

LABORATORY INVESTIGATION REPORT

| | |
|--------------------------------------------------------------|---------------------------------------------|
| Patient Name : Mr. Saumen Das | Age/Sex : 36 Year(s) / Male |
| UHID : NMHK.2117095 | Order Date : 26/02/2022 10:42 |
| Episode : OP | Mobile No : 8238082088 |
| Ref. Doctor : NMH | Facility : NARAYAN MEMORIAL HOSPITAL |
| Address : BL 2A 2ND FL , ,Kolkata,West Bengal ,700040 | |

Immunology

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
|------------------------|----------------------------------|-----------------------------|------------------------------|
| Sample No : 07H0058138 | Collection Date : 26/02/22 11:03 | Ack Date : 26/02/2022 11:50 | Report Date : 27/02/22 20:44 |

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP

Method - Agglutination forward & Reverse

RH TYPE

'O'

POSITIVE

End of Report



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

Checked By

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Biochemistry

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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| Sample No : 07H0058138 | Collection Date : 26/02/22 11:03 | Ack Date : 26/02/2022 11:50 | Report Date : 26/02/22 16:21 |

SERUM CREATININE

SAMPLE : SERUM

| | | | |
|----------------------------------------|---|-------|-----------|
| SERUM CREATININE | 1 | mg/dl | 0.7 - 1.2 |
| <i>Method - Jaffe Gen2 Compensated</i> | | | |

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

| | | | |
|--------------------------------------------------|-------|-------|-----------|
| TOTAL BILIRUBIN | 0.7 | mg/dl | 0 - 1.1 |
| <i>Method - Diazo Method</i> | | | |
| DIRECT BILIRUBIN | 0.2 | mg/dl | 0 - 0.2 |
| <i>Method - Diazo Method</i> | | | |
| INDIRECT BILIRUBIN | 0.50 | mg/dl | 0.2 - 0.9 |
| <i>Method - Calculated</i> | | | |
| SGPT (ALT) | 57 ▲ | U/L | 0 - 34 |
| <i>Method - IFCC Without Pyridoxal Phosphate</i> | | | |
| SGOT (AST) | 32 ▲ | U/L | 0 - 31 |
| <i>Method - IFCC Without Pyridoxal Phosphate</i> | | | |
| ALKALINE PHOSPHATASE | 150 ▲ | U/L | 53 - 128 |
| <i>Method - IFCC</i> | | | |
| TOTAL PROTEIN | 7.7 | g/dl | 6.4 - 8.2 |
| <i>Method - Biuret</i> | | | |
| ALBUMIN | 5.2 | gm/dl | 3.5 - 5.2 |
| <i>Method - Bromocresol Green</i> | | | |
| GLOBULIN | 2.5 | g/dl | 2 - 3.5 |
| <i>Method - Calculated</i> | | | |
| ALBUMIN:GLOBULIN | 2.1 | - | 1.1 - 2.5 |
| <i>Method - Calculated</i> | | | |
| GGT | 44 | U/L | 8 - 61 |
| <i>Method - Enzymatic colorimetric assay</i> | | | |

BLOOD UREA NITROGEN

| | | | |
|----------------------------|----|-------|--------|
| BLOOD UREA NITROGEN | 09 | mg/dl | 6 - 20 |
| <i>Method - Calculated</i> | | | |

LIPID PROFILE

SAMPLE : SERUM

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| | | | |
|-------------------|-----|-------|--------------------------------------------------------|
| TOTAL CHOLESTEROL | 187 | mg/dl | Desirable <200 Borderline 200-239 High >=240 |
|-------------------|-----|-------|--------------------------------------------------------|

Method - CHOD-PAP

| | | | |
|-----------------|------|-------|---------|
| HDL CHOLESTEROL | 36 ▼ | mg/dl | 40 - 60 |
|-----------------|------|-------|---------|

Method - Homogenous Enzymatic Colorimetric

| | | | |
|-----------------|-----|-------|-----------------------------------|
| LDL CHOLESTEROL | 123 | mg/dl | Optimal < 100 Borderline 130 |
|-----------------|-----|-------|-----------------------------------|

Method - Homogenous Enzymatic Colorimetric

| | | | |
|------|---------|-------|--------|
| VLDL | 32.60 ▲ | mg/dl | 0 - 30 |
|------|---------|-------|--------|

