

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Santanu Mondal MRN : 17650000235624 Gender/Age : MALE , 38y (05/06/1984)

Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 09:07 AM Reported On : 08/04/2023 11:24 AM

Barcode : L12304070003 Specimen : Whole Blood Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

NARAYANA SUPERSPECIALITY HOSPITAL BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	O	-
RH Typing	Positive	-

--End of Report--



Dr. Smita Priyam
MBBS, MD, Pathology
REGISTRAR

Note

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



Narayana Superspeciality Hospital

(A Unit of Meridian Medical Research & Hospital Ltd.) CIN U85110W81995PLC071440
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Appointments
180-0309-0309 (Toll Free)

Emergencies
83348 30003

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Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 09:07 AM Reported On : 07/04/2023 10:20 AM

Barcode : J22304070076 Specimen : Whole Blood - ESR Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	35 H	mm/1hr	0.0-10.0

--End of Report--



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Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 09:07 AM Reported On : 08/04/2023 02:05 PM

Barcode : J42304070008 Specimen : Stool Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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STOOL ROUTINE EXAMINATION

PHYSICAL EXAMINATION

Colour	Yellowish	-	-
Consistency	Soft	-	-
Mucus	Present (+)	-	-
Blood	Not Visible	-	-

CHEMICAL EXAMINATION

Stool For Occult Blood	---	-	-
Reaction	Acidic	-	-
Reducing Substances	---	-	-

MICROSCOPE EXAMINATION

Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Trophozoite	Not Seen	-	-
Red Blood Cells (Stool)	Not Seen	-	-
Pus Cells	1-2	/hpf	0 - 2
Starch	Not Seen	-	-
Epithelial Cells	Not Seen	/hpf	-

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Veg Cells	Present (+)	-	-
Fat	Not Seen	-	-
Larvae	Not Seen	-	-
Bacteria	Present(+)	-	-

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Patient Name : Santanu Mondal MRN : 17650000235624 Gender/Age : MALE , 38y (05/06/1984)

Collected On : 07/04/2023 02:18 PM Received On : 07/04/2023 02:18 PM Reported On : 07/04/2023 03:33 PM

Barcode : J12304070214 Specimen : Plasma Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	127	mg/dL	Both: Normal: 70-139 Both: Pre-diabetes: 140-199 Both: 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. Ritu Priya
MBBS, MD, Biochemistry
Consultant

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Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 09:07 AM Reported On : 07/04/2023 10:18 AM

Barcode : J12304070103 Specimen : Serum Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	1.00	mg/dL	0.66-1.25
eGFR (Calculated By MDRD Formula)	83.7	mL/min/1.73m ²	Indicative for renal impairment: <60 Note: eGFR is inaccurate for Hemodynamically unstable patients . eGFR is not applicable for less than 18 years of age .
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	13.08	mg/dL	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	139	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.6	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	215 H	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides	100	mg/dL	Both: Normal: < 150 Both: Borderline: 150-199 Both: High: 200-499 Both: Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	41	mg/dL	40.0-60.0
Non-HDL Cholesterol	174.0	-	-
LDL Cholesterol (Colorimetric)	151.32 H	mg/dL	Both: Optimal: < 100 Both: Near to above optimal: 100-129 Both: Borderline High: 130-159 Both: High: 160-189 Both: Very High: > 190

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VLDL Cholesterol (Calculated)	20	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	5.3	-	-


LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.7	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.1	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Calculated)	0.6	-	-
Total Protein (Colorimetric - Biuret Method)	8.0	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.6	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.4	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.35	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	32	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	43	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	90	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	16	U/L	15.0-73.0

--End of Report--



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Barcode : J12304070105 Specimen : Whole Blood Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.2	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	102.54	-	-

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--



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Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 12:35 PM Reported On : 07/04/2023 02:24 PM

Barcode : J32304070003 Specimen : Serum Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

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))	7.88	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	5.640 H	uIU/ml	0.4001-4.049

--End of Report--



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

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Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 09:07 AM Reported On : 07/04/2023 11:51 AM

Barcode : J12304070104 Specimen : Plasma Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	108 H	mg/dL	Both: Normal: 70-99 Both: Pre-diabetes: 100-125 Both: Diabetes: => 126 ADA standards 2019

--End of Report--



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Consultant

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Emergencies
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Patient Name : Santanu Mondal MRN : 17650000235624 Gender/Age : MALE , 38y (05/06/1984)

Collected On : 07/04/2023 08:56 AM Received On : 07/04/2023 09:07 AM Reported On : 07/04/2023 09:32 PM

Barcode : J42304070007 Specimen : Urine Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
Urine For Sugar	Absent	-	-

URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	60	ml	-
Colour	Pale Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction)	6.0	-	4.8-7.5
Sp. Gravity	1.015	-	1.002-1.030
Protein	Absent	-	-
Urine Glucose	Absent	-	Negative
Ketone Bodies	Absent	-	-
Bile Salts	Absent	-	Negative
Bile Pigment (Bilirubin)	Absent	-	Negative
Urobilinogen	Normal	-	-
Urine Leucocyte Esterase	Absent	-	-
Blood Urine	Absent	-	Negative
Nitrite	Absent	-	Negative

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MICROSCOPIC EXAMINATION

Pus Cells	1-2	/hpf	0 - 2
RBC	Not Found	-	0 - 3
Epithelial Cells	0-1	/hpf	-
Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Not Found	-	-

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Barcode : J22304070077 Specimen : Whole Blood Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 6290918752

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (sodium Lauryl Sulphate (SLS) Method)	12.2 L	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	6.07 H	millions/ μ L	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.6 L	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived)	65.1 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	20.1 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	30.8 L	%	31.5-34.5
Red Cell Distribution Width (RDW)	16.7 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	150	Thous/Cumm	150.0-400.0
Mean Platelet Volume (MPV)	13.7 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.6	-	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils	64.7	%	40.0-75.0
Lymphocytes (Fluorescent Flow Cytometry)	24.7	%	20.0-40.0
Monocytes (Fluorescent Flow Cytometry)	6.4	%	2.0-10.0
Eosinophils (Fluorescent Flow Cytometry)	3.9	%	1.0-6.0

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Basophils (Fluorescent Flow Cytometry)	0.3	%	0.0-2.0
NRBC	0.2	-	-
Absolute Neutrophil Count	4.92	-	-
Absolute Lymphocyte Count	1.88	-	-
Absolute Monocyte Count	0.49	-	-
Absolute Eosinophil Count	0.3	-	-
Absolute Basophil Count	0.02	-	-

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

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ID: 17650000235624
Name: SANTANUNMONDAL
Age: 38 Years
Gender: Male

2023-04-07 09:54:59

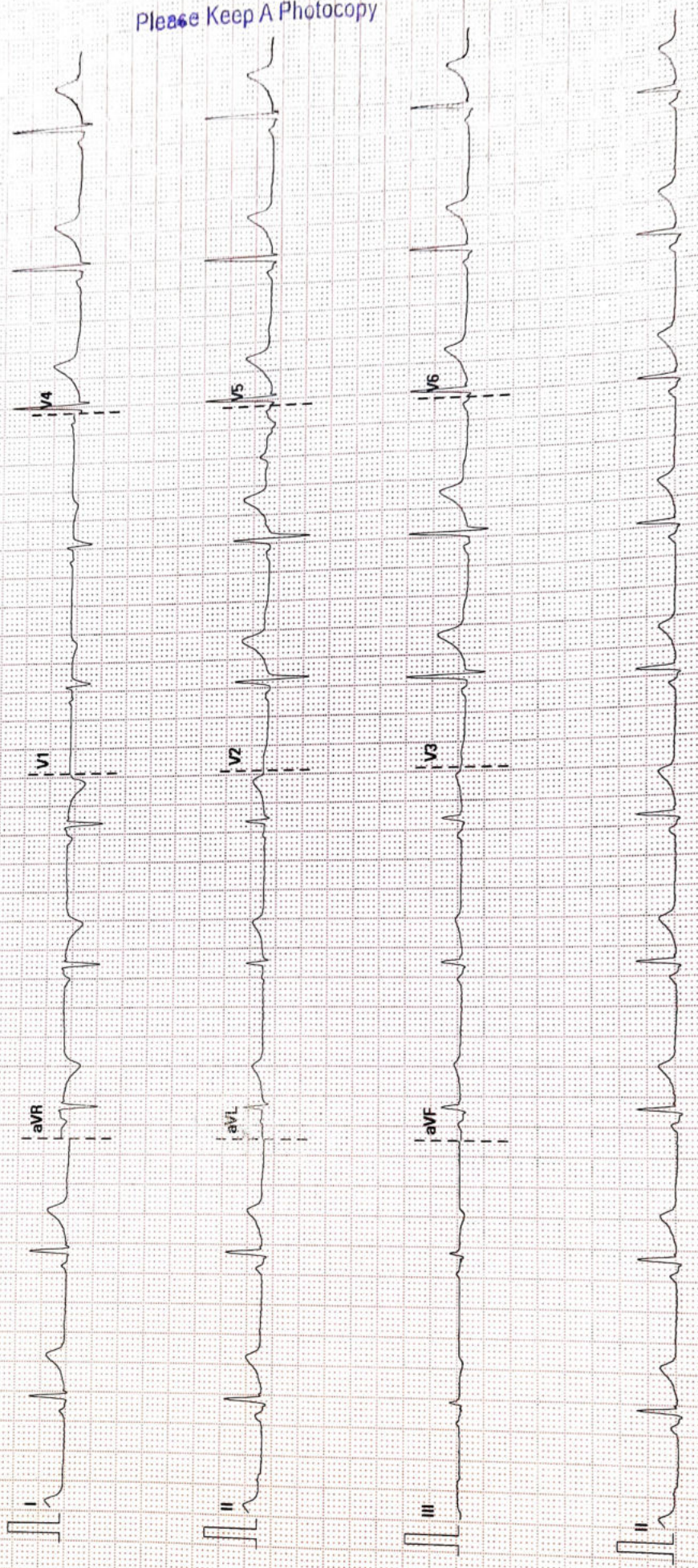
Vent. Rate 62 bpm
PR Interval 112 ms
QRS Duration 82 ms
QT/QTc Interval 406/410 ms
P/QRS/T Axes 53/41/23 deg
QTc:Hodges

