

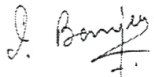
DIAGNOSTICS REPORT

Patient Name	: Mr. Asit Kumar Mondal	Order Date	: 26/03/2022 13:30
Age/Sex	: 58 Year(s)/Male	Report Date	: 26/03/2022 17:20
UHID	: NMHK.2204171	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BAGAKHLI, ,Kolkata, West Bengal, 700140	Mobile	: 9748049844

ECHOCARDIOGRAPHY (SCREENING)

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 62 %).
- * Good RV systolic function (TAPSE = 25 mm).
- * Normal valve morphology.
- * Grade I LV diastolic dysfunction.
- * No pericardial effusion.
- * No pulmonary arterial hypertension.
- * IVC normal diameter & > 50% respiratory variation.
- * No thrombus, mass, vegetation seen.



Dr.INDIRA BANERJEE,
MD,DNB,MRCPCH (UK)

Board Certified Comprehensive
Echocardiographer (USA)

DIAGNOSTICS REPORT

Patient Name	: Mr. Asit Kumar Mondal	Order Date	: 26/03/2022 13:30
Age/Sex	: 58 Year(s)/Male	Report Date	: 26/03/2022 15:38
UHID	: NMHK.2204171	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BAGAKHLI, ,Kolkata, West Bengal, 700140	Mobile	: 9748049844

ELECTROCARDIOGRAM REPORT (ECG)

HR : 74 bpm
Rhythm : Sinus
P wave : Normal
PR Interval : 124 msec
QRS axis : Left (- 73 Degree)
QRS duration : 98 msec
QRS configuration : LAHB
T wave : Non specific changes
ST segment : Non specific changes
QTc : 407 msec
QT : 366 msec

IMPRESSION:

- Sinus rhythm. Left QRS axis.
 - Left Anterior Hemi Block (LAHB).
 - Non specific ST-T changes.
- Clinical correlation please.

Dr.INDIRA BANERJEE ,
MD,DNB,MRCPC (UK)

Board Certified Comprehensive
Echocardiographer (USA)

ASIT KR. MONDAL

HR 74/min

Axis:

SINUS RHYTHM

2204171

Intervals:

P 78 °

ABNORMAL LEFT AXIS DEVIATION

Male

RR 812 ms

QRS -73 °

R-S TRANSITION ZONE IN V LEADS DISPLACED TO THE RIGHT

58 years

P 98 ms

T 24 °

LEFT ANTERIOR FASCICULAR BLOCK

cm / kg

PR 124 ms

P (II) 0.18 mV

QRS(T) CONTOUR ABNORMALITY

QRS 98 ms

S (V1) -0.18 mV

CONSIDER ANTEROLATERAL MYOCARDIAL DAMAGE

QT 366 ms

R (V5) 0.59 mV

6.02

QTC 407 ms

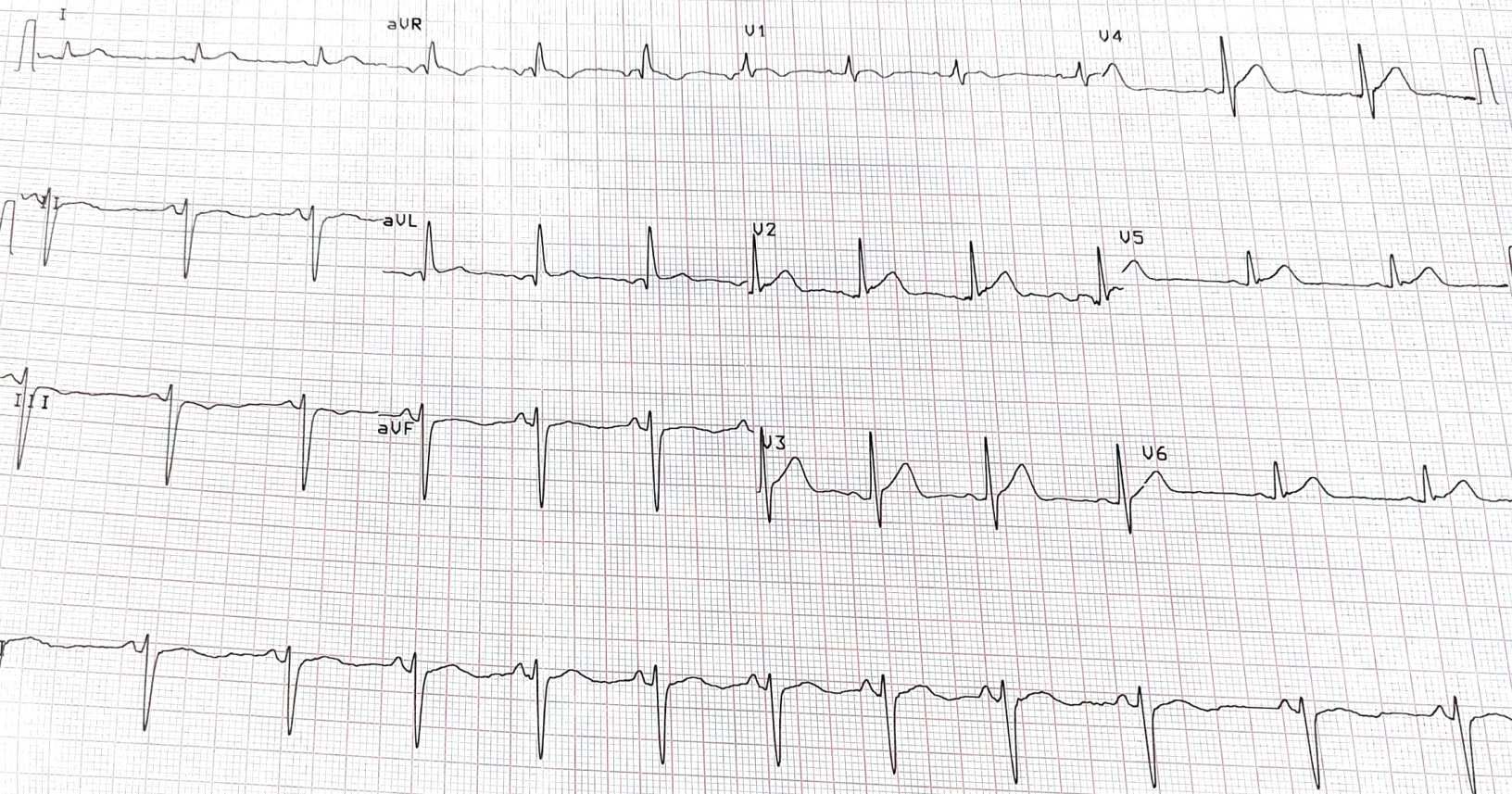
Sokol. 0.79 mV

UNCONFIRMED REPORT

(Bazett)

10 mm/mV

10 mm/mV



mV

0.05-25 Hz F50 SSF SBS 26.03.2022 11:15:10

NARAYAN MEMORIAL HOSPITAL.BEHALA

AT-102plu

DIAGNOSTICS REPORT

Patient Name	: Mr. Asit Kumar Mondal	Order Date	: 26/03/2022 13:30
Age/Sex	: 58 Year(s)/Male	Report Date	: 26/03/2022 14:51
UHID	: NMHK.2204171	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BAGAKHLI, ,Kolkata, West Bengal, 700140	Mobile	: 9748049844

USG REPORT OF WHOLE ABDOMEN (SCREENING)

LIVER : Liver is normal in size and parenchymal echotexture. Intrahepatic biliary radicles are not dilated. No focal mass lesion is seen.

PORTA :PV : Normal. PV measures 1.1 cm.

CD : Normal . CD measures 0.5 cm.

GALL BLADDER :Gall bladder is normal in size, contour, outline and position. No calculus is seen. Wall thickness is normal.

PANCREAS :Pancreas is normal in size and parenchymal echogenicity. Pancreatic duct is not dilated.

SPLEEN :Spleen is not enlarged and parenchyma shows normal homogeneous pattern.

KIDNEYS :Both kidneys are normal in size, shape, outline, position and parenchymal echogenicity. Corticomedullary differentiation maintained. No evidence of any calculus/mass / hydronephrosis is seen.

Right kidney measures : 8.4 cm & Left kidney measures : 8.1 cm.

URINARY BLADDER : Urinary bladder is normal in contour, outline and distension. No vesical lesion is seen.

DIAGNOSTICS REPORT

Patient Name	: Mr. Asit Kumar Mondal	Order Date	: 26/03/2022 13:30
Age/Sex	: 58 Year(s)/Male	Report Date	: 26/03/2022 14:51
UHID	: NMHK.2204171	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BAGAKHLI, ,Kolkata, West Bengal, 700140	Mobile	: 9748049844

PROSTATE : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 2.9 cm x 3.9 cm x 2.5 cm. It weight approx 15 gm.

