

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs SUCHANDRIMA SENGUPTA MRN : 1762000026251 Gender/Age : FEMALE , 35y (07/12/1987)

Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 29/03/2023 11:05 AM

Barcode : J12303290093 Specimen : Plasma Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	89	mg/dL	Both: Normal: 70-99 Both: Pre-diabetes: 100-125 Both: Diabetes: => 126 ADA standards 2019

--End of Report--



Dr. Ritu Priya
MBBS, MD, Biochemistry
Consultant

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



Narayana Superspeciality Hospital

(A Unit of Meridian Medical Research & Hospital Ltd.) CIN U85110W81995PLC071440
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Appointments
180-0309-0309 (Toll Free)

Emergencies
83348 30003

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Patient Name : Mrs SUCHANDRIMA SENGUPTA MRN : 1762000026251 Gender/Age : FEMALE , 35y (07/12/1987)

Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 29/03/2023 12:41 PM

Barcode : J12303290094 Specimen : Whole Blood Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.0	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	96.8	-	-

Interpretation:
1. HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.
2. HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.
3. Any sample with >15% should be suspected of having a haemoglobin variant.


--End of Report--



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Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 29/03/2023 12:45 PM

Barcode : J32303290003 Specimen : Serum Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

IMMONOLOGY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.53	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	10.0	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.323	µIU/mL	Pregnancy: 1st Trimester: 0.1298-3.120 2nd Trimester: 0.2749-2.652 3rd Trimester: 0.3127-2.947

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Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 30/03/2023 02:24 PM

Barcode : J42303290002 Specimen : Urine Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
Urine For Sugar	Absent	-	-

URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	50	ml	-
Colour	Pale Yellow	-	-
Appearance	Slight Hazy	-	-

CHEMICAL EXAMINATION

pH(Reaction)	6.5	-	4.8-7.5
Sp. Gravity	1.010	-	1.002-1.030
Protein	Absent	-	-
Urine Glucose	Absent	-	Negative
Ketone Bodies	Absent	-	-
Bile Salts	Absent	-	Negative
Bile Pigment (Bilirubin)	Absent	-	Negative
Urobilinogen	Normal	-	-
Urine Leucocyte Esterase	Absent	-	-
Blood Urine	Trace	-	Negative
Nitrite	Absent	-	Negative

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MICROSCOPIC EXAMINATION

Pus Cells	1-2	/hpf	0 - 2
RBC	1-2	/hpf	-
Epithelial Cells	6-8	/hpf	-
Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Scanty	-	-
Yeast Cells	Not Found	-	-

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Dr. Smita Priyam
MBBS, MD, Pathology
REGISTRAR

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Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 29/03/2023 11:06 AM

Barcode : J12303290092 Specimen : Serum Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.79	mg/dL	0.52-1.04
eGFR (Calculated By MDRD Formula)	82.9	mL/min/1.73m ²	Indicative for renal impairment: <60 Note: eGFR is inaccurate for Hemodynamically unstable patients . eGFR is not applicable for less than 18 years of age .
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	7.94	mg/dL	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	138	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.9	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	181	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides	85	mg/dL	Both: Normal: < 150 Both: Borderline: 150-199 Both: High: 200-499 Both: Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	67 H	mg/dL	40.0-60.0
Non-HDL Cholesterol	114.0	-	-
LDL Cholesterol (Colorimetric)	82.60	mg/dL	Both: Optimal: < 100 Both: Near to above optimal: 100-129 Both: Borderline High: 130-159 Both: High: 160-189 Both: Very High: > 190

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VLDL Cholesterol (Calculated) 17 mg/dL 0.0-40.0

