



LABORATORY REPORT



Name : Ms SANGEETA HELA	Sex/Age : Female / 34 Years	Case ID : 4109300078
Ref. By : Self	Reg Date : 16-Oct-2024 12:29	Pt. ID :
Bill. Loc. : NDPL ARH		Mob.No : 9883150795
Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Whole Blood EDTA	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
COMPLETE BLOOD COUNT				
Haemoglobin <i>Flowcytometry</i>	L 9.7	gm/dL	12 - 15	
RBC	L 3.53	millions/cumm	3.8 - 4.8	
PCV	L 32.7	Vol%	36.0 to 46.0	
MCV	92.6	fL	83 - 101	
MCH	27.5	pg	27 - 32	
MCHC	L 29.7	gm/dL	31.5 - 34.5	
RDW	H 15.6	%	11.6 - 14.6	
TOTAL AND DIFFERENTIAL WBC COUNT				
Total WBC Count	6400	/cumm	4000 to 10000	
Neutrophil	45	%	40 - 80	
Lymphocyte	25	%	20 - 40	
Eosinophil	H 29	%	1 - 6	
Monocytes	L 01	%	2 - 10	
Basophil	00	%	0 -	
Neutrophil	2880	/cumm	2000 - 7000	
Lymphocyte	1600	/cumm	1000 - 3000	
Eosinophil	H 1856	/cumm	20 - 500	
Monocyte	L 64	/cumm	200 - 1000	
Basophil	0	/cumm	00 - 100	
Neut/Lympho Ratio (NLR)	1.80		0.78 - 3.53	
PLATELETS				
Platelet Count	195000	/cumm	1,50,000 - 4,10,000	
MPV	14.4	fL	7.50 - 12.0	
PDW	H 22.7		10.0 - 17.9	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Anwasha Maji

Verified by



Supratik Biswas

DR Supratik Biswas
MBBS, MD
Consultant Biochemist
WBMC 64600



MC - 2167



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Note :

XN 1000, Sysmex

Method : FLOWCYTOMETRY

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

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Bill. Loc. : NDPL ARH		Mob.No : 9883150795
Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Whole Blood EDTA	Ref Id1 :
Report Date and Time : 16-Oct-2024 18:12		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
ESR	H 45	mm	0 - 12	

Method : Modified Westergren Method
Instrument - Automated Vescube - 30 touch

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Sudipta Halder

Verified by



Meenakshi

Dr Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
WBMC 54631



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Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Peripheral Smear Examination				
RBC Morphology	Mild dimorphic anaemia			
WBC Morphology	Eosinophilia seen			
Platelet	Adequate			

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

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Bill. Loc. : NDPL ARH		Mob.No : 9883150795
Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Plasma Fluoride F, Plasma Fluoride PP	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Plasma Glucose - F <i>Hexokinase</i>	90	mg/dL	70 - 99 : Non diabetic 100 - 125 : Pre diabetic >= 126 : Diabetic	
Plasma Glucose - PP <i>Hexokinase</i>	117	mg/dL	70 - 139 : Non diabetic 140 - 199 : Pre diabetic =/more than 200 : Diabetic	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Pintu Manna

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Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Whole Blood EDTA	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
HbA1C <i>HPLC</i>	5.30	%	Normal : <5.7 Pre diabetes : 5.7-6.4 Diabetes : >6.5	
Average Plasma Glucose <i>Calculated</i>	105	mg/dL		

Interpretation :

HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control. Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia. Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients. Patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC) HbA1c can not be quantitated as there is no HbA. In such circumstances glycemic control can be monitored using plasma glucose levels or serum Fructosamine. The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Priya Manna

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Patient Data

Sample ID: 24109300078
 Patient ID:
 Name:
 Physician:
 Sex:
 DOB:

Analysis Data

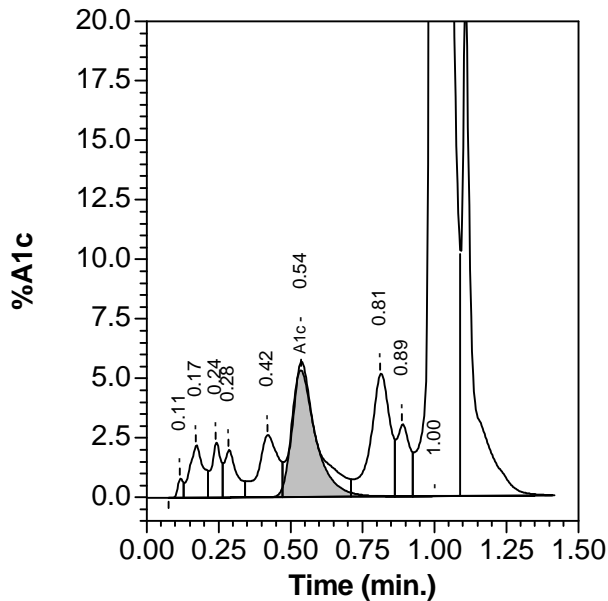
Analysis Performed: 10/16/2024 18:00:58
 Injection Number: 1386U
 Run Number: 51
 Rack ID: 0001
 Tube Number: 2
 Report Generated: 10/16/2024 18:12:22
 Operator ID:

Comments:

Peak Name	NGSP %	Area %	Retention Time (min)	Peak Area
Unknown	---	0.1	0.114	2150
A1a	---	1.0	0.169	14351
A1b	---	0.7	0.238	10089
F	---	0.8	0.283	11729
LA1c	---	1.5	0.420	21746
A1c	5.3	---	0.535	61992
P3	---	3.2	0.811	47691
P4	---	1.2	0.886	18574
Ao	---	87.4	1.001	1302759

Total Area: 1,491,080

HbA1c (NGSP) = 5.3 %





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Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Serum	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
LIPID PROFILE				
Triglyceride <i>Glycerol Phosphate Oxidase</i>	106	mg/dL	< 150 - Normal 150 - 199 - Borderline 200 - 499 - High > 500 - Very High	
Cholesterol <i>Enzymatic</i>	172	mg/dL	<200 - Desirable 200 - 239 - Borderline High > 240 - High	
HDL Cholesterol <i>CHOD-POD</i>	L 39	mg/dL	Desirable : >60 Borderline : 40-60 Low(High risk) : <40	
LDL Cholesterol (Direct) <i>Measured, Liquid Selective Detergent</i>	120	mg/dL	Optimal : <100 Near Optimal : 100-129 Borderline High : 130-159 High : 160 - 189 Very High : >= 190	
VLDL <i>Calculated</i>	13	mg/dL	10 - 40	
Non-HDL Cholesterol <i>Calculated</i>	H 133	mg/dL	<130	
Chol/HDL <i>Calculated</i>	4.41		1 - 5.2	
LDL/HDL Ratio	3.08			

***National Cholesterol Education Programme Adult Treatment Panel III Guidelines(US).**

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Pintu Manna

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Bill. Loc. : NDPL ARH		Mob.No : 9883150795
Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Serum	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
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BIOCHEMICAL INVESTIGATIONS

Liver Function Test

Bilirubin Total <i>DIAZO REACTION</i>	0.58	mg/dL	0.2 - 1.2	
Bilirubin Conjugated <i>DIAZO REACTION</i>	0.16	mg/dL	0.0 - 0.2	
Bilirubin Unconjugated <i>Calculated</i>	0.42	mg/dL	0 - 0.8	
S.G.P.T. <i>NADH (Without P-5-P)</i>	25	U/L	< 34	
S.G.O.T. <i>NADH (Without P-5-P)</i>	30	U/L	11 - 34	
Alkaline Phosphatase <i>IFCC</i>	59		46.0 - 122.0	
Proteins (Total) <i>Biuret</i>	7.41	g/dL	6.4 - 8.3	
Albumin <i>(BCG)</i>	4.37	g/dL	3.5 - 5.0	
Globulin <i>Calculated</i>	3.04	g/dL	1.80 - 3.60	
A/G Ratio <i>Calculated</i>	1.44		1.2 - 2.0	
Gamma Glutamyl Transferase <i>L-Gamma-glutamyl-3-carboxy-4-nitroanilide Substrate</i>	12	U/L	< 38	

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Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Thyroid Function Test				
Triiodothyronine (T3) <i>CMIA</i>	0.87	ng/mL	0.35 - 1.93	
Thyroxine (T4) <i>CMIA</i>	7.89	µg/dL	4.87 - 11.72	
TSH <i>CMIA</i>	1.58	µIU/mL	Euthyroid : 0.35 - 4.94 First Trimester : 0.1 - 2.5 Second Trimester : 0.2 - 3.0 Third Trimester : 0.3 - 3.0	

The subreport 'dynamicText_12B235' could not be found at the specified location C:\SI\MS\API\App_Data\PDF\CL Lab

