

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Provash Sikdar MRN : 17510001168817 Gender/Age : MALE , 52y (12/03/1970)

Collected On : 11/03/2023 10:10 AM Received On : 11/03/2023 10:38 AM Reported On : 11/03/2023 12:42 PM

Barcode : 802303110419 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

CLINICAL CHEMISTRY


Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.82	mg/dL	0.66-1.25
eGFR	98.7	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	8.54 L	-	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	140	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.3	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	230 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	181	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	52	mg/dL	40.0-60.0
Non-HDL Cholesterol	178.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	135.13 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	36.2	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	4.5	-	-
Prostate Specific Antigen (PSA) (CLIA)	0.938	ng/mL	0.0-3.5

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LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	1.30	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.36	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.94	-	-
Total Protein (Biuret Method)	8.20	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.90	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.3	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.49	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	26	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	22	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	80	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	18	U/L	15.0-73.0

--End of Report--



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



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

Note

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



Patient Name : Mr Provash Sikdar MRN : 17510001168817 Gender/Age : MALE , 52y (12/03/1970)

- Kindly correlate clinically.
 - (LFT, -> Auto Authorized)
 - (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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Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.27	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.46	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.655	uIU/ml	0.4001-4.049

--End of Report--

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Biochemist M.Sc , Ph. D

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- (-> Auto Authorized)



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Patient Name : Mr Provash Sikdar MRN : 17510001168817 Gender/Age : MALE , 52y (12/03/1970)

Collected On : 11/03/2023 10:10 AM Received On : 11/03/2023 10:39 AM Reported On : 11/03/2023 11:51 AM

Barcode : 802303110421 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HbA1C			
HbA1c (HPLC)	5.1	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)

HPLC pattern shows variant window, which may interfere with HbA1C value. In such cases, HbA1C is not a good indicator of diabetic control. Alternative method of testing is suggested. Hb HPLC is advised for characterization of the variants.

Estimated Average Glucose	-	-	-
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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
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Biochemist M.Sc , Ph. D

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Collected On : 11/03/2023 10:10 AM Received On : 11/03/2023 10:42 AM Reported On : 11/03/2023 12:13 PM

Barcode : 812303110281 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	20 H	mm/1hr	0.0-10.0

--End of Report--

Dr. Sanjib Kumar Pattari
MD, Pathology
Consultant Pathology MBBS, MD

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Patient Name : Mr Provash Sikdar MRN : 17510001168817 Gender/Age : MALE , 52y (12/03/1970)

Collected On : 11/03/2023 10:10 AM Received On : 11/03/2023 10:41 AM Reported On : 11/03/2023 12:05 PM

Barcode : 812303110282 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	12.7 L	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	5.43	millions/ μ L	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.8 L	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	73.3 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	23.4 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.0	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	14.9 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	150	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	12.3 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.1	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	63.3	%	40.0-75.0
Lymphocytes (VCSn Technology)	27.6	%	20.0-40.0
Monocytes (VCSn Technology)	4.4	%	2.0-10.0
Eosinophils (VCSn Technology)	4.4	%	1.0-6.0

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Basophils (VCSn Technology)	0.3	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	4.49	$10^3/\mu\text{L}$	1.8-7.8
Absolute Lymphocyte Count (Calculated)	1.96	$10^3/\mu\text{L}$	1.0-4.8
Absolute Monocyte Count (Calculated)	0.31	$10^3/\mu\text{L}$	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.31	$10^3/\mu\text{L}$	0.0-0.45
Absolute Basophil Count (Calculated)	0.02	$10^3/\mu\text{L}$	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. Moumita Panja
DNB, Pathology
Consultant Pathologist

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Collected On : 11/03/2023 10:10 AM Received On : 11/03/2023 11:07 AM Reported On : 11/03/2023 12:28 PM

Barcode : BR2303110035 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

IMMUNOHAEMATOLOGY

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	A	-
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 : 11/03/2023 10:10 AM Received On : 11/03/2023 10:38 AM Reported On : 11/03/2023 11:44 AM