Method - CALCULATED

| | | | |
|-----------------------|------|---|--|
| CHOLESTEROL-HDL RATIO | 5.19 | - | |
|-----------------------|------|---|--|

| | | | |
|---------------|------|---|--|
| LDL-HDL RATIO | 3.42 | - | |
|---------------|------|---|--|

| | | | |
|---------------|-----|-------|---------------------------------------------------------|
| TRIGLYCERIDES | 163 | mg/dl | Desirable <150 Borderline 150 - 200 High >200 |
|---------------|-----|-------|---------------------------------------------------------|

Method - Enzymatic Colorimetric

URIC ACID

SAMPLE : SERUM

| | | | |
|-----------|-----|-------|---------|
| URIC ACID | 6.3 | mg/dl | 3.4 - 7 |
|-----------|-----|-------|---------|

Method - Enzymatic Colorimetric

SAMPLE : SERUM

| | |
|--------|-----|
| RESULT | 9.0 |
|--------|-----|

Sample No : 07H0058138A Collection Date : 26/02/22 11:03 Ack Date : 26/02/2022 11:53 Report Date : 26/02/22 16:21

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

| | | | |
|-------|-----|---|--------------------|
| HBA1C | 5.2 | % | Non-diabetic : 4-6 |
|-------|-----|---|--------------------|

Method - By HPLC

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
- HbA1c has been endorsed by clinical group & American Diabetes Association guidelines 2017, for diagnosis of Diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- 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.
- Interference of Haemoglobinopathies in HbA1c estimation.
 - For HbF > 25%, an alternate platform (fructosamine) is recommended for testing of HbA1c.
 - 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%

Patient report

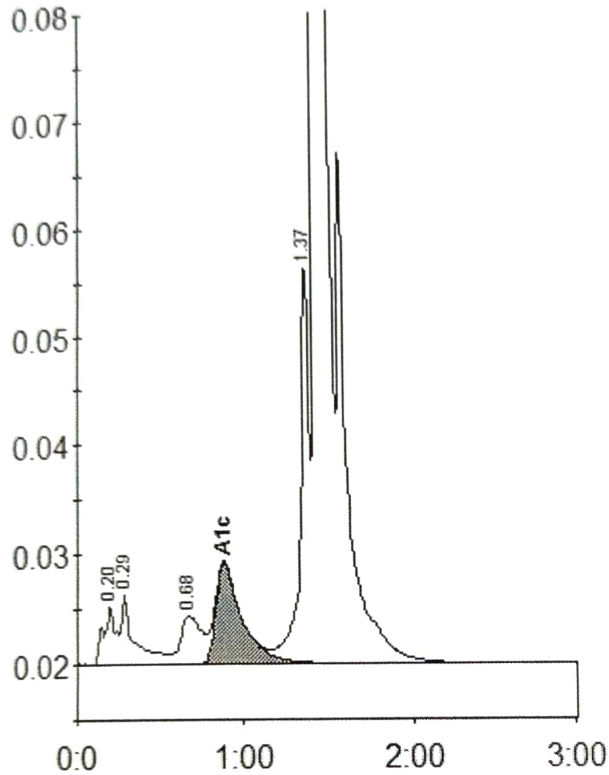
Bio-Rad
 D-10
 S/N: #DJ0A467747
 Sample ID:
 Injection date
 Injection #: 14
 Rack #: ---

DATE: 26/02/2022
 TIME: 16:00
 Software version: 4.30-2
 07H0058138A
 26/02/2022 15:20
 Method: HbA1c
 Rack position: 4

Mr. Saumen Das
 (R)NMHK.2117095 36y/ M



07H0058138A
 EDTA Wh 26-02 11:03



Peak table - ID: 07H0058138A

| Peak | R.time | Height | Area | Area % |
|-------------|--------|--------|---------|--------|
| A1a | 0.20 | 5334 | 27414 | 1.1 |
| A1b | 0.29 | 6551 | 34899 | 1.4 |
| LA1c/CHb-1 | 0.68 | 4305 | 37889 | 1.5 |
| A1c | 0.88 | 9028 | 95881 | 5.2 |
| P3 | 1.37 | 36972 | 133829 | 5.2 |
| A0 | 1.44 | 755516 | 2223396 | 87.1 |
| Total Area: | | | 2553307 | |

| Concentration: | % | mmol/mol |
|----------------|-----|----------|
| A1c | 5.2 | 33 |

