

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)
 Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:48 AM Reported On : 22/07/2023 09:27 AM
 Barcode : 812307220202 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	14.3	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.75	millions/ μ L	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	42.6	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	89.8	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	30.1	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	13.1	%	11.6-14.0
Platelet Count (Electrical Impedance)	137 L	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	15.0 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	8.1	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	57.7	%	40.0-75.0
Lymphocytes (VCSn Technology)	34.5	%	20.0-40.0
Monocytes (VCSn Technology)	5.7	%	2.0-10.0
Eosinophils (VCSn Technology)	1.9	%	1.0-6.0

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)			
Basophils (VCSn Technology)	0.2	%	0.0-2.0
NRBC (VCSn Technology)	0.1	/100 WBC	-
Absolute Neutrophil Count (Calculated)	4.67	10 ³ /μL	1.8-7.8
Absolute Lymphocyte Count (Calculated)	2.79	10 ³ /μL	1.0-4.8
Absolute Monocyte Count (Calculated)	0.46	10 ³ /μL	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.15	10 ³ /μL	0.0-0.45
Absolute Basophil Count (Calculated)	0.02	10 ³ /μL	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. Rakhi Mandal
 MD, Pathology
 Consultant Pathology MBBS, MD

Note

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



DEPARTMENT OF LABORATORY MEDICINE

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Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:46 AM Reported On : 22/07/2023 10:24 AM

Barcode : 802307220244 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	327 H	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

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:47 AM Reported On : 22/07/2023 12:09 PM

Barcode : 802307220245 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	13.5 H	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	340.75	-	-

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. Debasree Biswas
MD, Biochemistry
Clinical Biochemist MBBS, MD

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Patient Name	Sushanta Sardar	Requested By	EXTERNAL
MRN	17510001202041	Procedure DateTime	2023-07-22 14:27:50
Age/Sex	51Y 5M/Male	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

Enlarged in size and moderately increase in echogenicity .

As visualised , intrahepatic biliary radicles appear normal.

PORTAL VEIN:

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

GALL BLADDER:

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

CBD:

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

SPLEEN:

Normal in size measuring 8.6 cm and echogenicity. No focal SOL seen.

PANCREAS:

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

KIDNEYS:

Both kidneys are normal in size, position and echogenicity. Corticomedullary differentiation maintained.

Right renal mid polar anterior exophytic cyst (2.8 x 3.8 cm) seen.

No hydronephrosis or calculus is seen.

Right kidney and left kidney measures 9.9 cm and 10.4 cm respectively.

URINARY BLADDER:

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

Post void residual urine 40 cc.

PROSTATE:

Normal in size measuring approx. 2.5 x 2.5 x 3.5 cm (12 gms), homogenous in echotexture and smooth in outline.

IMPRESSION:

- Fatty liver grade II.
- Right renal exophytic cyst.

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.



Dr. Suranjana Bhattacharjee

Consultant Sonologist

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)
Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:57 AM Reported On : 22/07/2023 10:19 AM
Barcode : BR2307220011 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

IMMUNOHAEMATOLOGY

Test	Result	Unit
BLOOD GROUP & RH TYPING		
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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Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:46 AM Reported On : 22/07/2023 10:25 AM

Barcode : 802307220243 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Serum Sodium (Direct ISE - Potentiometric)	133 L	mmol/L	137.0-145.0

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.88	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.33	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.55	-	-
Total Protein (Biuret Method)	8.10	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.80	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.3	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.46	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	42	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	69 H	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	211 H	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	128 H	U/L	15.0-73.0



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

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.75	mg/dL	0.66-1.25
eGFR	109.8	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	15.78	-	9.0-20.0
Serum Potassium (Direct ISE - Potentiometric)	4.2	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	218 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	203 H	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	40	mg/dL	40.0-60.0
Non-HDL Cholesterol	178.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	145.3 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	40.6 H	mg/dL	0.0-40.0

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Rabindranath Tagore International Institute of Cardiac Sciences

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Appointments
180 0309 0309 (Toll free)

Emergencies
99033 35544

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)			
Cholesterol /HDL Ratio	5.5	-	-
Prostate Specific Antigen (PSA) (CLIA)	0.615	ng/mL	0.0-3.5

