED
DATE : ~~14/07/26~~ *Dr. RAHUL GUPTA ICU-II
REF.BY :

ECHO-CARDIOGRAPHY

MITRAL VALVE :

Morphology: AML-

Normal/Thickening/Calcification/Flutter/Vegetation/Prolapse/SAM/Doming.

~~PML~~ - Normal/Thickening/Calcification/Prolapse/Paradoxical motion/Fixed.

Subvalvular deformity - Present/Absent.

Doppler : Normal/Abnormal. E > a

Mitral Stenosis : Present/Absent.

EDG .. mm Hg. MDG .. mm Hg MVA .. cm²

Mitral Regurgitation : Absent/Trivial/Mild/Moderate/Severe.

TRICUSPID VALVE :

Morphology: Normal/Atresia/Thickening/Calcification/Vegetation/Prolapse/Doming.

Doppler : Normal/Abnormal.

Tricuspid Stenosis : Present/Absent.

EDG .. mm Hg. MDG .. mm Hg

Tricuspid Regurgitation : Absent/Trivial/Mild/Moderate/Severe.

Fragmented signals.

Velocity ... msec. Pred RVSP==RAP+ mm Hg

PULMONARY VALVE :

Morphology : Normal/Atresia/Thickening/Doming/Vegetation.

Doppler : Normal/Abnormal.

Pulmonary Stenosis : Present/Absent. Level

PSG mm Hg. Pulmonary Annulus mm

Pulmonary Regurgitation : Present/Absent.

Early diastolic gradient ... mm Hg.

End diastolic gradient ... mm Hg.

AORTIC VALVE :

Morphology : Normal/Thickening/Calcification/Restricted opening/Flutter/vegetation.

No of cusps : 1/2/3/4.

Doppler : Normal/Abnormal.

Aortic Stenosis - Present/Absent. Level

PSG .. mm Hg. Aortic Annulus mm

Aortic Regurgitation : Absent/Trivial/Mild/Moderate/Severe.





MEASUREMENT		NORMAL VALUES	
Aorta	mm (21-22 mm/m ²)	L Aes	mm (12-33 mm/m ²)
LVes	mm (16-19 mm/m ²)	LVed	mm (19-32 mm/m ²)
IVS ed	mm (6-10 mm)	PW (LV)	mm (7 - 11 mm)
RV ed	mm (4-14 mm/m ²)	RV	mm (upto 5 mm)
LW d (ml)		LW s (ml)	
EF %	(55-80 %)	IVS Motion :	
Normal/Flat/Paradoxical/Other			

LV : Normal/Enlarged/Clear/Thrombus/Concentric Hypertrophy.
Contraction : Normal/Reduced.

Regional wall motion abnormality

LA : ~~Normal~~/Enlarged/Clear/Thrombus.

RA : Normal/Enlarged/Clear/Thrombus.

RV : Normal/Enlarged/Clear/Thrombus.

PERICARDIUM : Normal/Thickening/Calcification/Effusion.

Concentric LV $\rightarrow$ (+)

FINAL IMPRESSION :

Room A (f)

Lex tenny seveny

hydroxine bi

$$2\sqrt{6}f = \underline{\underline{457f}}$$

DR. RAHUL GUPTA

M.D. D.M (CARDIOLOGY)

FACC(Fellow in American College of Cardiology),

FESC(Fellow in European society of Cardiology)

Senior Consultant Interventional Cardiologist

Ind. Core EVH / Transm (47)
EF = 45 - /





Report at
→ 6:00 PM

Pre-Authorisation Query

Date : 15-Jul-2026

Time : 05:51 PM

To,

The Administrator / Medical Superintendent,
Mittal Hospital and Research Centre,
Pushkar Road.,

Pvt. 313

Dear Sir/Madam,

Greetings from STAR Health!