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Sample No : 07H0058139B Collection Date : 26/02/22 11:04 Ack Date : 26/02/2022 11:53 Report Date : 26/02/22 16:21

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING 91 mg/dl 70 - 109

Method - Hexokinase

Sample No : 07H0058186B Collection Date : 26/02/22 14:31 Ack Date : 26/02/2022 14:47 Report Date : 26/02/22 16:21

BLOOD SUGAR(PP)

SAMPLE : PLASMA

BLOOD SUGAR PP 119 mg/dl 70 - 140

Method - Hexokinase

End of Report



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

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Hematology

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

| | | | |
|------------------------------------------------|-------------|----------------------|-------------|
| HAEMOGLOBIN (HB) | 13.8 | gm/dl | 13 - 17 |
| <i>Method - Colorimetric method (Cyn Meth)</i> | | | |
| RBC COUNT | 5.13 | x10 ⁶ /ul | 4.5 - 5.5 |
| <i>Method - Electrical Impedance Method</i> | | | |
| TOTAL WBC COUNT | 6.1 | 10 ³ /cmm | 4 - 10 |
| <i>Method - Electrical Impedance Method</i> | | | |
| PLATELET COUNT | 210 | 10 ³ /cmm | 150 - 410 |
| <i>Method - Electrical Impedance Method</i> | | | |
| PCV | 44 | % | 40 - 50 |
| <i>Method - RBC pulse ht. detection method</i> | | | |
| MCV | 86 | fl | 83 - 101 |
| <i>Method - calculated</i> | | | |
| MCH | 27 | pg | 27 - 32 |
| <i>Method - Calculated</i> | | | |
| MCHC | 31 ▼ | gm/dl | 31.5 - 34.5 |
| <i>Method - Calculated</i> | | | |
| ESR | 13 ▲ | % | 0 - 10 |
| <i>Method - Modified Westergren Method</i> | | | |

DIFFERENTIAL COUNT

| | | | |
|----------------------------|----|---|---------|
| NEUTROPHILS | 69 | % | 40 - 80 |
| <i>Method - Microscopy</i> | | | |
| LYMPHOCYTES | 27 | % | 20 - 40 |
| <i>Method - Microscopy</i> | | | |
| MONOCYTES | 02 | % | 2 - 10 |
| <i>Method - Microscopy</i> | | | |
| EOSINOPHILS | 02 | % | 1 - 6 |
| <i>Method - Microscopy</i> | | | |
| BASOPHILS | 00 | % | 0 - 2 |
| <i>Method - Microscopy</i> | | | |

PERIPHERAL BLOOD SMEAR

RBC Normocytic normochromic
WBC Within normal limits

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PLATELET

Adequate

End of Report



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

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Immunoassay

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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| Sample No : 07H0058138 | Collection Date : 26/02/22 11:03 | Ack Date : 26/02/2022 11:50 | Report Date : 26/02/22 17:45 |

THYROID FUNCTION TEST

SAMPLE : SERUM

| | | | |
|----------------------------------|------|--------|-----------------------------------------------------------------------------------------------|
| T3 <i>Method - ECLIA</i> | 1.14 | ng/ml | 0.6 - 1.8 |
| T4 <i>Method - ECLIA</i> | 8.06 | ug/dL | 5.4 - 11.7 |
| TSH <i>Method - ECLIA</i> | 2.86 | uIU/ml | Adult Male – 0.27-5.50 Adult Female – 0.27-5.50 Newborns - <25 Upto 12 years – 0.3-5 |

Method - ECLIA

Interpretations:

1. For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
2. 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 (Intralipid < 1500 mg/dL), biotin (<102 nmol/L or < 25 ng/ml), IgG < 2 g/dL and IgM < 0.5 g/dL)
3. There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
4. 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.
5. 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).
6. 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 (Intralipid< 1800 mg/dl) and biotin (< 123 nmol or < 30 ng/ml).