Cholesterol /HDL Ratio 2.8 - -

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method) 0.5 mg/dL 0.2-1.3

Conjugated Bilirubin (Direct) (Calculated) 0.1 mg/dL 0.0-0.4

Unconjugated Bilirubin (Indirect) (Calculated) 0.4 - -

Total Protein (Colorimetric - Biuret Method) 7.8 g/dL 6.3-8.2

Serum Albumin (Colorimetric - Bromo-Cresol Green) 4.3 gm/dL 3.5-5.0

Serum Globulin (Calculated) 3.5 g/dL 2.0-3.5

Albumin To Globulin (A/G)Ratio (Calculated) 1.23 - 1.0-2.1

SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate)) 26 U/L 14.0-36.0

SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate)) **35 H** U/L <35.0

Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer) 68 U/L 38.0-126.0

Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method)) **10 L** U/L 12.0-43.0

--End of Report--



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Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 29/03/2023 11:26 AM

Barcode : J22303290077 Specimen : Whole Blood - ESR Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	37 H	mm/1hr	0.0-12.0

--End of Report--



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REGISTRAR

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Final Report

Patient Name : Mrs SUCHANDRIMA SENGUPTA MRN : 1762000026251 Gender/Age : FEMALE , 35y (07/12/1987)

Collected On : 29/03/2023 01:41 PM Received On : 29/03/2023 01:48 PM Reported On : 29/03/2023 02:44 PM

Barcode : J12303290160 Specimen : Plasma Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	105	mg/dL	Both: Normal: 70-139 Both: Pre-diabetes: 140-199 Both: Diabetes: => 200 ADA standards 2019

Interpretations:
(ADA Standards Jan 2017)
FBS can be less than PPBS in certain conditions like post prandial reactive hypoglycaemia, exaggerated response to insulin, subclinical hypothyroidism, very lean/anxious individuals. In non-diabetic individuals, such patients can be followed up with GTT.

--End of Report-



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Patient Name : Mrs SUCHANDRIMA SENGUPTA MRN : 1762000026251 Gender/Age : FEMALE , 35y (07/12/1987)

Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 29/03/2023 10:12 AM

Barcode : J22303290078 Specimen : Whole Blood Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (sodium Lauryl Sulphate (SLS) Method)	12.6	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.98 H	millions/ µL	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.6	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	79.4 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	25.3 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.9	%	31.5-34.5
Red Cell Distribution Width (RDW)	14.3 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	190	Thous/Cumm	150.0-400.0
Mean Platelet Volume (MPV)	12.3 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	6.4	-	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils	67.2	%	40.0-75.0
Lymphocytes (Fluorescent Flow Cytometry)	23.2	%	20.0-40.0
Monocytes (Fluorescent Flow Cytometry)	6.5	%	2.0-10.0
Eosinophils (Fluorescent Flow Cytometry)	2.8	%	1.0-6.0

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Basophils (Fluorescent Flow Cytometry)	0.3	%	0.0-2.0
NRBC	0.2	-	-
Absolute Neutrophil Count	4.3	-	-
Absolute Lymphocyte Count	1.5	-	-
Absolute Monocyte Count	0.4	-	-
Absolute Eosinophil Count	0.18	-	-
Absolute Basophil Count	0.02	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

--End of Report--



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REGISTRAR

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Collected On : 29/03/2023 09:29 AM Received On : 29/03/2023 09:30 AM Reported On : 30/03/2023 01:40 PM

Barcode : L12303290003 Specimen : Whole Blood Consultant : self(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017505485

NARAYANA SUPERSPECIALITY HOSPITAL BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	B	-
RH Typing	Positive	-

--End of Report--



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ID: 1720388100001
Name: SIVANESHAN, S.MARJA
Age: 25 Year's
Gender: Female

Heart Rate: 71 bpm
PR Interval: 142 ms
QRS Duration: 84 ms
QTc Interval: 392/411 ms
PQST Axes: 63/70/50 deg

Other findings:

