Patient Name	Manasi Halder	Requested By	Dr. Swarup Paul
MRN	17600000239732	Procedure DateTime	2023-05-27 13:35:07
Age/Sex	48Y/Female	Hospital	NH-BARASAT

# **ULTRASONOGRAPHY OF WHOLE ABDOMEN**

**LIVER**: It is normal in size (13.3 cm), shape and outline. It shows normal homogeneous echotexture. No focal SOL seen. IHBRs are not dilated.

**CBD**: It is not dilated, measuring – 3.1 mm at porta, visualized proximal lumen is clear. Distal CBD is obscured by bowel gas shadow.

**PV**: It appears normal, measuring - 8.4 mm at porta.

<u>GALL BLADDER</u>: It is optimally distended. No evidence of intraluminal calculus or sludge is seen. Gall bladder wall is normal in thickness.

No pericholecystic collection or frank mass formation is seen.

**SPLEEN:** It is normal in size (9.1 cm), shape, outline & echotexture. No focal lesion seen.

<u>PANCREAS</u>: It is normal in size and echotexture. No focal lesion is seen. No calcification is seen. Main pancreatic duct is not dilated.

**ADRENAL GLANDS**: They are not enlarged.

**KIDNEYS:** Both kidneys are normal in size, shape, position and axis.

Cortical echo is normal. Cortico-medullary differentiation is maintained.

No calculus or hydronephrosis is seen.

Perirenal fascial planes are intact.

Measures: Right kidney - 8.6 cm. Left kidney - 9.4 cm.

**<u>URETERS</u>**: They are not visualized as they are not dilated.

Aorta - Normal.

IVC - Normal

**URINARY BLADDER:** It is well distended. Wall is normal. No intraluminal pathology seen.

<u>UTERUS</u>: It is normal in size ( 6.6 cm x 4.1 cm x 4.6 cm), anteverted. Myometrial echopattern is within norma limits. No focal SOL is seen.

Endometrial echoes are central (5.4 mm) and shows normal echogenecity. Endomyometrial junction appears normal.

The cervix appears normal. Internal os is closed at present.

**OVARIES**: Both ovaries are normal in shape, size, position & echotexture. Measures: Right Ovary – 1.7 cm x 1.3 cm, Left Ovary – 2.0 cm x 1.7 cm.

No adnexal lesion is seen.

RIF/ LIF: Appendix is not visualized. No mass lesion or lymphadenopathy seen at RIF/ LIF.

No ascites seen.

No pleural effusion seen.

# **IMPRESSION:**

• Findings are within normal limits.

Advise : Clinical correlation & further relevant investigation suggested.

Dr. Sukanya Banerjee MD (Radiodiagnosis)

Sukanya Banerjec



Diabetes: => 200

## **DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 02:25 PM Received On: 27/05/2023 03:20 PM Reported On: 27/05/2023 04:31 PM

Barcode: F12305270136 Specimen: Plasma Consultant: Dr. Swarup Paul (CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

#### **BIOCHEMISTRY**

Test Result Unit **Biological Reference Interval** 

mg/dL Normal: ≤140 Post Prandial Blood Sugar (PPBS) (Glucose 147 H Pre-diabetes: 141-199

Oxidase, Hydrogen Peroxidase)

# 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-

# MBBS, MD Biochemistry CONSULTANT

Dr. Samarpita Mukherjee

#### Note

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





Page 1 of 1

# ADULT TRANS-THORACIC ECHO REPORT



PATIENT NAME : Ms Manasi Halder PATIENT MRN : 17600000239732

GENDER/AGE : Female, 48 Years PROCEDURE DATE : 27/05/2023 11:49 AM

LOCATION :- REQUESTED BY : Dr. Swarup Paul

MPRESSION
 NORMAL SIZED LEFT VENTRICULAR CAVITY

NO RWMA

GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 65 %

GRADE I DIASTOLIC DYSFUNCTION

NORMAL RIGHT VENTRICULAR SYSTOLIC FUNCTION

NO PULMONARY HYPERTENSION

**FINDINGS** 

**CHAMBERS** 

LEFT ATRIUM : NORMAL

AP DIAMETER(MM): 38

RIGHT ATRIUM : NORMAL

LEFT VENTRICLE : NORMAL SIZED LEFT VENTRICULAR CAVITY. NO RWMA. GOOD LEFT VENTRICULAR

SYSTOLIC FUNCTION WITH LVEF 65 %. GRADE I DIASTOLIC DYSFUNCTION.