PERITONEUM : : No free fluid is noted.

RETROPERITONEUM : IVC and aorta appear normal. No lymphadenopathy is seen.

IMPRESSION : Normal study.



Dr.MADHUSHREE RAY NASKAR,
MBBS,DMRD

Consultant Radiologist

RegNo: 57032

DIAGNOSTICS REPORT

Patient Name	: Mr. Asit Kumar Mondal	Order Date	: 26/03/2022 13:30
Age/Sex	: 58 Year(s)/Male	Report Date	: 26/03/2022 20:55
UHID	: NMHK.2204171	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: BAGAKHLI, ,Kolkata, West Bengal, 700140	Mobile	: 9748049844

CHEST X-RAY REPORT OF PA VIEW

Lung fields are clear. No focal parenchymal opacity is seen.

No appreciable pleural thickening / calcification is noted.

Costo-phrenic angles are normal.

Cardiac shadow appears normal.

Bilateral hilar shadows are prominent.

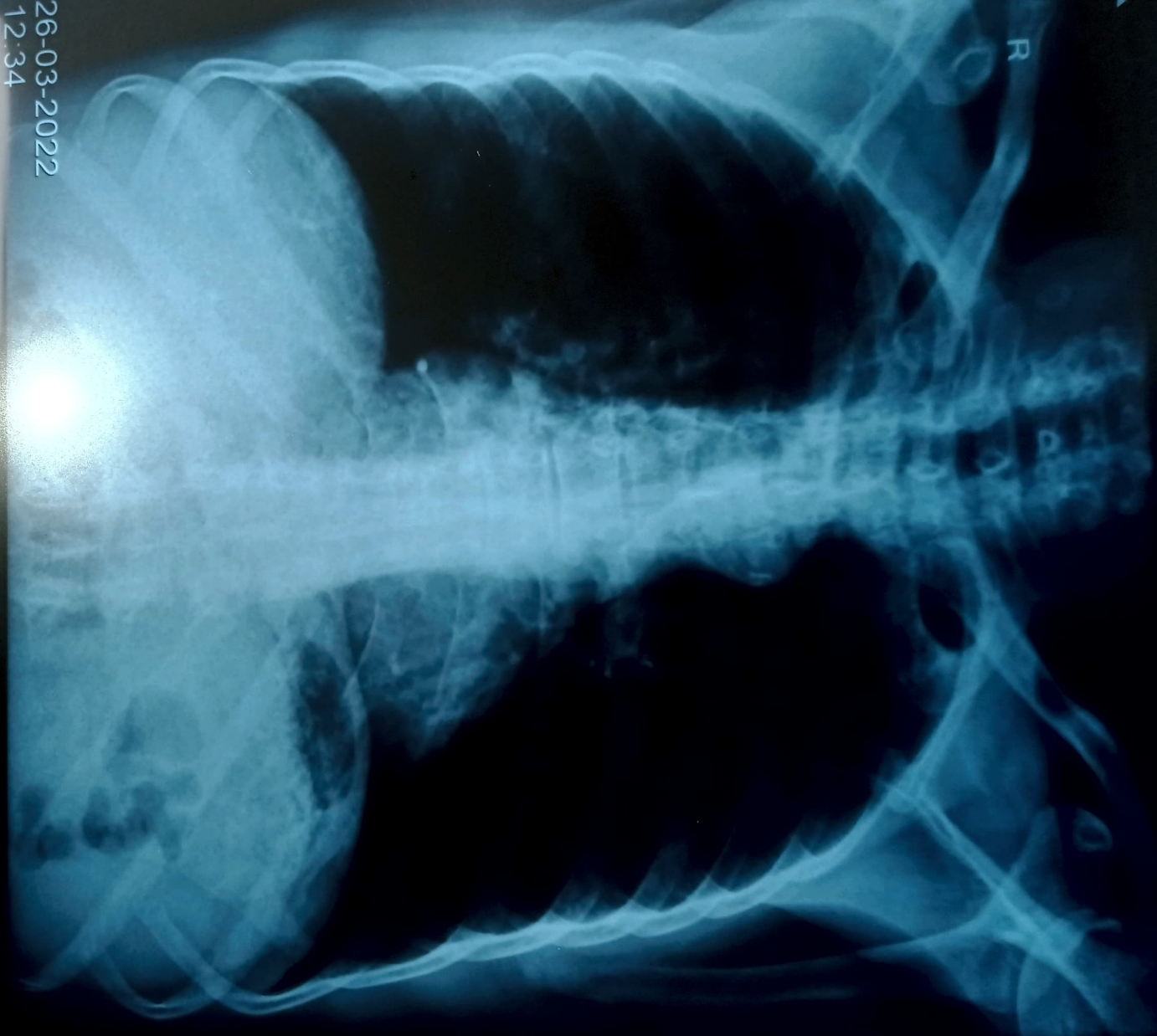
No obvious bony abnormality is seen.