End of Report



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

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Clinical Pathology

| INVESTIGATION | RESULTS | UNITS | BIOLOGICAL REF RANGE |
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| Sample No : 07H0058138 | Collection Date : 26/02/22 11:03 | Ack Date : 26/02/2022 17:46 | Report Date : 27/02/22 20:48 |

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

| | | | |
|------------------|------------|----|---------------|
| VOLUME | 30 | ml | |
| COLOUR | STRAW | | |
| APPEARANCE | CLEAR | | |
| SPECIFIC GRAVITY | 1.010 | | 1.010 - 1.030 |
| REACTION(pH) | ACIDIC 6.5 | | |

CHEMICAL EXAMINATION

| | | |
|---------------|--------|--------|
| SUGAR | ABSENT | ABSENT |
| ALBUMIN. | ABSENT | ABSENT |
| BLOOD | ABSENT | ABSENT |
| KETONE | ABSENT | ABSENT |
| BILE SALT | ABSENT | ABSENT |
| BILE PIGMENTS | ABSENT | ABSENT |

MICROSCOPIC EXAMINATION

| | | |
|------------------|-----------|---------|
| PUS CELLS | 2-3 / HPF | <5/HPF |
| EPITHELIAL CELLS | 1-2 / HPF | <20/HPF |
| RBC | NIL | |
| CAST | ABSENT | ABSENT |
| CRYSTAL | ABSENT | ABSENT |

Please correlate clinically.

End of Report



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

Checked By

DIAGNOSTICS REPORT

| | | | |
|--------------|-----------------------------------------------|-------------|-----------------------------|
| Patient Name | : Mr. Saumen Das | Order Date | : 26/02/2022 10:42 |
| Age/Sex | : 36 Year(s)/Male | Report Date | : 26/02/2022 14:01 |
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USG WHOLE ABDOMEN

LIVER : Liver is normal in size. Liver measures 13 cm. Parenchymal echotexture is normal. Intrahepatic biliary radicles & hepatic veins are not dilated. No focal mass lesion seen.

PORTA :PV : Normal. PV measures 1.0 cm.

CBD : Normal. CBD measures 0.4 cm. No calculus or SOL seen within its visualised part.

GALL BLADDER :Gall bladder is well distended. Wall thickness is normal. No calculus or SOL seen. Ultrasonographic Murphy's sign is negative.

PANCREAS :Pancreas is normal in size. **Parenchymal echogenicity is increased.** Pancreatic duct is not dilated. No focal SOL / peripancreatic collection seen.

SPLEEN :Spleen is normal in size. Spleen measures : 10.5 cm. Parenchyma shows normal homogeneous pattern. No focal SOL seen. Splenic vein is normal.

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

Right kidney measures : 10.1 cm & Left kidney measures : 10.6 cm.

URETERS : Not seen dilated.



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URINARY BLADDER : Urinary bladder is normal in contour, outline and distension. Walls are of normal thickness. No vesical calculus or mass lesion seen.

PROSTATE : Prostate is normal size. Capsule appears intact. No focal lesion seen. Prostate measures 3.5 cm x 3.8 cm x 2.1 cm. It weigh approx 15.5 gm.

PERITONEUM : No free fluid seen.

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

IMPRESSION : Fatty pancreas.



Dr.G.MITRA SENGUPTA,
MBBS,,DCH.CBET(WB)DNB -1(RD)

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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 normal.

No obvious bony abnormality is seen.



Dr. MADHUSHREE RAY NASKAR ,
MBBS,DMRD

Consultant Radiologist

RegNo: 57032

DIAGNOSTICS REPORT

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ELECTROCARDIOGRAM REPORT (ECG)

| | |
|-------------------|------------------------|
| HR | : 70 bpm |
| Rhythm | : Sinus |
| P wave | : Normal |
| PR Interval | : 166 msec |
| QRS axis | : Normal (51 Degree) |
| QRS duration | : 102 msec |
| QRS configuration | : Normal |
| T wave | : Non specific changes |
| ST segment | : Non specific changes |
| QTc | : 374 msec |
| QT | : 344 msec |

IMPRESSION:

- Sinus rhythm. Normal QRS axis.
 - Non specific ST-T changes.
- Clinical correlation please.