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

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Bill. Loc. : NDPL ARH		Mob.No : 9883150795
Sample Date and Time : 16-Oct-2024 12:57	Sample Type : Urine F,Urine PP	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	REMARKS
Urine Glucose (Fasting)	Absent		Absent	
Urine Glucose (Post Prandial)	Absent		Absent	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Kalol Sarkar

Verified by



Supratik Biswas

DR Supratik Biswas

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Consultant Biochemist

WBMC 64600



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Gender / Age :	Female / 34 Years	Registration Date & Time :	16-Oct-2024 12:29
Ref Id :		Receiving Date & Time :	16-Oct-2024 15:13
B2b Name :	NDPL ARH	Report Date & Time :	17-Oct-2024 09:58
Ref By :	Self		

TMT (Tread Mill Test)

INDICATION	Evaluation of functional status.
SYMPTOMS	Asymptomatic
MEDICATIONS	Nil
RISK FACTOR	Age
PROTOCOL USED	Bruce
STAGE REACHED	III
MAXIMUM WORK LOAD	7.7 METs.
EXERCISE TIME	6 min. 25 sec.
HR ACHIEVED	186/165 (88%)
REASON FOR TERMINATION	Target heart rate achieved
BLOOD PRESSURE RESPONSE	Normal
ST DEPRESSION	No Significant ST-T changes seen during the study
ARRHYTHMIA	Nil

Conclusion :

- Stress test is **NEGATIVE** for the electrocardiographic evidence of provokable myocardial ischaemia.
- Fair exercise tolerance.

Abhinav



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Ref Id :		Receiving Date & Time :	16-Oct-2024 15:13
B2b Name :	NDPL ARH	Report Date & Time :	17-Oct-2024 09:58
Ref By :	Self		

Tanusree Sukla
Verified BY

Dr.Abhinay Tibdewal
MD, DM (Cardiologist)
WBMC 85811



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Sample Date and Time : 16-Oct-2024 12:56	Sample Type : Serum	Ref Id1 :
Report Date and Time : 16-Oct-2024 20:42		Ref Id2 :

TEST	RESULTS	UNIT	BIOLOGICAL REF RANGE	TEST REMARK
Kidney Function Test				
Urea	L 13	mg/dL	17 - 43	
Creatinine <i>Jaffe - Kinetic</i>	0.73	mg/dL	<0.9	
Uric Acid <i>Uricase</i>	4.8	mg/dL	3.4 - 7.0	
BUN <i>GLDH</i>	L 6.1	mg/dL	7.00 - 18.70	
Calcium <i>NM-BAPTA</i>	8.6	mg/dL	8.4 - 10.2	
Sodium <i>ISE, Indirect</i>	139	mmol/L	136.0 - 145.0	
Potassium <i>Ion Selective Electrode</i>	3.56	mmol/L	3.5 - 5.1	
Chloride <i>ISE, Indirect</i>	104	mmol/L	97 - 111	

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

Pintu Manna

Verified by



Supratik Biswas

DR Supratik Biswas
MBBS, MD
Consultant Biochemist
WBMC 64600



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Name : Ms SANGEETA HELA	Sex/Age : Female / 34 Years	Case ID : 4109300078
Ref. By : Self	Reg Date : 16-Oct-2024 12:29	Pt. ID :
Bill. Loc. : NDPL ARH		Mob.No : 9883150795
Sample Date and Time : 27-Oct-2024 11:36	Sample Type : PAP Smear	Ref Id1 :
Report Date and Time : 28-Oct-2024 15:58		Ref Id2 :

TEST

RESULTS

Patient Complaint / History	Routine check
Specimen	Cervical smear
Specimen Adequacy:	Adequate with presence of endocervical cells.
Epithelial Cells	Smears show intermediate cells.
Epithelial Cell Abnormalities	Smears are negative for intraepithelial lesion or malignancy.
Organism	Gardnerella vaginalis.
Background	Background show infective infiltrate.
Impression:	Cervical smear ----- Inflammatory changes.