Dr.MADHUSHREE RAY NASKAR,
MBBS,DMRD

Consultant Radiologist

RegNo: 57032



26-03-2022
12:34

2204171. ASIT KUMAR MONDAL. M. 58 years
NARAYAN MEMORIAL HOSPITAL

Dr.

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
UHID : NMHK.2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGAKHILI, Kolkata, West Bengal, 700140

Age/Sex : 53 Year(s)/Male
Order Date : 26/03/2022 13:30
Mobile No : 9748049844
Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION

RESULTS

Sample No : 0710060269A

Collection Date : 26/03/22 13:32

Ask Date :

UNITS

BIOLOGICAL REF RANGE

Report Date : 26/03/22 18:37

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

HBA1C

5.8

B: HPLC

%

Non-dial.ctr : 4-6

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
2. HbA1c has been endorsed by clinical group & American Diabetes Association guidelines 2017, for diagnosis of Diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low HbA1c in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (Specially in Severe iron deficiency anaemia and hemolytic), chronic renal failure and liver disease. Clinical correlation suggested.
5. Interference of Haemoglobinopathies in HbA1c estimation.
 - a) For HbF > 25%, an alternate plateform (fructosamine) is recommended for testing of HbA1c.
 - b) Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.

Note: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

c) Heterozygous state detected (D10/turbo) is corrected for HbS and HbC trait.

6. For known diabetic patients, following values can be considered as a tool for monitoring the glycemic control:

Excellent control:- 6 - 7%

Fair to good control:- 7 - 8%

Unsatisfactory control:- 8 - 10%

Poor control > 10%



Dr. S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

End of Report

Checked By

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
UHID : NMHK.2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGAKHLI , ,Kolkata,West Bengal ,7001140

Age/Sex : 58 Year(s)/Male
Order Date : 26/03/2022 13:30
Mobile No : 9748049844
Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060269	Collection Date : 26/03/22 13:32	Ack Date :	Report Date : 26/03/22 18:37
SERUM CREATININE			
SAMPLE : SERUM			
SERUM CREATININE	1.1	mg/dl	0.7 - 1.2
<i>Jaffe Gen2 Compensated</i>			
BLOOD UREA NITROGEN			
BLOOD UREA NITROGEN	8.4	mg/dl	6 - 20
<i>Calculated</i>			
URIC ACID			
SAMPLE : SERUM			
URIC ACID	5.0	mg/dl	3.4 - 7
<i>Enzymatic Colorimetric</i>			
SAMPLE : SERUM			
RESULT	7.6		
Sample No : 07H0060269B	Collection Date : 26/03/22 13:32	Ack Date :	Report Date : 26/03/22 18:37
BLOOD SUGAR(F)			
SAMPLE : PLASMA			
BLOOD SUGAR FASTING	81	mg/dl	70 - 109
<i>Hexokinase</i>			
Sample No : 07H0060273B	Collection Date : 26/03/22 13:41	Ack Date :	Report Date : 26/03/22 18:37
BLOOD SUGAR(PP)			
SAMPLE : PLASMA			
BLOOD SUGAR PP	86	mg/dl	70 - 140
<i>Hexokinase</i>			

End of Report



Dr.S. Chatterjee
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Checked By

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Astit Kumar Mondal
UHID : NMHK.2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGAKHILI, ,Kolkata, West Bengal ,700140

Age/Sex : 58 Year(s)/Male
Order Date : 26/03/2022 13:30
Mobile No : 9748049844
Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
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Sample No : 07H060269 Collection Date : 26/03/22 13:32 Ack Date : 26/03/22 18:37

LIVER FUNCTION TEST (LFT)

