

## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 10:02 AM Reported On : 25/01/2023 11:00 AM

Barcode : 802301240409 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

## CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>LIVER FUNCTION TEST(LFT)</b>			
Bilirubin Total (Colorimetric -Diazo Method)	0.40	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.09	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.31	-	-
Total Protein (Biuret Method)	7.50	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.60	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.9	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.59	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	37	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	<b>53 H</b>	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	107	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	20	U/L	15.0-73.0



Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

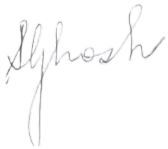
### CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.91	mg/dL	0.66-1.25
eGFR	89.4	mL/min/1.73m <sup>2</sup>	-
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric - Urease)	9.27	-	9.0-20.0
<b>Serum Sodium</b> (Direct ISE - Potentiometric)	141	mmol/L	137.0-145.0
<b>Serum Potassium</b> (Direct ISE - Potentiometric)	5.0	mmol/L	3.5-5.1
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	194	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric )	87	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	45	mg/dL	40.0-60.0
Non-HDL Cholesterol	149.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	<b>136.3 H</b>	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190

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VLDL Cholesterol (Calculated)	17.4	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	4.4	-	-
<b>Prostate Specific Antigen (PSA) (CLIA)</b>	1.24	ng/mL	0.0-2.5

--End of Report--



Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D



Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.  
(Lipid Profile, -> Auto Authorized)  
(Serum Sodium, -> Auto Authorized)  
(Blood Urea Nitrogen (Bun), -> Auto Authorized)  
(Serum Potassium, -> Auto Authorized)  
(CR, -> Auto Authorized)  
(Prostate Specific Antigen (Psa) -> Auto Authorized)



MC - 2803



DEPARTMENT OF LABORATORY MEDICINE

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Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>THYROID PROFILE (T3, T4, TSH)</b>			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.24	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	7.84	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	3.707	µIU/mL	0.465-4.68

--End of Report--

Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

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- ( -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 10:02 AM Reported On : 24/01/2023 12:36 PM

Barcode : 812301240246 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Modified Westergren Method)	06	mm/1hr	0.0-10.0

--End of Report--

Dr. Shanaz Latif  
MD, Pathology  
Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

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DEPARTMENT OF LABORATORY MEDICINE

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Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 10:12 AM Reported On : 24/01/2023 10:57 AM

Barcode : BR2301240028 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

IMMUNOHAEMATOLOGY

Test	Result	Unit
<b>BLOOD GROUP &amp; RH TYPING</b>		
Blood Group (Column Agglutination Technology)	O	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report--

Dr. Amal Kumar Saha  
MBBS, D.PED, ECFMG  
Blood Bank Officer

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## DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 10:01 AM Reported On : 24/01/2023 11:06 AM

Barcode : 812301240247 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

## HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Photometric Measurement)	14.6	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.92	millions/ $\mu$ L	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	43.5	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	88.4	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.7	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.6	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	13.2	%	11.6-14.0
Platelet Count (Electrical Impedance)	192	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	9.5	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	6.2	$10^3/\mu$ L	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (VCSn Technology)	50.3	%	40.0-75.0
Lymphocytes (VCSn Technology)	38.5	%	20.0-40.0
Monocytes (VCSn Technology)	9.1	%	2.0-10.0
Eosinophils (VCSn Technology)	1.6	%	1.0-6.0

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Basophils (VCSn Technology)	0.5	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	3.12	$10^3/\mu\text{L}$	1.8-7.8
Absolute Lymphocyte Count (Calculated)	2.39	$10^3/\mu\text{L}$	1.0-4.8
Absolute Monocyte Count (Calculated)	0.57	$10^3/\mu\text{L}$	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.1	$10^3/\mu\text{L}$	0.0-0.45
Absolute Basophil Count (Calculated)	0.04	$10^3/\mu\text{L}$	0.0-0.2

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

--End of Report--



Dr. Moumita Panja  
DNB, Pathology  
Consultant Pathologist

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Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 10:02 AM Reported On : 24/01/2023 12:47 PM

Barcode : 802301240411 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Glucose Oxidase, Peroxidase)	<b>106 H</b>	mg/dL	Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019

