

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 10:27 AM Reported On : 09/03/2023 02:13 PM


Barcode : 802303090448 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.85	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.18	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.67	-	-
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)	1.45	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	38	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	49	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	157 H	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	16	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)	0.86	mg/dL	0.66-1.25
eGFR	96.2	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	11.13	-	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	143	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)	167	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	194	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	41	mg/dL	40.0-60.0
Non-HDL Cholesterol	126.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	92.59	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190

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VLDL Cholesterol (Calculated)	38.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	4.1	-	-
Prostate Specific Antigen (PSA) (CLIA)	0.429	ng/mL	0.0-2.5

--End of Report--



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



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

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
(Lipid Profile, -> Auto Authorized)
(Serum Sodium, -> 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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Barcode : 802303090448 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.26	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.43	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	2.246	uIU/ml	0.4001-4.049

--End of Report--

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Clinical Biochemist MBBS, MD

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Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 10:28 AM Reported On : 09/03/2023 12:15 PM

Barcode : 802303090450 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.2	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 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-

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

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Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 10:26 AM Reported On : 09/03/2023 12:40 PM

Barcode : 802303090449 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	94	mg/dL	Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019

--End of Report--

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

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

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- Results relate to the sample only.
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(Fasting Blood Sugar (FBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

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Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 11:48 AM Reported On : 09/03/2023 02:06 PM

Barcode : BR2303090052 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

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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Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 10:32 AM Reported On : 09/03/2023 12:23 PM

Barcode : 822303090043 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY**PHYSICAL EXAMINATION**

Volume	30	ml	-
Colour	Light-Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

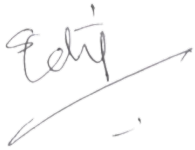
pH(Reaction) (Mixed PH Indicator)	5.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.013	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Negative	-	Negative
Ketone Bodies (Legal's Method)	Negative	-	Negative
Bile Salts (Dual Wavelength 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)	Trace	-	-
Nitrite (Modified Griess Reaction)	Negative	-	Negative

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MICROSCOPIC EXAMINATION

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

--End of Report--



Dr. Shanaz Latif
MD, Pathology
Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 10:25 AM Reported On : 09/03/2023 10:50 AM

Barcode : 812303090273 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	14.4	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.97	millions/ μ L	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	43.0	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	86.5	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.0	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	14.1 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	122 L	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	12.1 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	6.1	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	57.5	%	40.0-75.0
Lymphocytes (VCSn Technology)	33.4	%	20.0-40.0
Monocytes (VCSn Technology)	6.6	%	2.0-10.0
Eosinophils (VCSn Technology)	1.9	%	1.0-6.0

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Basophils (VCSn Technology)	0.6	%	0.0-2.0
NRBC (VCSn Technology)	0.0	/100 WBC	-
Absolute Neutrophil Count (Calculated)	3.51	$10^3/\mu\text{L}$	1.8-7.8
Absolute Lymphocyte Count (Calculated)	2.04	$10^3/\mu\text{L}$	1.0-4.8
Absolute Monocyte Count (Calculated)	0.41	$10^3/\mu\text{L}$	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.12	$10^3/\mu\text{L}$	0.0-0.45
Absolute Basophil Count (Calculated)	0.04	$10^3/\mu\text{L}$	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

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MC - 2803



DEPARTMENT OF LABORATORY MEDICINE

Final Report

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Collected On : 09/03/2023 10:04 AM Received On : 09/03/2023 10:25 AM Reported On : 09/03/2023 12:38 PM

Barcode : 812303090272 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	24 H	mm/1hr	0.0-10.0

--End of Report--

Dr. Shanaz Latif
MD, Pathology
Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Pradip Sarkar MRN : 17510001168216 Gender/Age : MALE , 45y (03/01/1978)

Collected On : 09/03/2023 02:03 PM Received On : 09/03/2023 02:12 PM Reported On : 09/03/2023 03:42 PM

Barcode : 802303090800 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9836758083

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	126	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

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

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(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Mr Pradip Sarkar
GENDER/AGE : Male, 45 Years
LOCATION : -

PATIENT MRN : 17510001168216
PROCEDURE DATE : 09/03/2023 01:13 PM
REQUESTED BY : EXTERNAL



IMPRESSION

- NO SIGNIFICANT ECHOCARDIOGRAPHIC ABNORMALITY DETECTED.

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: 66%. NORMAL DIASTOLIC FLOW PATTERN.
RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION

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 PRADIP SARKAR (17510001168216)

DR. DEBIKA CHATTERJEE
HEAD OF DEPARTMENT & SENIOR CONSULTANT
ECHOCARDIOGRAPHY MBBS, MD

POMPA BISWAS
TECHNICIAN

09/03/2023 01:13 PM

PREPARED BY : NITA PAUL(308573)

PREPARED ON

: 09/03/2023 02:33 PM

GENERATED BY : MADHUPARNA DASGUPTA(333433)

GENERATED ON

: 22/03/2023 09:51 AM

Patient Name	Pradip Sarkar	Requested By	EXTERNAL
MRN	17510001168216	Procedure DateTime	2023-03-09 11:50:46
Age/Sex	45Y 2M/Male	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

Enlarged in size and moderately increase in echogenicity w. Intrahepatic biliary radicles not dilated No focal SOL is seen.

PORTAL VEIN:

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

GALL BLADDER:

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

CBD:

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

SPLEEN:

Normal in size measuring 9.3 cm and echogenicity. No focal SOL is seen.

PANCREAS:

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

KIDNEYS:

Both kidneys are normal in size, position and echogenicity. Corticomedullary differentiation is maintained. No hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 10.8 cm and 10.4 cm respectively.

URINARY BLADDER:

Normal in capacity. Wall is not thickened. No intraluminal calculus or mass is seen. Post void residual urine insignificant.

PROSTATE:

Normal in size measuring approx. 2.9 x 3.0 x 3.2 cm (14 gms), homogenous in echotexture and smooth in outline.

IMPRESSION:

- Fatty liver (grade II) and hepatomegaly.

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

Patient Name	Pradip Sarkar	Requested By	
MRN	17510001168216	Procedure DateTime	2023-03-09 11:14:12
Age/Sex	45Y 2M/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.
- The costo-phrenic angles are clear.
- No significant lung parenchymal lesion is seen.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

IMPRESSION:

- **No significant radiological abnormality detected.**

NOT FOR MEDICO LEGAL PURPOSES

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Dr. Sarbari Chatterjee

Consultant Radiologist

* **This is a digitally signed valid document.** Reported Date/Time: 2023-03-09 19:20:39