SAMPLE 1 SERUM			
TOTAL BILIRUBIN	0.8	mg/dl	0 - 1.1
<i>Diazo Method</i>			
DIRECT BILIRUBIN	0.3 ▲	mg/dl	0 - 0.2
<i>Diazo Method</i>			
INDIRECT BILIRUBIN	0.5	mg/dl	0.2 - 0.9
<i>Calculated</i>			
SGPT (ALT)	25	U/L	0 - 34
<i>JFCC Without Pyruvical Phosphate</i>			
SGOT (AST)	23	U/L	0 - 31
<i>JFCC Without Pyruvical Phosphate</i>			
ALKALINE PHOSPHATASE	145 ▲	U/L	53 - 128
<i>JFCC</i>			
TOTAL PROTEIN	7.0	g/dl	6.4 - 8.2
<i>Buret</i>			
ALBUMIN	4.5	gm/dl	3.5 - 5.2
<i>Bromocresol Green</i>			
GLOBULIN	2.5	g/dl	2 - 3.5
<i>Calculated</i>			
ALBUMIN:GLOBULIN	1.8	-	1.1 - 2.5
<i>Calculated</i>			
GGT	25	U/L	8 - 61

Enzymatic colorimetric assay

End of Report



Dr. S. Chatterjee
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 (CONSULTANT BIOCHEMIST)

Checked By

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 Ph : 033 6640 0000 | Mob : +91 62921 95051
 E : contact@nmh.org.in

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
UHID : NMHK.2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGAKHILL, ,Kolkata,West Bengal ,700140

Age/Sex : 58 Year(s)/Male
Order Date : 26/03/2022 13:30
Mobile No : 9748049844
Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
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Sample No. : 07H0650269
Collection Date : 26/03/22 13:32
Ask Date :
Report Date : 26/03/22 .18:37

LIPID PROFILE

SAMPLE :SERUM

TOTAL CHOLESTEROL

138

mg/dl
Desirable <200 |
Borderline 200-239 |
High >=240

CHOD-PAP

HDL CHOLESTEROL

50

mg/dl
40 - 60

Homogenous Enzymatic Colorimetric

LDL CHOLESTEROL

71

mg/dl
Optimal < 100 |
Borderline 130

Homogenous Enzymatic Colorimetric

VLDL

14

mg/dl
0 - 30

CALCULATED

CHOLESTEROL-HDL RATIO

2.76

-

LDL-HDL RATIO

1.42

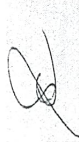
-

TRIGLYCERIDES

71

mg/dl
Desirable <150 |
Borderline 150 - 200 |
High >200

Enzymatic Colorimetric



Dr.S. Chatterjee
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(CONSULTANT BIOCHEMIST)

Checked By

End of Report

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
UHD : NMHK-2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGAKHIL , , Kolkata, West Bengal , 700140

Age/Sex : 58 Year(s)/Male
Order Date : 26/03/2022 13:30
Mobile No : 9748049844
Facility : NARAYAN MEMORIAL HOSPITAL

Immunoassay

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No. : 07H0060269	Collection Date : 26/03/22 13:32	Ask Date :	Report Date : 28/03/22 11:11

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	1.03	ng/ml	0.6 - 1.8
ECLA			
T4	9.1	ug/dL	5.4 - 11.7
ECLA			
TSH	2.0	uIU/ml	Adult Male - 0.27-5.50 Adult Female - 0.27-5.50 Newborns - <25 Upto 12 years - 0.3-5

ECLA

Interpretations:

- For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
- The assay is unaffected by icterus (bilirubin < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (triglyceride < 1500 mg/dL), biotin (<102 mmol/L or < 25 ng/ml), IgG < 2 g/dL and IgM < 0.5 g/dL).
- There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
- TSH values may be transiently altered because of non thyroidal illness like several infections, liver disease, renal and heart failure, several burns, trauma and surgery etc. Drugs that decrease TSH values e.g. L-dopa, Glucocorticoid drugs that increase TSH values e.g. Iodine, Lithium, Amiodarone.
- The assay is unaffected by icterus (bilirubin< 633 µmol/L or < 37 mg/dL), hemolysis (Hb< 1.4 mmol/L or < 2.3 g/dL), lipemia (triglycerides< 28.5 mmol/L or 2500 mg/dl) and biotin (< 409 nmol or < 100 ng/ml).
- The assay is unaffected by icterus (bilirubin< 599 µmol/L or < 35 mg/dl), hemolysis (Hb<1.2 mmol/L or < 2.0 g/dl), lipemia (triglycerid < 1800 mg/dl) and biotin (< 123 nmol or < 30 ng/ml).