LVIDD(MM) : 41 IVSD(MM) : 10 EDV(ML) : LVIDS(MM) : 23 LVPWD(MM) : 10 ESV(ML) : E/A RATIO : E/E'(AVERAGE) : LVEF(%) : 65

RIGHT VENTRICLE : NORMAL IN SIZE (17 MM). NORMAL RV SYSTOLIC FUNCTION, TAPSE 20 MM

**VALVES** 

MITRAL : MORPHOLOGICALLY NORMAL
AORTIC : MORPHOLOGICALLY NORMAL
TRICUSPID : MORPHOLOGICALLY NORMAL
PULMONARY : MORPHOLOGICALLY NORMAL

**SEPTAE** 

IAS : INTACT IVS : INTACT

**ARTERIES AND VEINS** 

AORTA : NORMAL

SINUS(MM): 23

PA : NORMAL , NO PULMONARY HYPERTENSION

IVC : IVC 12 MM WITH NORMAL RESPIRATORY VARIATION

PERICARDIUM : NORMAL

INTRACARDIAC MASS : NO INTRACARDIAC MASS OR THROMBUS SEEN IN TTE.

Page 1 of 2

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1800-309-0309 (Toll Free)

Emergencies



: DOPPLER DATA MITRAL : E: VELOCITY: 64 CM/SEC, A : VELOCITY : 77 CM/SEC AORTIC : **OTHERS** 

VMAX: 126 CM/SEC, PEAK PG: 6.3 MMHG TRICUSPID: VMAX: 55 CM/SEC, PEAK PG: 1.2

MMHG PULMONARY: VMAX: 62 CM/SEC, PEAK PG: 1.5 MMHG

DR. SANYAL SOUGATA ASSOCIATE CONSULTANT

27/05/2023 11:49 AM

: SURAJIT BISWAS(353011) : 27/05/2023 12:04 PM **PREPARED BY PREPARED ON** : 03/06/2023 01:19 PM : ANKANA GHOSH(357843) **GENERATED BY GENERATED ON** 

Appointments



Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732	Gender/Age : FEMALE ,	48y (	27/05	/1975)	)
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Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 11:34 AM Reported On: 27/05/2023 12:55 PM

Barcode: F22305270068 Specimen: Whole Blood Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

# **HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
BLOOD GROUP & RH TYPING			
Blood Group (Slide Technique And Tube Technique)	AB	-	-
RH Typing (Slide Technique And Tube Technique)	Positive	-	-
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Cyanide-free Hemoglobin Method)	12.2	g/dL	12.0-15.0
Red Blood Cell Count (Impedance Variation)	4.31	millions/ μL	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Impedance)	38.2	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Calculated)	89	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.3	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.9	g/dL	31.5-34.5
Red Cell Distribution Width (RDW) (Impedance)	16.4 H	%	11.6-14.0
Platelet Count (Impedence Variation/Microscopy)	155	Thousand / $\mu$ L	150.0-410.0
Total Leucocyte Count(WBC) (Impedance Variation)	6.0	x10 <sup>3</sup> cells/μl	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (Impedance Variation And Absorbency /Microscopy)	67.5	%	40.0-80.0
<b>Lymphocytes</b> (Impedance Variation And Absorbency /Microscopy)	27.4	%	20.0-40.0

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Emergencies



Patient Name: Ms Manasi Halder MRN: 17600000	239732	Gender/Age : FEMALE , 48y (2	27/05/1975)
Monocytes (Impedance Variation And Absorbency /Microscopy)	3.3	%	2.0-10.0
Eosinophils (Impedance Variation And Absorbency /Microscopy)	1.7	%	1.0-6.0
Basophils (Impedance Variation And Absorbency /Microscopy)	0.1 L	%	1.0-2.0
Absolute Neutrophil Count	4.05	-	2.0-7.0
Absolute Lympocyte Count	1.64	-	1.0-3.0
Absolute Monocyte Count	0.2	-	0.2-1.0
Absolute Eosinophil Count	0.1	-	0.02-0.5
Absolute Basophil Count	0.01 L	-	0.02-0.1

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. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

# Note

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- Kindly correlate clinically.