Barcode : 802303110420 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	98	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

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

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(Fasting Blood Sugar (FBS) -> Auto Authorized)



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Patient Name : Mr Provash Sikdar MRN : 17510001168817 Gender/Age : MALE , 52y (12/03/1970)

Collected On : 11/03/2023 02:34 PM Received On : 11/03/2023 02:59 PM Reported On : 11/03/2023 03:53 PM

Barcode : 802303110763 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	119	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. Sujata Ghosh
PhD, Biochemistry
Biochemist M.Sc , Ph. D

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

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



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Patient Name : Mr Provash Sikdar MRN : 17510001168817 Gender/Age : MALE , 52y (12/03/1970)

Collected On : 11/03/2023 10:10 AM Received On : 11/03/2023 10:42 AM Reported On : 11/03/2023 01:11 PM

Barcode : 822303110037 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7003781584

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

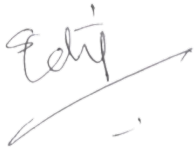
pH(Reaction) (Mixed PH Indicator)	6.5	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.009	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Negative	-	Negative
Ketone Bodies (Legal's Method)	Negative	-	Negative
Bile Salts (Dual Wavelength 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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ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Mr Provash Sikdar
GENDER/AGE : Male, 53 Years
LOCATION : -

PATIENT MRN : 17510001168817
PROCEDURE DATE : 11/03/2023 01:53 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 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 PROVASH SIKDAR (17510001168817)

DR. PRASUN HALDER
ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC

SOVA DAS
ASSISTANT MANAGER

11/03/2023 01:53 PM

PREPARED BY	: NITA PAUL(308573)	PREPARED ON	: 11/03/2023 02:41 PM
GENERATED BY	: MADHUPARNA DASGUPTA(333433)	GENERATED ON	: 22/03/2023 09:37 AM

Patient Name	Provash Sikdar	Requested By	EXTERNAL
MRN	17510001168817	Procedure DateTime	2023-03-11 12:28:30
Age/Sex	52Y 11M/Male	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

Normal in size and echogenicity. No focal SOL is seen. Intrahepatic biliary radicles are not dilated.

PORTAL VEIN:

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

GALL BLADDER:

Not visualised (H/O Operation, verbal information, No OT note not available at the time of scan) .

CBD:

Common duct is not dilated at porta (4 mm). No intraluminal calculus is seen.

SPLEEN:

Normal in size measuring 9.6 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.

5 mm acoustic shadowing calculus seen in left upper calyx.

No hydronephrosis or mass is seen.

Right kidney and left kidney measures 9.5 cm and 9.3 cm respectively.

URINARY BLADDER:

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

Post void residual urine is insignificant.

PROSTATE:

Measuring approx. 3.0 x 4.0 x 3.4 cm (21 gms), homogenous in echotexture and smooth in outline.

IMPRESSION:

- Left renal calculus.
- Approx 21 gms prostate.

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.

Assist By:Sumitra

A handwritten signature in black ink, consisting of stylized initials 'S' and 'B' followed by three dots.

Dr. Suranjana Bhattacharjee

Consultant Sonologist

Patient Name	Provash Sikdar	Requested By	EXTERNAL
MRN	17510001168817	Procedure DateTime	2023-03-11 11:19:10
Age/Sex	52Y 11M/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.
- The lung fields and bronchovascular markings appear normal.
- Both the diaphragmatic domes appear normal.

IMPRESSION:

- **No significant radiological abnormality detected.**

REPORTED BY DR. DIPTI D VAGHELA

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Dr. Gobinda Pramanick

MD(AIIMS, NEW DELHI), DM(PGI, CHANDIGARH)
CONSULTANT INTERVENTIONAL NEURORADIOLOGIST
Registration No: 61660(WBMC)

* ***This is a digitally signed valid document.*** Reported Date/Time: 2023-03-11 14:13:58