Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:45 AM Reported On: 11/03/2023 12:59 PM

Barcode: 802303110534 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 8961216028

#### **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.0	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 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-

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

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





Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:47 AM Reported On: 11/03/2023 01:55 PM

Barcode: 802303110531 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8961216028

## **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.53	mg/dL	0.52-1.04
eGFR	136.4	mL/min/1.73m <sup>2</sup>	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	7.56	-	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	139	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.5	mmol/L	3.5-5.1
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric - Diazo Method)	0.38	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.32	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.06	-	-
Total Protein (Biuret Method)	7.60	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.70	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.9	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.63	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	23	U/L	14.0-36.0
<b>SGPT (ALT)</b> (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	40 H	U/L	<35.0

Patient Name: Ms Sria Goswami MRN: 1751000116	8873 Ger	nder/Age : <b>FEMALE</b> , 2	29y (22/06/1993)
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	80	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	35	U/L	12.0-43.0

Dr. Sujata Ghosh PhD, Biochemistry

Shoop

Biochemist M.Sc , Ph. D

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

## **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	176	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric )	100	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	62 H	mg/dL	40.0-60.0
Non-HDL Cholesterol	114	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	80.2	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	20	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	2.8	-	-

--End of Report-

Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

## Note

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

(LFT, -> Auto Authorized)

(Blood Urea Nitrogen (Bun), -> Auto Authorized)

(Serum Sodium, -> Auto Authorized)

(Serum Potassium, -> Auto Authorized)

(CR -> Auto Authorized)





Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:47 AM Reported On: 11/03/2023 03:02 PM

Barcode: 802303110531 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8961216028

# **CLINICAL CHEMISTRY**

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri lodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.17	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	7.86	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	4.754 H	uIU/mI	Non Pregnant: 0.4001-4.049 1st Trimester: 0.1298-3.10 2nd Trimester: 0.2749-2.652 3rd Trimester: 0.3127-2.947

-- End of Report-

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

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



Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 03:07 PM Received On: 11/03/2023 03:24 PM Reported On: 11/03/2023 04:31 PM

Barcode: 802303110794 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 8961216028

#### **CLINICAL CHEMISTRY**

Test Result Unit Biological Reference Interval

Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)

Post Prandial Blood Sugar (PPBS) (Glucose Oxidase)

Mormal: 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

### Note

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

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





Final Report

### **DEPARTMENT OF LABORATORY MEDICINE**

Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:52 AM Reported On: 11/03/2023 12:42 PM

Barcode: BR2303110053 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 8961216028

## **IMMUNOHAEMATOLOGY**

Test Result Unit

**BLOOD GROUP & RH TYPING** 

Blood Group (Column Agglutination Technology) B

RH Typing (Column Agglutination Technology) Positive

-- End of Report-

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

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





Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:46 AM Reported On: 11/03/2023 01:20 PM

Barcode: 812303110333 Specimen: Whole Blood - ESR Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 8961216028

### **HAEMATOLOGY LAB**

Test Result Unit Biological Reference Interval

Erythrocyte Sedimentation Rate (ESR) 25 H mm/1hr 0.0-12.0

(Modified Westergren Method)

-- End of Report-

Dr. Shanaz Latif MD, Pathology

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

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





Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:47 AM Reported On: 11/03/2023 01:39 PM

Barcode: 802303110533 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 8961216028

### **CLINICAL CHEMISTRY**

Test Result Unit **Biological Reference Interval** Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019 87 mg/dL Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)

-- End of Report-

Dr. Sujata Ghosh PhD, Biochemistry

Biochemist M.Sc, Ph. D

Dr. Debasree Biswas MD, Biochemistry

Clinical Biochemist MBBS, MD

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically. (Fasting Blood Sugar (FBS) -> Auto Authorized)





Patient Name: Ms Sria Goswami MRN: 17510001168873 Gender/Age: FEMALE, 29y (22/06/1993)

Collected On: 11/03/2023 11:22 AM Received On: 11/03/2023 11:45 AM Reported On: 11/03/2023 12:17 PM

Barcode: 812303110334 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 8961216028

## **HAEMATOLOGY LAB**

	TITALITATIOEO		
Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	12.7	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.57	millions/ μL	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.3	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	85.9	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.7	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.2	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	14.9 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	200	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	11.4	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	4.6	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	50.0	%	40.0-75.0
Lymphocytes (VCSn Technology)	39.9	%	20.0-40.0
Monocytes (VCSn Technology)	6.7	%	2.0-10.0
Eosinophils (VCSn Technology)	3.1	%	1.0-6.0