End of Report



Dr. MAINAK CHAKRABORTY
MBBS, MD(PATH)
 (CONSULTANT PATHOLOGIST)

Checked By

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
 UHID : NMHK.2204171
 Episode : OP
 Ref. Doctor : NMH
 Address : BAGAKHILI, Kolkata, West Bengal, 700140

Age/Sex : 58 Year(s)/Male
 Order Date : 26/03/2022 13:30
 Mobile No : 9748049844
 Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 0710080269	Collection Date : 26/03/22 13:32	Ask Date :	Report Date : 26/03/22 16:46

COMPLETE HAEMOGRAM (CBC)

HAEMOGLOBIN (HB) <i>Colorimetric method (Ort. Meth)</i>	14.8	gm/dl	13 - 17
RBC COUNT <i>Electrical Impedance Method</i>	4.96	x10 ⁶ /ul	4.5 - 5.5
TOTAL WBC COUNT <i>Electrical Impedance Method</i>	7.4	10 ³ /cmm	4 - 10
PLATELET COUNT <i>Electrical Impedance Method</i>	220	10 ³ /cmm	150 - 410
PCV <i>REC pulse ht. detection method</i>	45	%	40 - 50
MCV <i>calculated</i>	91	fL	83 - 101
MCH <i>Calculated</i>	30	Pg	27 - 32
MCHC <i>Calculated</i>	33	gm/dl	31.5 - 34.5
ESR <i>Modified Westergen Method</i>	10	%	0 - 12

DIFFERENTIAL COUNT

NEUTROPHILS <i>Microscopy</i>	69	%	40 - 80
LYMPHOCYTES <i>Microscopy</i>	26	%	20 - 40
MONOCYTES <i>Microscopy</i>	02	%	2 - 10
EOSINOPHILS <i>Microscopy</i>	03 ▼	%	1 - 6
BASOPHILS <i>Microscopy</i>	00	%	0 - 2

PERIPHERAL BLOOD SMEAR

RBC Normocytic normochromic
 WBC Within normal limits
 PLATELET Adequate

LABORATORY INVESTIGATION REPORT

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Episode : OP
Ref. Doctor : NMH
Address : BAGAKHLI, Kolkata, West Bengal, 700140

Age/Sex : 58 Year(s)/Male
Order Date : 26/03/2022 13:30
Mobile No : 9748649844
Facility : NARAYAN MEMORIAL HOSPITAL



End of Report

Dr. ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)
RegNo: 82734

Checked By

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
UHID : NMHK.2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGANKHLI , Kolkata, West Bengal ,700140

Age/Sex : 58 Year(s)/Male
Order Date : 26/03/2022 13:30

Mobile No : 9748049844
Facility : NARAYAN MEMORIAL HOSPITAL

Immunology

INVESTIGATION

Sample No : 07H0060269

RESULTS

Collection Date : 26/03/22 13:32

UNITS

BIOLOGICAL REF RANGE

Report Date : 26/03/22 16:52

BLOOD GROUPING & RH TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP

Agglutination forward & Reverse

' B '

POSITIVE

RH TYPE

End of Report



Dr. ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

RegNo: 82734

Checked By

LABORATORY INVESTIGATION REPORT

Patient Name : Mr. Asit Kumar Mondal
UHID : NMHK-2204171
Episode : OP
Ref. Doctor : NMH
Address : BAGAKHLI, ,Kolkata, West Bengal, 700140

Age / Sex : 58 Year(s) / Male
Order Date : 26/03/2022 13:30
Mobile No : 9748949844
Facility : NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 0710060273	Collection Date : 26/03/22 13:41	Ask Date :	Report Date : 28/03/22 10:31

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME : 30 ml
COLOUR : PALE YELLOW
APPEARANCE : CLEAR
SPECIFIC GRAVITY : 1.015
REACTION(pH) : ACIDIC (6.5)

CHEMICAL EXAMINATION

SUGAR : ABSENT
ALBUMIN : ABSENT
BLOOD : ABSENT
KETONE : ABSENT
BILE SALT : ABSENT
BILE PIGMENTS : ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS : 1-2 / HPF
EPITHELIAL CELLS : 0-2 / HPF
RBC : NIL
CAST : ABSENT
CRYSTAL : ABSENT

Please correlate clinically.