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

Board Certified Comprehensive
Echocardiographer (USA)

SAUMEN DRS

2117095

Male

36 years / kg

HR 70/min

SINUS RHYTHM
NORMAL ECG

Intervals:
RR 852 ms
P 112 ms
PR 166 ms
QR5 102 ms
QT 344 ms
QTc 374 ms
(Bazett)

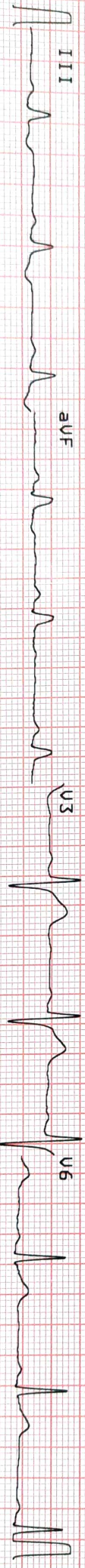
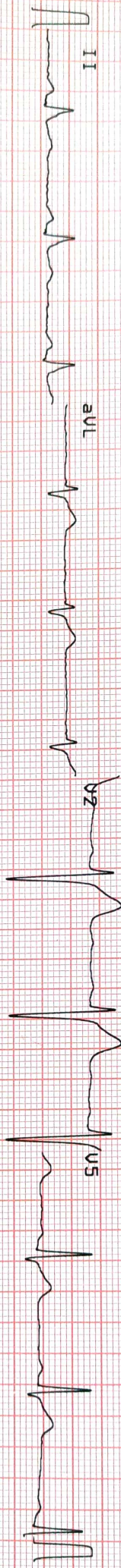
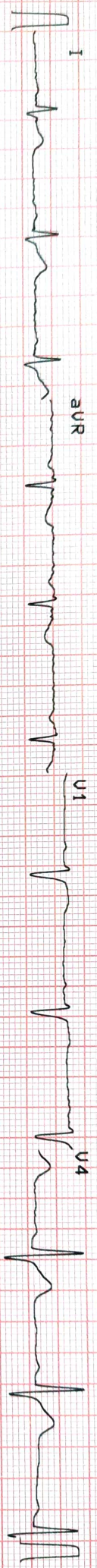
Axis:
P 64 °
QR5 51 °
T 7 °
P (II) 0.12 mV
S (V1) -0.71 mV
R (V5) 0.97 mV
Sokol. 2.60 mV

6.02

UNCONFIRMED REPORT

10 mm/mV

10 mm/mV



mm/mV

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2D ECHOCARDIOGRAPHY WITH M-MODE

MEASUREMENTS

2D and M-Mode :

| | | | |
|----------|-------|--------------------|-------|
| IVS (d) | 11 mm | Aorta (at sinuses) | 24 mm |
| LVID (d) | 49 mm | LA diameter | 35 mm |
| LVPW (d) | 11 mm | RVID (d) - basal | 15 mm |
| LVID (s) | 29 mm | TAPSE | 24 mm |
| LVEF | 62 % | | |

Estimated PASP = 22 mmHg

FINDINGS

Left Ventricle :

Cavity size : Normal.

Wall thickness : Normal.

Segmental wall motion : No abnormality found.

Global systolic function : Normal (EF = 62%)

Diastolic function : Normal.

Left Atrium :Normal sized; no clot in body of appendage.

Right Ventricle and Right Atrium :Normal sized; normal RV systolic function.

Mitral Valve :Normal leaflets, good excursion, normal subvalvular apparatus. No regurgitation / No MS.

Aortic valve :Structurally normal, trileaflet, normal motion, no regurgitation.

Pulmonary Valve :Normal structure, adequate opening.

Tricuspid Valve :Normal structure, normal excursion. Trivial TR. TR gradient = 17 mmHg.

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| Ref. Doctor | : NMH | Facility | : NARAYAN MEMORIAL HOSPITAL |
| Address | : BL 2A 2ND FL, ,Kolkata, West Bengal, 700040 | Mobile | : 8238082088 |

Interartial and Interventricular Septum :No breech could be seen.

Aorta :Normal sized root and proximal aorta.

Pulmonary Artery :Normal, no pulmonary arterial hypertension.

Pericardium :Normal, no effusion.

Inferior Vena Cava :IVC normal diameter, > 50% respiratory variation.

Others :No thrombus, mass, vegetation seen.

IMPRESSION:

Status of Patient :

- * No regional wall motion abnormality at rest.
- * Good LV systolic function (EF = 62 %).
- * Good RV systolic function (TAPSE = 24 mm).
- * Normal valve morphology.
- * Normal LV diastolic function.
- * No pericardial effusion.
- * No pulmonary arterial hypertension.



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

Board Certified Comprehensive
Echocardiographer (USA)