--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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- Kindly correlate clinically.
 (Lipid Profile, -> Auto Authorized)
 (Blood Urea Nitrogen (Bun), -> Auto Authorized)
 (Serum Potassium, -> Auto Authorized)
 (CR, -> Auto Authorized)
 (Prostate Specific Antigen (Psa) -> Auto Authorized)



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Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:46 AM Reported On : 22/07/2023 09:53 AM

Barcode : 802307220243 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630


CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.38	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	10.2	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	3.487	uIU/ml	0.4001-4.049

--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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- (-> Auto Authorized)



ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Mr Sushanta Sardar
GENDER/AGE : Male, 51 Years
LOCATION : -

PATIENT MRN : 17510001202041
PROCEDURE DATE : 22/07/2023 12:58 PM
REQUESTED BY : EXTERNAL



IMPRESSION

- GOOD LV SYSTOLIC FUNCTION WITH GRADE I DIASTOLIC DYSFUNCTION.

FINDINGS

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
RIGHT ATRIUM : NORMAL SIZED
LEFT VENTRICLE : NORMAL SIZED CAVITY. NO REGIONAL WALL MOTION ABNORMALITY. GOOD SYSTOLIC FUNCTION WITH EJECTION FRACTION: 65%. GRADE I DIASTOLIC DYSFUNCTION.
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.

MR SUSHANTA SARDAR (17510001202041)

DR. RANJIT MUKHERJEE
ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC

SOVA DAS
ASSISTANT MANAGER

22/07/2023 12:58 PM

PREPARED BY : SHAWLI MITRA(307739)
GENERATED BY : PAROMITA SARKAR(329190)

PREPARED ON : 22/07/2023 01:00 PM
GENERATED ON : 22/07/2023 05:32 PM

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 08:48 AM Reported On : 22/07/2023 11:30 AM

Barcode : 812307220201 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	27 H	mm/1hr	0.0-10.0

--End of Report--



Dr. Sanjib Kumar Pattari
MD, Pathology
Consultant Pathology MBBS, MD. Reg No : 53635 (WBMC)

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Patient Name	Sushanta Sardar	Requested By	EXTERNAL
MRN	17510001202041	Procedure DateTime	2023-07-22 09:50:53
Age/Sex	51Y 5M/Male	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.
- No significant lung parenchymal lesion is seen.
- The costo-phrenic angles are clear.
- Both the diaphragmatic domes appear normal.
- The visualized bones and soft tissue structures appear normal.

IMPRESSION:

- **No significant radiological abnormality detected.**

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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: 2023-07-22 12:46:26

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

Collected On : 22/07/2023 04:37 PM Received On : 22/07/2023 05:05 PM Reported On : 22/07/2023 06:45 PM

Barcode : 802307220834 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	441 H	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. Debasree Biswas
MD, Biochemistry
Clinical Biochemist MBBS, MD

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Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

Collected On : 22/07/2023 08:39 AM Received On : 22/07/2023 03:57 PM Reported On : 22/07/2023 05:21 PM

Barcode : 822307220015 Specimen : Stool Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Colour	Brownish	-	-
Consistency	Semi Solid	-	-
Mucus	Present	-	-
Blood	Absent	-	-

CHEMICAL EXAMINATION

Stool For Occult Blood	Negative	-	-
Reaction	Alkaline	-	-

MICROSCOPE EXAMINATION

Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Trophozoite	Not Seen	-	-
Red Blood Cells (Stool)	Not Seen	-	-
Pus Cells	1-2	/hpf	1-2
Starch	Present	-	-
Veg Cells	Present	-	-
Fat	Absent	-	-



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Larvae Not Seen - -

--End of Report--



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

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Collected On : 22/07/2023 08:35 AM Received On : 22/07/2023 03:57 PM Reported On : 22/07/2023 05:21 PM

Barcode : 822307220014 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903394630

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	40	ml	-
Colour	Light-Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (Mixed PH Indicator)	5.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.014	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Present +++++	-	-
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

Page 1 of 2



Patient Name : Mr Sushanta Sardar MRN : 17510001202041 Gender/Age : MALE , 51y (02/02/1972)

MICROSCOPIC EXAMINATION

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

--End of Report--



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MD, Pathology
Consultant Pathology MBBS, MD

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