Page 2 of 2

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Appointments **1800-309-0309** (Toll Free)

Emergencies



Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 11:34 AM Reported On: 27/05/2023 12:58 PM

Barcode: F12305270089 Specimen: Plasma Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

#### **BIOCHEMISTRY**

TestResultUnitBiological Reference IntervalFasting Blood Sugar (FBS) (Glucose Oxidase,<br/>Hydrogen Peroxidase)99mg/dLNormal: 70-109<br/>Pre-diabetes: 110-125<br/>Diabetes: => 126

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

#### Note

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Patient Name	Manasi Halder	Requested By	Dr. Swarup Paul
MRN	17600000239732	Procedure DateTime	2023-05-27 13:35:12
Age/Sex	48Y/Female	Hospital	NH-BARASAT

# **ULTRASONOGRAPHY OF BOTH BREAST**

# **Right Breast:**

Right breast show hyperechogenicity of fibroglandular tissue with prominence of TDLU in premammary, mammary, retromammary zone.

Nipple, areola region of right breast normal.

Few normal morphology lymph node is noted, one such measure 5.7 mm in short axis.

Right axilla appear normal.

No enlarged lymph node seen.

# **Left Breast:**

Left breast show normal premammary, mammary, retromammary zone.

Nipple, areola region of left breast normal.

No abnormal terminal ductolobular unit seen on left side.

Left axilla appear normal.

No enlarged lymph node seen.

# **IMPRESSION:**

Fibroadenosis of right breast.

Right axillary lymph node.

Advise: Clinical correlation & relevant investigation suggested.

Dr. Sukanya Banerjee MD (Radiodiagnosis)

Sukanya Banerjec



Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 11:34 AM Reported On: 27/05/2023 08:54 PM

Barcode: F12305270090 Specimen: Whole Blood Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

#### **BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	4.6	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	85.32	-	-

## 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. Samarpita Mukherjee MBBS, MD Biochemistry CONSULTANT

# Note

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Emergencies



Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 04:43 PM Reported On: 27/05/2023 05:08 PM

Barcode: F32305270007 Specimen: Urine Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

## **CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume (Visible)	40	ml	-
Colour (Visible)	Pale Yellow	-	-
Appearance (Visible)	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Dual Wavelength Reflectance)	5.0	-	5.0-8.0
Sp. Gravity (Dual Wavelength Reflectance)	1.020	-	1.002-1.030
<b>Protein</b> (Dual Wavelength Reflectance/Acetic Acid Tes (Heat Test))	Absent	-	-
Urine Glucose (Dual Wavelength Reflectance /Benedict's Test)	Absent	-	-
Ketone Bodies (Dual Wavelength Reflectance /Manual)	Absent	-	Negative
Bile Salts (Dual Wavelength Reflectance/Hay's Test)	Absent	-	Negative
Bile Pigment (Bilirubin) (Dual Wavelength Reflectance/Fouchet's Test)	Absent	-	Negative
Urobilinogen (Dual Wavelength Reflectance /Ehrlich's Method)	Normal	-	-
Urine Leucocyte Esterase (Dual Wavelength Reflectance)	Absent	-	Negative
Blood Urine (Dual Wavelength Reflectance)	Absent	-	-

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# Narayana Multispeciality Hospital

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Appointments

1800-309-0309 (Toll Free)

Emergencies



Patient Name: Ms Manasi Halder MRN: 170	600000239732 Gende	r/Age : <b>FEMA</b> I	LE , 48y (27/05/1975)	
Nitrite (Dual Wavelength Reflectance)	Absent	-	-	
MICROSCOPIC EXAMINATION				
Pus Cells (Microscopy)	1-2/hpf	-	1 - 2	
RBC (Microscopy)	Not Seen	-	1-2/hpf	
Epithelial Cells (Microscopy)	4-6/hpf	-	2-3	
Crystals (Microscopy)	Not Seen	-	-	
Casts (Microscopy)	Absent	-	-	
Others (Microscopy)	Nil	-	-	

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

# Note

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





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Emergencies **9836-75-0808** 