We are writing with regard to your pre-authorisation query for the insured mentioned below:

Claim Intimation Number	CIR/2027/221126/0606193
Name of the Insured	ABDUL LATEEF
Age / Gender	65 years / M
Product name	Star Health Assure Insurance Policy
Policy Number	8005112600040593_2025
Policy Period	30 Nov 2025 to 29 Nov 2028
Diagnosis	Atherosclerotic heart disease of native coronary artery without angina pectoris
Date of Admission	14 Jul 2026 12:00 PM
Name of the Hospital and Location	Mittal Hospital and Research Centre, Ajmer

After carefully reviewing your request, we have observed that the following details/documents are required for further action.

1. Kindly provide the duration of ailment along with first consultation papers Kindly clarify any past H/O cardiac ailment and if so submit prior treatment records and cardiac markers report.

You can email them to support@starhealth.in (Please mention the Claim Intimation No. in the subject line.)

(or)

Required documents can be uploaded through Hospital Portal

(or)

Upload them on <https://web.starhealth.in/claims#4>

You can also submit them on the STAR Health App, available for download on Android and iOS:

Android



iOS



Star Health and Allied Insurance Co. Ltd.

Balaji Complex, No.15, Whites Lane, Whites Road, Royapettah, Chennai - 600014

Customer Care: 1-800-102-4477/1-800-425-2255 | Corporate Customer Care: 044 43664666 | WhatsApp: +91 9597652225

IRDAI Registration No.: 129 | CIN: L66010TN2005PLC056649 | Ph: 044-28288800

Email: support@starhealth.in | Website: www.starhealth.in



PTCA REPORT

Pt. Name	: Mr. Abdul Latif	Age/Sex	: 65Y/M
PTCA No.	: P-7718	Date	: 14/07/2026
Reg. No.	: 26024674	IPD No.	: 26008634
Consultant	: Dr. Rahul Gupta	Performing	: Dr. Rahul Gupta

PTCA (S) : LCX
Indication : CAD / ACS / PWMI
Route : Right Radial Artery

Procedure details

Lesion : Distal 100%, thrombus++
Guiding Catheter : EBU 3.5 (6F)
Guide wire : BMW Extra Floppy 0.014" X 190cm
Pre Dilatation : Artimes PTCA Balloon 2.0 X 12mm Inflated upto 14atm
Stent : Promus Primer 2.50 X 28mm Deployed upto 09atm (Mid to Distal)
Promus Primer 2.75 X 20mm Deployed upto 09atm (Proximal to Mid)

Boston Scientific
Promus PREMIER™
2.50mm x 28mm
GTIN 08714729828570
REF H7493925128250
2027-07-23
LOT 37138534
(01)08714729828570
(17)270723(10)37138534



Boston Scientific
Promus PREMIER™
2.75mm x 20mm
GTIN 08714729828464
REF H7493925120270
2027-09-04
LOT 37508213
(01)08714729828464
(17)270904(10)37508213



Post Dilatation Done.

Note:- Risk of Restenosis (1-2% with Drug Eluting Stent)
Risk of Stent Thrombosis 1% with All Stent.

Dr. Rahul Gupta (MD, DM, FACC, FESC, FSCAI)
Sr. Consultant Interventional Cardiologist





Gheesibai Memorial

MITTAL HOSPITAL

& RESEARCH CENTRE

CORONARY ANGIOGRAM REPORT

Name: Mr. Abdul Latif

Age: 65Y/M

Reg. No.: 26024674

IPD No.: 26008634

Cath. No. : A-14991

Cath. Date: 14/07/2026

Indication

: CAD / ACS / PWMI

Procedure Details

Route

: Right Radial Artery

Catheters

: Tiger 5F

Contrast

: Nonionic

Aortic Pressure

: 130/70 mmHg

Coronary Angiography

Dominance

: RCA

LMCA

: Normal

LAD

: Proximal to mid 80-85%

D-I

: Ostio - Proximal 80-85%

LCX

: Distal 100%, thrombus++

RCA

: Mid 70-75%

Recommendation

: Primary PTCA + Stenting to LCX (Two DES)


Dr. Rahul Gupta (MD, DM, FACC, FESC, FSCAI)
Sr. Consultant Interventional Cardiologist