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis

PLEASE CORRELATE CLINICALLY

Please Keep A Photocopy



Patient details:
Name:MR.SANTANU MONDAL
Age: 38 YEARS
Examination Date: 07.04.2023
Consultant Name:DR.

MRN:17650000235624
Gender:MALE
Processed Date: 07.04.2023
Patient Location: OPD

ECHOCARDIOGRAPHY REPORT

MEASUREMENT:

AO: 27 (20-40) mm	LVID(d): 43 (36-52) mm	IVS(d): 11 (6-11) mm
LA: 32 (19-40) mm	LVID(s) : 22 (23-39) mm	PWd: 10 (6-11) mm
RVOT: 23 mm		LVEF ~ 63 %

VALVES:

Mitral Valve : Normal

Aortic Valve : Normal

Tricuspid Valve : Normal

Pulmonary Valve: Normal

CHAMBERS (Dimension)

Left Atrium : Normal

Right Atrium : Normal

Left Ventricle : Normal

Right Ventricle : Normal

SEPTAL

IVS : Intact

IAS : Intact

GREAT ARTERIES:

Aorta : Normal

Pulmonary Artery: Normal

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DOPPLER DATA:

	Velocity(in m/s)	Peak PG(mmHg)	Mean PG(mmHg)	Regurgitation
Mitral	E - 0.7 , A - 0.6			0/4
Aortic	1.4	8.7		0/4
Tricuspid	2.8	32		Trivial
Pulmonary	0.9	3.1		0/4

LVOT : No significant gradient noted.

Vegetation/Thrombus: Nil

Pericardium : Normal

Other Findings : E/E':09
PASP 32+10=42 mmHg

Final Diagnosis:

Normal size cardiac chambers.
No significant regional wall motion abnormality of LV at rest.
Normal LV systolic function. LV EF~ 63%
Adequate LV diastolic compliance.
Mild PAH.

Clinical correlation please.
NOTE: Echo of Patient: MR.SANTANU MONDAL
MRN: 17650000235624
has been done on 07.04.2023 and reported on 07.04.2023



DR. IMRAN AHMED KHAN
Junior consultant

TECHNICIAN
YADAV

TB: K. DEB

Patient Name	Santanu Mondal	Requested By	SELF
MRN	17650000235624	Procedure DateTime	2023-04-07 11:25:26
Age/Sex	38Y 10M / Male	Hospital	NH-NMH & NSH

USG OF WHOLE ABDOMEN (SCREENING)

USG OBSERVATIONS:

LIVER:

Normal in size (12 cm), shape and outline. Parenchymal echotexture normal. **Lobulated anechoic cystic lesion noted in segment VIII of right lobe of liver measuring 1.7 x 2.6 cm showing posterior acousting enhancement.** No solid components noted within No intrahepatic biliary dilatation. Intrahepatic portion of IVC is normal. Porta hepatis is normal.

GALL BLADDER:

Wall thickness is normal. Luminal echoes are normal. No calculi. No pericholecystic fluid seen.

PORTAL VEIN: It appears normal.

C.B.D:Not dilated.

PANCREAS:

Tail of pancreas is obscured. Head & body of pancreas appears normal. MPD appears normal. No focal lesion.

SPLEEN:

Normal in size (8.7 cm) with normal echotexture. No focal or diffuse lesion.

KIDNEYS:

Right kidney measures 8.9 x 4.8 cm.

Left kidney measures 8.8 x 4.6 cm.

Normal in size, shape and outline. Parenchymal echotexture normal. Corticomedullary differentiation is well made out and is normal. No hydronephrosis seen in both kidneys.

URINARY BLADDER: Wall thickness normal. Luminal echoes normal. No calculi.

PROSTATE:

Measures: 4.0 x 2.4 x 2.3 cm = 12 gms. Normal in size, shape and echo pattern with well demarcated outlines. No obvious focal area of calcification or mass lesion.

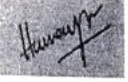
- No Ascites/ pleural effusion is seen at present.

IMPRESSION:

Present study suggests:

- **Simple cyst in segment VIII of right lobe of liver**

Not for medico legal purpose. 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. Humayun Kabir Khan
MBBS, MD(Radiodiagnosis)

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