--End of Report--

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

Note

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(Fasting Blood Sugar (FBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 01:20 PM Received On : 24/01/2023 01:34 PM Reported On : 24/01/2023 02:43 PM

Barcode : 802301240766 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Glucose Oxidase, Peroxidase)	117	mg/dL	Normal: 70-139 Pre-diabetes: 140-199 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--

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

Dr. Debasree Biswas  
MD, Biochemistry  
Clinical Biochemist MBBS, MD

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(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 10:01 AM Reported On : 24/01/2023 01:14 PM

Barcode : 802301240412 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC)	5.4	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	108.28	-	-

**Interpretation:**

- 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.
- 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.
- Any sample with >15% should be suspected of having a haemoglobin variant.

--End of Report-

Dr. Sujata Ghosh  
PhD, Biochemistry  
Biochemist M.Sc , Ph. D

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**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 11:16 AM Reported On : 24/01/2023 12:45 PM

Barcode : 822301240036 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
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**URINE ROUTINE & MICROSCOPY****PHYSICAL EXAMINATION**

Volume	30	ml	-
Colour	Colorless	-	-
Appearance	Clear	-	-

**CHEMICAL EXAMINATION**

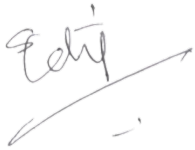
pH(Reaction) (Mixed PH Indicator)	6.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance )	1.003	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Negative	-	Negative
Ketone Bodies (Legal's Method)	Negative	-	Negative
Bile Salts (Dual Wavelength Reflectance/Manual)	Negative	-	Negative
Bile Pigment (Bilirubin) (Coupling Of Bilirubin With Diazonium Salt)	Negative	-	Negative
Urobilinogen (Coupling Reaction Of Urobilinogen With A Stable Diazonium Salt In Buffer)	Normal	-	Normal
Urine Leucocyte Esterase (Enzymatic, Indoxyl Ester And Diazonium Salt)	Negative	-	Negative
Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen)	Negative	-	Negative
Nitrite (Modified Griess Reaction)	Negative	-	Negative

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

### MICROSCOPIC EXAMINATION

Pus Cells	0-2	/hpf	1-2
RBC	NIL	/hpf	0 - 3
Epithelial Cells	2-4	/hpf	2-3
Crystals	NIL	-	-
Casts	NIL	-	-

--End of Report--



Dr. Shanaz Latif  
MD, Pathology  
Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

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**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Pronab Ganguly MRN : 17510001157458 Gender/Age : MALE , 47y (02/01/1976)

Collected On : 24/01/2023 09:43 AM Received On : 24/01/2023 11:16 AM Reported On : 25/01/2023 07:46 PM

Barcode : 802301240410 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9088287979

**CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
Urine For Sugar	NEGATIVE	mg	ATEST

--End of Report-

Dr. Rakhi Mandal  
MD, Pathology  
Consultant Pathology MBBS, MD

**Note**

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- Kindly correlate clinically.



MC - 2803



## ADULT TRANS-THORACIC ECHO REPORT

**PATIENT NAME** : Mr Pronab Ganguly  
**GENDER/AGE** : Male, 47 Years  
**LOCATION** : -

**PATIENT MRN** : 17510001157458  
**PROCEDURE DATE** : 24/01/2023 12:38 PM  
**REQUESTED BY** : EXTERNAL



### IMPRESSION

- GOOD LV SYSTOLIC FUNCTION WITH NORMAL DIASTOLIC FLOW PATTERN.

### FINDINGS

#### CHAMBERS

LEFT ATRIUM : NORMAL SIZED  
RIGHT ATRIUM : NORMAL SIZED  
LEFT VENTRICLE : NORMAL SIZED CAVITY. PARADOXICAL MOVEMENT OF IVS. NO OTHER WALL MOTION ABNORMALITY. GOOD SYSTOLIC FUNCTION WITH EJECTION FRACTION: 64%. NORMAL DIASTOLIC FLOW PATTERN.  
RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION

#### VALVES

MITRAL : NORMAL.  
AORTIC : NORMAL.  
TRICUSPID : NORMAL.  
PULMONARY : NORMAL.