1800-309-0309 (Toll Free)

Appointments



**Final Report** 

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 04:43 PM Reported On: 27/05/2023 05:08 PM

Barcode: F32305270007 Specimen: Urine Consultant: Dr. Swarup Paul (CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

**CLINICAL PATHOLOGY** 

Result Unit

Urine For Sugar Absent

--End of Report-

Dr. Ruby Sarkar

MBBS, MD Pathology Consultant

#### Note

Test

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



# 1868

Patient Name	Manasi Halder	Requested By	Dr. Swarup Paul
MRN	17600000239732	Procedure DateTime	2023-05-27 14:31:29
Age/Sex	48Y/Female	Hospital	NH-BARASAT

# X-RAY - CHEST (PA)

Non-specific pneumonitis seen at both parahilar and right paracardiac regions.

Trachea is in situ.

CP angles are clear.

Cardiac shadow is normal.

# Suggested clinical correlation and further investigations

Dr. Subrata Sanyal

(Department of Radiology)



Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 11:34 AM Reported On: 27/05/2023 01:21 PM

Barcode: F12305270088 Specimen: Serum Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

# **BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Enzymatic Method)	0.6	mg/dL	0.52-1.04
eGFR	106.7	mL/min/1.73m <sup>2</sup>	-
Serum Sodium (ISE Direct )	144	mmol/L	137.0-145.0
Serum Potassium (ISE Direct )	4.3	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase)	183	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic End Point)	148	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl2)	40	mg/dL	Low: <40.0 mg/dL High: >60.0 mg/dL
Non-HDL Cholesterol	143.0	-	-
LDL Cholesterol (End Point)	112.26 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	30	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	4.6	-	-
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Dyphylline, Diazonium Salt)	0.7	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Direct Measure)	0.2	mg/dL	0.0-0.3

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Appointments

1800-309-0309 (Toll Free)

Emergencies



Patient Name: Ms Manasi Halder MRN: 17600000	239732 Gender,	/Age : FEMALE , 48y (27/	05/1975)
Unconjugated Bilirubin (Indirect) (Direct Measure)	0.5	mg/dL	0.3-1.3
Total Protein (Biuret, No Serum Blank, End Point)	8.9 H	g/dL	6.3-8.2
Serum Albumin (Bromcresol Green (BCG))	4.9	gm/dL	3.5-5.0
Serum Globulin (Calculated)	4 H	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.23	-	1.0-2.1
SGOT (AST) (Multiple-point Rate)	36	U/L	14.0-36.0
SGPT (ALT) (Uv With P5p)	29	U/L	<35.0
Alkaline Phosphatase (ALP) (PMPP, AMP Buffer)	95	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (G-glutamyl-p-nitroanilide)	12	U/L	12.0-43.0
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (CLIA)	1.41	ng/mL	0.97-1.69
Thyroxine (T4) (CLIA)	11.9 H	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (CLIA)	1.644	μIU/mL	0.4-4.049

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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Appointments **1800-309-0309** (Toll Free)

Emergencies



Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

## Note

- Abnormal results are highlighted.
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- Kindly correlate clinically.





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Appointments

1800-309-0309 (Toll Free)

Emergencies



**Final Report** 

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 11:34 AM Reported On: 27/05/2023 12:58 PM

Barcode: F12305270088 Specimen: Serum Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

## **BIOCHEMISTRY**

Test Result Unit **Biological Reference Interval** 

17 mg/dL 7.0-17.0 Blood Urea Nitrogen (BUN) (Urease, UV)

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

#### Note

- Abnormal results are highlighted.
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- Kindly correlate clinically.





Final Report

Patient Name: Ms Manasi Halder MRN: 17600000239732 Gender/Age: FEMALE, 48y (27/05/1975)

Collected On: 27/05/2023 10:48 AM Received On: 27/05/2023 11:34 AM Reported On: 27/05/2023 12:37 PM

Barcode: F22305270069 Specimen: Whole Blood - ESR Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9903348006

## **HAEMATOLOGY LAB**

Test Result Unit **Biological Reference Interval** 10.0 mm/1hr 0.0-20.0

(Westergren Method)

**Erythrocyte Sedimentation Rate (ESR)** 

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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**Appointments** 

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Emergencies