Note:(LL-VeryLow,L-Low,H-High,HH-VeryHigh,A-Abnormal)

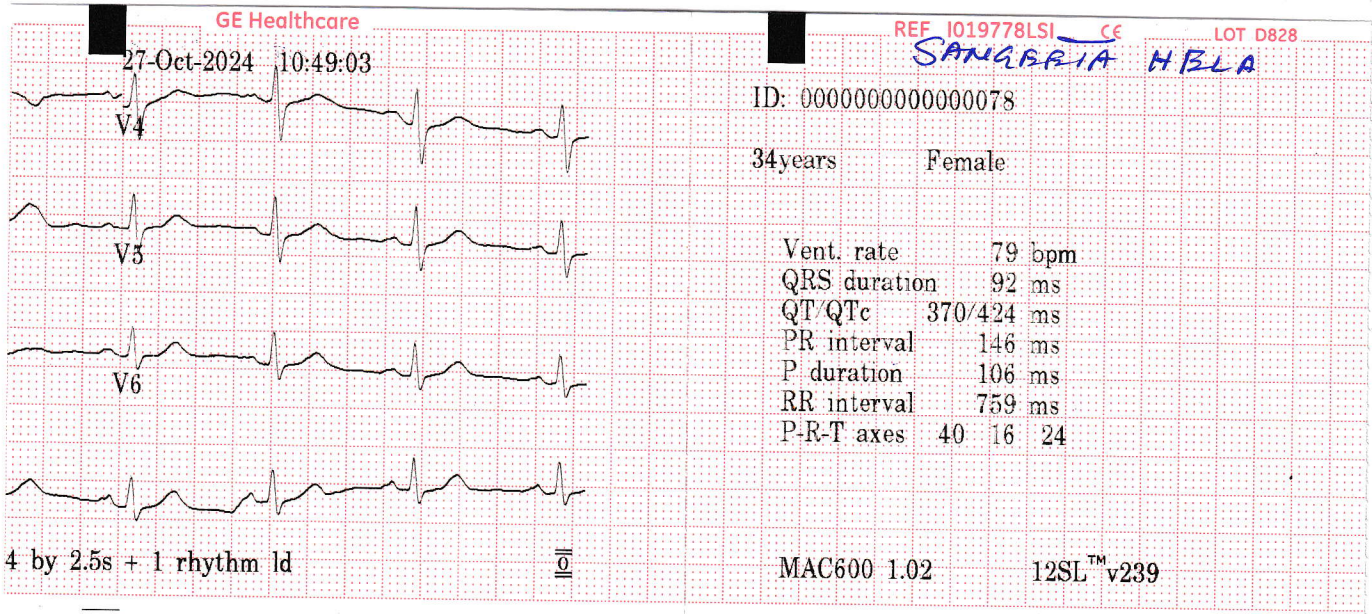
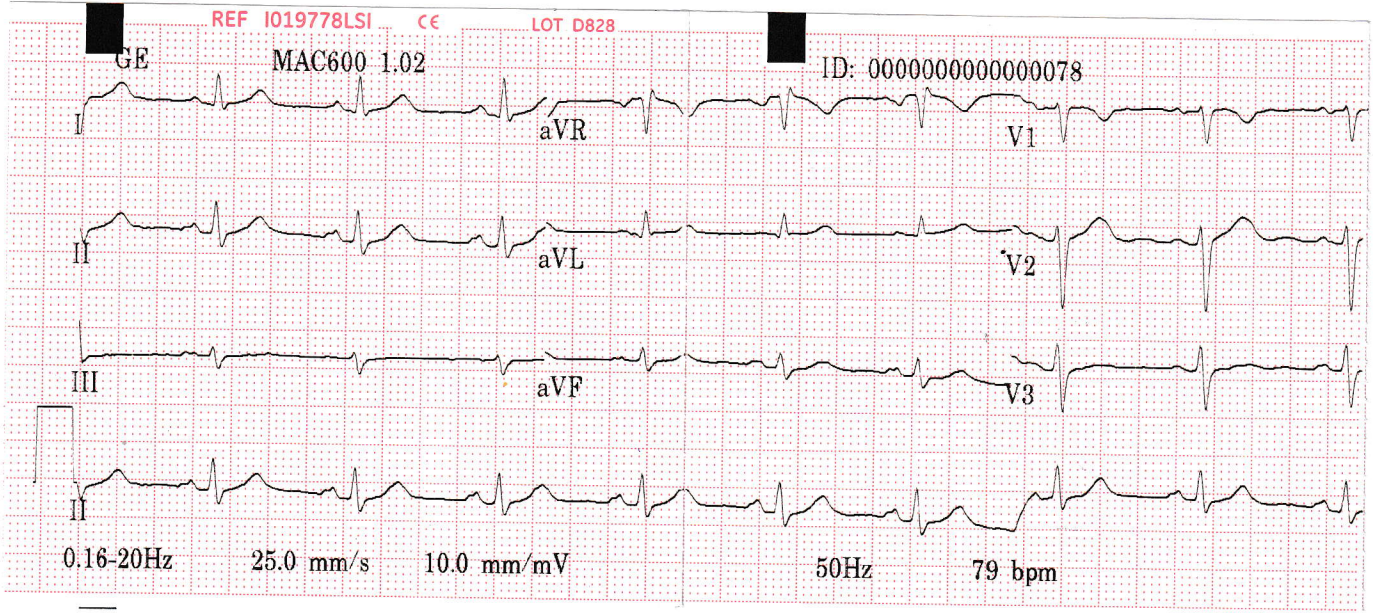
Krishnendu Mukherjee