Patient Name: Ms Sria Goswami MRN: 17510001	168873 Gender/	Age : <b>FEMALE</b> , <b>29y (22/</b> 0	06/1993)
Basophils (VCSn Technology)	0.3	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	2.3	$10^3/\mu$ L	1.8-7.8
Absolute Lympocyte Count (Calculated)	1.84	$10^3/\mu$ L	1.0-4.8
Absolute Monocyte Count (Calculated)	0.31	$10^3/\mu$ L	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.15	$10^3/\mu$ L	0.0-0.45
Absolute Basophil Count (Calculated)	0.02	$10^3/\mu$ 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-

Manja

Dr. Moumita Panja DNB, Pathology Consultant Pathologist

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





## ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME: Ms Sria GoswamiPATIENT MRN: 17510001168873GENDER/AGE: Female, 29 YearsPROCEDURE DATE: 11/03/2023 02:50 PM

LOCATION :- REQUESTED BY : EXTERNAL

• NO SIGNIFICANT ECHOCARDIOGRAPHIC ABNORMALITY DETECTED.

**FINDINGS** 

**CHAMBERS** 

LEFT ATRIUM : NORMAL SIZED RIGHT ATRIUM : NORMAL SIZED

LEFT VENTRICLE : NORMAL SIZED CAVITY. NO REGIONAL WALL MOTION ABNORMALITY. GOOD LV

SYSTOLIC FUNCTION WITH EJECTION FRACTION: 66%. NORMAL DIASTOLIC FLOW

PATTERN.

RIGHT VENTRICLE : NORMAL.

**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.

Arnal Paul

DR. ARNAB PAUL
ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS,PGDCC

RUPA ANTONY TECHNICIAN

11/03/2023 02:50 PM

 PREPARED BY
 : SHAWLI MITRA(307739)
 PREPARED ON
 : 11/03/2023 04:47 PM

 GENERATED BY
 : MADHUPARNA DASGUPTA(333433)
 GENERATED ON
 : 21/03/2023 01:14 PM

Patient Name	Sria Goswami	Requested By	EXTERNAL
MRN	17510001168873	Procedure DateTime	2023-03-11 12:35:42
Age/Sex	29Y 8M/Female	Hospital	NH-RTIICS

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

## LIVER:

Normal in size and echogenicity. No focal SOL is seen. Intrahepatic biliary radicles are not dilated.

### **PORTAL VEIN:**

Portal vein is normal in calibre at porta. There is no intraluminal thrombus.

## **GALL BLADDER:**

Optimally distended. No calculus or sludge is seen within it. Wall is not thickened.

## CBD:

Common duct is not dilated at porta. No intraluminal calculus is seen.

### SPLEEN:

Normal in size measuring 9.0 cm and echogenicity. No focal SOL is seen.

## **PANCREAS:**

Normal in size and echogenicity. Duct is not dilated. No calcification or focal SOL is seen.

### **KIDNEYS:**

Both kidneys are normal in size, position and echogenicity. Corticomedullary differentiation is maintained. No Page 1 of 3

hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 11.0 cm and 10.6 cm respectively.

## **URINARY BLADDER:**

Normal in capacity. Wall is not thickened. No intraluminal calculus or mass is seen.

Post void residual urine is insignificant.

### **UTERUS:**

Normal in size measuring  $7.4 \times 4.1 \times 5.6$  cm with normal echopattern. No focal SOL is seen. Endometrial echoline is central in position, not thickened (0.3 cm). Cervix appears normal.

## **OVARIES:**

Both ovaries are normal in size, shape and echotexture.

Right and left ovaries measures 2.5 x 2.3 cm and 2.1 x 1.6 cm respectively.

### POD:

No free fluid seen in POD.

### ADNEXAE:

Both adnexae clear.

## IMPRESSION:

• No significant abnormality detected.

## **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.

Page 2 of 3

All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.

Assist By:Sumitra

Dr. Suranjana Bhattacharjee

Consultant Sonologist

Patient Name	Sria Goswami	Requested By	EXTERNAL
MRN	17510001168873	Procedure DateTime	2023-03-11 12:57:02
Age/Sex	29Y 8M/Female	Hospital	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.
- The lung fields and bronchovascular markings appear normal.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

# **IMPRESSION**:

• No significant radiological abnormality detected.

REPORTED BY DR. DIPTI D VAGHELA

## **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.

Gobinda Framanick

Dr. Gobinda Pramanick

MD(AIIMS, NEW DELHI), DM(PGI, CHANDIGARH)
CONSULTANT INTERVENTIONAL NEURORADIOLOGIST

Registration No: 61660(WBMC)

\* This is a digitally signed valid document. Reported Date/Time: 2023-03-11 16:02:16