#### SEPTAE

IAS : INTACT  
IVS : INTACT

#### ARTERIES AND VEINS

AORTA : NORMAL, LEFT AORTIC ARCH  
PA : NORMAL SIZE  
IVC : NORMAL SIZE & COLLAPSIBILITY  
SVC & CS : NORMAL  
PULMONARY VEINS : NORMAL

**PERICARDIUM** : NORMAL PERICARDIAL THICKNESS. NO EFFUSION

**INTRACARDIAC MASS** : NO TUMOUR, THROMBUS OR VEGETATION SEEN

**OTHERS** : NIL.

MR PRONAB GANGULY (17510001157458)

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DR. SANGEETA DAS  
CONSULTANT GENERAL MEDICINE MBBS

SANTASHI GHOSH  
SENIOR TECHNICIAN

24/01/2023 12:38 PM

<b>PREPARED BY</b>	: NITA PAUL(308573)	<b>PREPARED ON</b>	: 24/01/2023 01:05 PM
<b>GENERATED BY</b>	: MADHUPARNA DASGUPTA(333433)	<b>GENERATED ON</b>	: 03/02/2023 02:19 PM



<b>Patient Name</b>	Pronab Ganguly	<b>Requested By</b>	EXTERNAL
<b>MRN</b>	17510001157458	<b>Procedure DateTime</b>	2023-01-24 11:36:44
<b>Age/Sex</b>	47Y/Male	<b>Hospital</b>	NH-RTIICS

### **USG OF WHOLE ABDOMEN (SCREENING)**

#### **LIVER:**

It is normal in size and mild increased in echogenicity. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

#### **PORTAL VEIN:**

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus. No collaterals are seen.

#### **GALL BLADDER:**

It is optimally distended. No calculus or sludge is seen within it. The wall is not thickened.

#### **CBD:**

The common duct is not dilated at porta. No intraluminal calculus is seen.

#### **SPLEEN:**

It is normal in size measuring 10.9 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

#### **PANCREAS:**

It is normal in size and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

#### **KIDNEYS:**

Both kidneys are normal in size, position and echogenicity. The corticomedullary differentiation is maintained. No hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 11.3 cm and 10.0 cm respectively.

#### **URINARY BLADDER:**

It is normal in capacity. The wall is not thickened. No intraluminal calculus or mass is seen.

Post void residual urine is insignificant.

**PROSTATE:**

It is mildly enlarged in size measuring 3.6 x 3.8 x 3.5 cm (Weight = 26 gms). It shows a homogenous echotexture and smooth outline.

**IMPRESSION:**

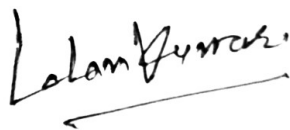
- Grade I fatty changes in liver.
- Mild prostatomegaly.

NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. 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.

Assist By :Manju

A handwritten signature in black ink that reads "Lalan Kumar". The signature is written in a cursive style and is underlined with a single horizontal line.

Dr. Lalan Kumar

Consultant Sonologist  
MBBS CBET (USG)

\* **This is a digitally signed valid document.** Reported Date/Time: 2023-01-24 11:44:18

<b>Patient Name</b>	Pronab Ganguly	<b>Requested By</b>	EXTERNAL
<b>MRN</b>	17510001157458	<b>Procedure DateTime</b>	2023-01-24 10:44:51
<b>Age/Sex</b>	47Y/Male	<b>Hospital</b>	NH-RTIICS

**CHEST RADIOGRAPH (PA VIEW)**

**FINDINGS :**

- Trachea is normal and is central.
- The cardiac shadow is normal in contour.
- Mediastinum and great vessels are within normal limits.
- The hilar shadows are within normal limits.
- The costo-phrenic angles are clear.
- No significant lung parenchymal lesion is seen.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

**IMPRESSION:**

- **No significant radiological abnormality detected.**

**NOT FOR MEDICO LEGAL PURPOSES**

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, X-RAY also has its limitations. Therefore X-RAY 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. Sarbari Chatterjee

Consultant Radiologist

\* **This is a digitally signed valid document.** Reported Date/Time: 2023-01-24 12:59:51