Verified by



N Banerjee

Dr.Nabanita Banerjee
MBBS (Cal), DNB (I),
MIAPM, MIAC,
Pathologist



- ✓ Normal sinus rhythm
- ✓ Normal ECG

Abhinay
27/10/24

Dr. Abhinay Tibdewal
Consultant Cardiologist
MBBS, MD, DM (Cardio)



RADIOLOGY REPORT



Name :	Ms SANGEETA HELA	Patient ID :	4109300078
Gender / Age :	Female / 34 Years	Registration Date & Time :	16-Oct-2024 12:29
Ref Id :		Receiving Date & Time :	07-Nov-2024 10:07
B2b Name :	NDPL ARH	Report Date & Time :	07-Nov-2024 15:30
Ref By :	Self		

ULTRASONOGRAPHY OF WHOLE ABDOMEN

LIVER :

Is enlarged (146 mm) in size, normal in shape, position & outline with increased parenchymal echogenicity. Hepatic venous portal systems are normal. Intrahepatic biliary radicles are not dilated. Portal vein measures 10 mm. in diameter.

GALL BLADDER :

Is normal in size, contour and wall thickness. No calculi seen in gall bladder lumen.

CBD :

Common bile duct is not dilated and measures 4 mm in diameter.

PANCREAS :

Is normal in size, shape, and echopattern. Pancreatic duct is not dilated. No focal parenchymal lesion is seen.

SPLEEN :

Is normal in size, shape, position and echogenicity. No focal parenchymal lesion is seen. Spleen measures 118 mm in long axis.

KIDNEYS :

Are normal in size, shape, position and outline showing normal cortico-medullary differentiation. No focal parenchymal lesion is seen. No hydronephrosis, calculi or any renal mass is seen.

Right kidney measures 103 mm in length.

Left kidney measures 101 mm in length.

URETERS:

Either ureter is not dilated.

URINARY BLADDER:

Is well distended with normal contour and wall thickness. No intraluminal lesion is seen.

UTERUS :

Is normal in size, shape, position and echogenicity. No SOL is seen. Midline echo of uterus is normal. Uterine cavity is empty. Endometrium thickness is 5 mm. Cervix is normal in size (30 mm) & echotexture.

Uterus measures 94 mm x 57 mm x 38 mm.

OVARIES :

Are normal in size and echopattern. No other sizeable lesion is seen in the pelvis.

Right ovary measures 40 mm x 30 mm x 15 mm (volume - 9 cc).



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B2b Name :	NDPL ARH	Report Date & Time :	07-Nov-2024 15:30
Ref By :	Self		

Left ovary measures 33 mm x 31 mm x 14 mm (volume - 7 cc).

PERITONEUM :

There is no free fluid in peritoneal cavity.

RETROPERITONEUM :

There is no lymphadenopathy and no obvious retroperitoneal mass is seen. Retroperitoneal fat planes are normal.

LOWER PLEURAL SPACE :

There is no pleural effusion.

IMPRESSION:

- **Hepatomegaly with Grade - I fatty liver.**

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

Devpriya Pradhan

Priyanka Chatterjee
Verified BY

Dr.Devpriya Pradhan
MD Radiodiagnosis
WBMC 81171



Patient Name :	SANGEETA HELA	Patient ID :	0078
Modality :	DX	Sex :	F
Age :	034Y	Study :	CHEST PA
Reff. Dr. :	SELF	Study Date :	16-10-2024

X-RAY CHEST PA VIEW

Bilateral lung fields appear normal.
Bilateral costophrenic angles are unremarkable.
Bilateral hila and vascular markings are unremarkable.
Domes of diaphragm are normal in morphology and contour.
Cardiac size is within normal limits.
Bony thoracic cage appears normal.

IMPRESSION.

**No significant abnormality detected.
No evidence of fracture or dislocation.**

'Recommended clinical correlation with other investigation.'

Dr. Manish Kumar Jha
MBBS, MD (Radio-diagnosis)
Registration No. 77237 (WBMC)