Angita K. Ghosh

Dr. ANGKITA K. GHOSH
MBBS, MD(PATH)
 (CONSULTANT PATHOLOGIST)

RegNo: 82734

Checked By

End of Report



Follow us on

Patient Name

: Mr. Asit Kumar Mondal
: NMHK.2204171
: OP
: NMH
: BAGAKHLI, ,Kolkata,West Bengal ,700140

UHID

Episode

Ref. Doctor

Address

LABORATORY INVESTIGATION REPORT

Age/Sex

: 58 Year(s)/Male

Order Date

: 26/03/2022 13:30

Mobile No

: 9748049844

Facility

: NARAYAN MEMORIAL HOSPITAL

INVESTIGATION

Sample No : 07H0060273

URINE FOR SUGAR FASTING

SAMPLE : URINE

RESULT

URINE FOR SUGAR PP

SAMPLE : URINE

RESULT

Clinical Pathology

RESULTS

Collection Date : 26/03/22 13:41

Ack Date :

UNITS

BIOLOGICAL REFERENCE
Report Date : 26/03/22 13:37



Dr.S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

Checked By

End of Report



PID NO: P2162100059693
 Age: 58.0 Year(s) Sex: Male



Reference: Dr.SELF
 Sample Collected At:
 Narayan Memorial Hospital
 601 D Diamond Harbour
 Proxessing Location: MHL RAJARHAT
 (KRL) Kolkata: 700136

Test Report

VID: 216212100050092
 Registered On:
 27/03/2022 05:31 PM
 Collected On:
 27/03/2022 5:31PM
 Reported On:
 27/03/2022 07:38 PM

Investigation

PSA- Prostate Specific Antigen
 (Serum,ECLIA)

Observed Value
 1.17

Unit
 ng/mL

Biological Reference Interval
 Conventional for all ages: 0 - 4
 50 - 59 yrs: 0 - 3.5

Interpretation: Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1-anti-chymotrypsin (PSA-ACT complex) and prostate cancer may increase in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or sonological examinations.

Comments: Patients on Biotin supplement may have interference in some immunoassays.

Reference: Arch Pathol Lab Med—Vol 141, November 2017. With individuals taking high dose Biotin (more than 5 mg per day) supplements, at least 8-hour wait time before blood draw is recommended.

-- End of Report --

Asit

Page 1 of 1
 Dr. Saurav Sarkar
 MBBS, DCH, MD(Pathology)

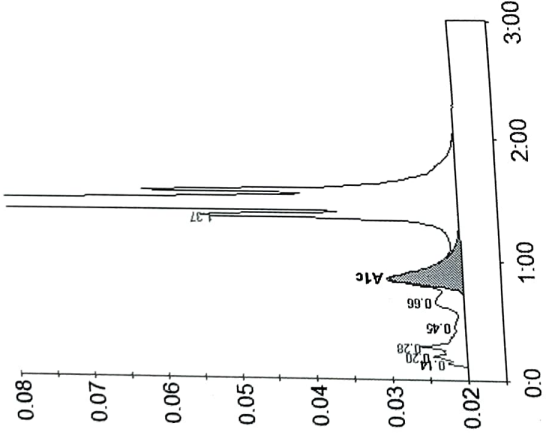
† This test was outsourced to Metropolis Healthcare Ltd. Mumbai

Patient report

Bio-Rad
D-10
S/N: #D10A467747
Sample ID:
Injection date
Injection #: 5
Rack #: ---

DATE: 26/03/2022
TIME: 16:29
Software version: 4.30-2
07H0060269A
26/03/2022 15:42
Method: HbA1c
Rack position: 5

Dr. Hsiti Kumar, Nonda,
(R)MNHK. 2204171, 58y / M
07H0060269A
EDTA uh 26-03 13:32



Peak table - ID: 07H0060269A

Peak	R.time	Height	Area	Area %
Unknown	0.14	2566	6341	0.3
A1a	0.20	4525	11988	0.5
A1b	0.28	6217	31811	1.3
F	0.45	1369	9436	0.4
L.A1c/CHb-1	0.66	3772	32717	1.4
A1c	0.85	9720	100133	5.8
P3	1.37	34144	134491	5.7
A0	1.44	701080	2034323	86.2

Total Area: 2361239

Concentration:	%	mmol/mol
A1c	5.8	40