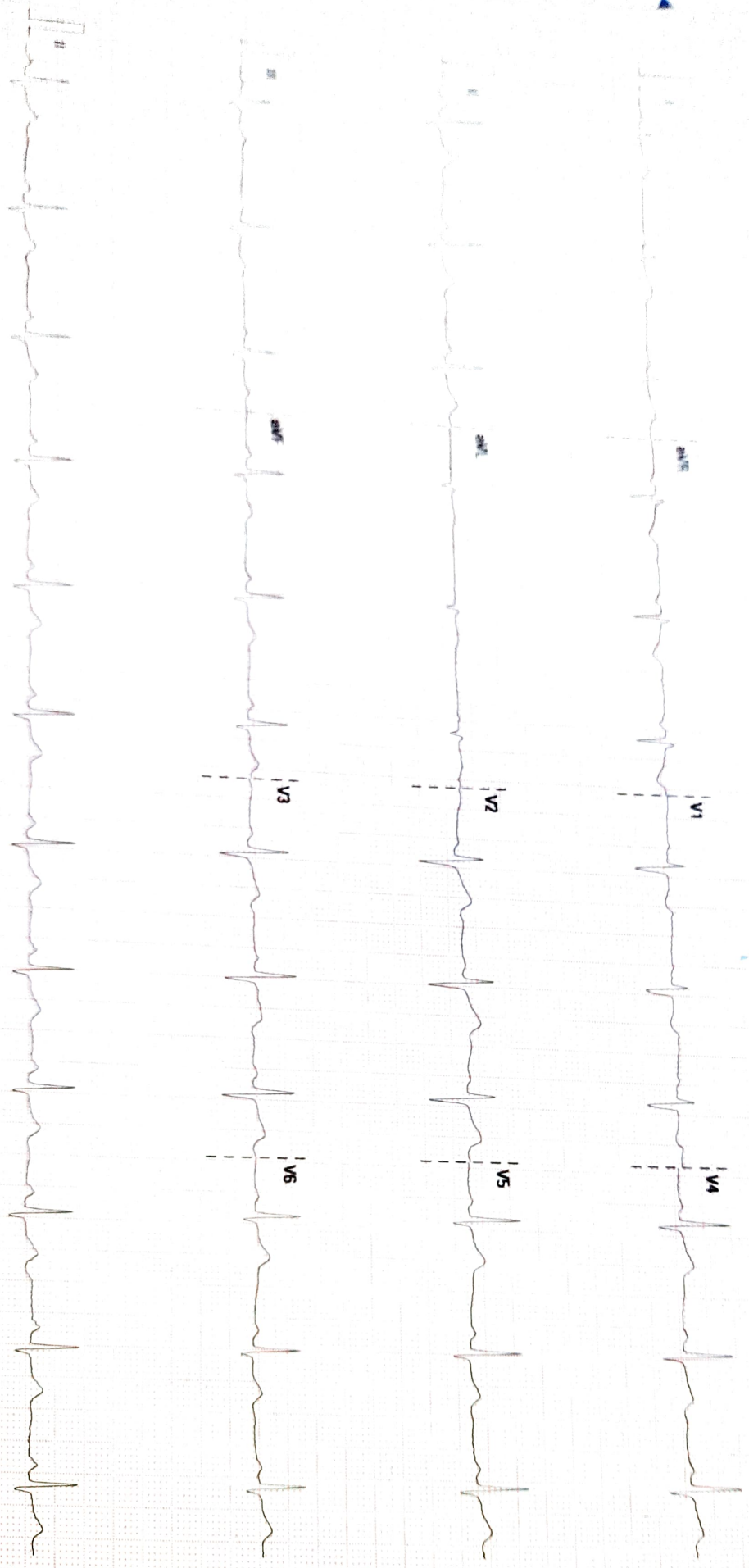
71 bpm
142 ms
84 ms
392/411 ms
63/70/50 deg

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis

PLEASE CORRELATE CLINICALLY

Please Keep A Photocopy



Patient details:
Name: MRS. SUCHANDRIMA SENGUPTA
Age: 35 YEARS
Examination Date: 29.03.2023
Consultant Name: DR. SELF

MRN: 17620000026251
Gender: FEMALE
Processed Date: 29.03.2023
Patient Location: OPD

ECHOCARDIOGRAPHY REPORT

MEASUREMENT:

AO: 27 (20-40) mm	LVID(d): 42 (36-52) mm	IVS(d): 09 (6-11) mm
LA: 33 (19-40) mm	LVID(s): 38 (23-39) mm	PWd: 09 (6-11) mm
RVOT: 26 mm		LVEF ~ 64 %

VALVES:

Mitral Valve : Normal
Aortic Valve : Normal
Tricuspid Valve : Normal
Pulmonary Valve : Normal

CHAMBERS (Dimension)

Left Atrium : Normal
Right Atrium : Normal
Left Ventricle : Normal
Right Ventricle : Normal

SEPTAL

IVS : Intact
IAS : Intact

GREAT ARTERIES:

Aorta : Normal

Pulmonary Artery : Normal



DOPPLER DATA:

	Velocity(in m/s)	Peak PG(mmHg)	Mean PG(mmHg)	Regurgitation
Mitral	E - 0.8 , A - 0.4			0/4
Aortic	1.2	5.8		0/4
Tricuspid	2.3	21		Trivial
Pulmonary	0.9	3.4		0/4

LVOT : No significant gradient noted.

Vegetation/Thrombus : Nil

Pericardium : Normal

Other Findings : E/E':07

Final Diagnosis:


Normal size cardiac chambers.
No significant regional wall motion abnormality of LV at rest.
Normal LV systolic function. LV EF~ 64%

Clinical correlation please.

NOTE: Echo of Patient: MRS.SUCHANDRIMA SENGUPTA

MRN: 17620000026251

has been done on 29.03.2023 and reported on 29.03.2023



Dr. Masud Syed mehedi
Associate consultant

TECHNICIAN
ASIS

TB: K. DEB

Patient Name	SUCHANDRIMA SENGUPTA	Requested By	SELF (Health check-up)
MRN	17620000026251	Procedure DateTime	2023-03-29 11:06:52
Age/Sex	35Y 3M / Female	Hospital	NH-NMH & NSH

USG WHOLE ABDOMEN (Screening)

OBSERVATIONS:

Liver: Normal in size (14.2 cm), shape and outline. Parenchymal echotexture normal. No focal cystic or solid mass lesion. No intrahepatic biliary dilatation. Intrahepatic portion of IVC is normal. Porta hepatis is normal.

Gallbladder: Wall thickness is normal. Luminal echoes are normal. No calculi. No pericholecystic fluid seen.

Portal Vein: It appears normal.

CBD: Not dilated.

Pancreas: Parenchymal echotexture normal. MPD appears normal. No focal lesion.

Spleen: Normal in size (8.3 cm) with normal echotexture. No focal or diffuse lesion.

Kidneys:

Right kidney measures 10.5 x 4.1 cm

Left kidney measures 9.4 x 4.9 cm

Bilateral kidneys are normal in size, shape and outline. Parenchymal texture normal. Corticomedullary differentiation is well made out and is normal. Sinus echoes are normal. No hydronephrosis / calculus seen in both kidneys.

Urinary Bladder: Wall thickness normal. Luminal echoes normal. No calculi.

Uterus: Measures: 4.4 x 8.8 x 3.0 cm. Anteverted, normal in shape & size. Endometrial & myometrial echoes are normal. Endometrium measures 4 mm in thickness. Cervix appears normal.

Both Ovaries:

Right ovary: 2.4 x 1.4 cm

Left ovary: 3.2 x 1.4 cm

Both ovaries are normal in size, shape and echo pattern.

- No free fluid in POD.

IMPRESSION:

Present study suggests:

- No obvious abnormality seen.

Not for medico legal purpose. Like all diagnostic modalities, USG also has its limitations. Therefore USG report should be interpreted in correlation with clinical and pathological findings. All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.



Dr Surg Lt Cdr Subhankar Datta
MBBS, CBET-USG
REG NO-82415(WBMC)
CONSULTANT SONOLOGIST

This is a digitally signed valid document. Reported Date/Time: 2023-03-29 14:38:17