

Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:56 AM Reported On: 23/09/2023 11:54 AM

Barcode: BR2309230042 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

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

Note

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





GISTIN/UIN: 19AABCN1685J1Z5



Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:54 AM Reported On: 23/09/2023 12:13 PM

Barcode: 802309230450 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.99	mg/dL	0.66-1.25
eGFR	81.4	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	13.58	mg/dL	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	138	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)	219 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	110	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	35 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	184.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	143.69 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	22.0	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	6.3	-	-
Prostate Specific Antigen (PSA) (CLIA)	0.385	ng/mL	0.0-2.5

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Rabindranath Tagore International Institute of Cardiac Sciences

(A unit of Narayana Hrudayalaya Limited)

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GISTIN/UIN: 19AABCN1685J1Z5



Emergencies **99033 35544**



Patient Name: Mr Pritthish Dutta MRN: 175100012	018012 Gender	/Λσο·ΜΛΙΕ //6ν/29/12/	1976)
	110312 Gender/	ASC . WALL , 409 (20/12)	1970]
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.78	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.38	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.39	-	_
Total Protein (Biuret Method)	7.60	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.30	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.4	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.31	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	31	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	26	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	99	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	20	U/L	15.0-73.0

--End of Report-

Dr. Debasree Biswas MD, Biochemistry Clinical Biochemist MBBS, MD Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

Alphosh

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GISTIN/UIN: 19AABCN1685J1Z5



Unit of Narayana Hrudayalaya Limited

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

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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Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:54 AM Reported On: 23/09/2023 12:19 PM

Barcode: 802309230450 Specimen: Serum Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	0.884 L	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	10.1	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.474	uIU/mI	0.4001-4.049

-- End of Report-

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

Alphosh

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Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:55 AM Reported On: 23/09/2023 11:41 AM

Barcode: 812309230308 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	13.9	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	5.39	millions/ μL	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	44.3	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	82.1 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	25.8 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.3 L	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	16.3 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	155	10 ³ /μL	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	12.1 H	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.5	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	67.3	%	40.0-75.0
Lymphocytes (VCSn Technology)	20.9	%	20.0-40.0
Monocytes (VCSn Technology)	8.0	%	2.0-10.0
Eosinophils (VCSn Technology)	3.1	%	1.0-6.0

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Patient Name: Mr Pritthish Dutta MRN: 1751000	01218912	Gender/Age: MALE, 46y (28/12	/1976)
Basophils (VCSn Technology)	0.7	%	0.0-2.0
NRBC (VCSn Technology)	0.1	/100 WBC	-
Absolute Neutrophil Count (Calculated)	5.05	$10^3/\mu$ L	1.8-7.8
Absolute Lymphocyte Count (Calculated)	1.57	10 ³ /μL	1.0-4.8
Absolute Monocyte Count (Calculated)	0.6	$10^3/\mu$ L	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.23	$10^3/\mu$ L	0.0-0.45
Absolute Basophil Count (Calculated)	0.05	10 ³ /μL	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. Sanjib Kumar Pattari

MD, Pathology

Consultant Pathology MBBS, MD. Reg No: 53635 (WBMC)

Note

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- Results relate to the sample only.
- Kindly correlate clinically.





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ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME: Mr Pritthish DuttaPATIENT MRN: 17510001218912GENDER/AGE: Male, 46 YearsPROCEDURE DATE: 23/09/2023 02:51 PM

LOCATION :- REQUESTED BY : EXTERNAL

• 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.

Dramm I hele

DR. PRASUN HALDER ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC

RUPA ANTONY TECHNICIAN

23/09/2023 02:51 PM

 PREPARED BY
 : SARMISTHA PRAMANIK(335772)
 PREPARED ON
 : 23/09/2023 03:38 PM

 GENERATED BY
 : PAROMITA SARKAR(329190)
 GENERATED ON
 : 23/09/2023 04:17 PM



Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:55 AM Reported On: 23/09/2023 12:54 PM

Barcode: 812309230307 Specimen: Whole Blood - ESR Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

HAEMATOLOGY LAB

Test Result Unit Biological Reference Interval

Erythrocyte Sedimentation Rate (ESR) 18 H mm/1hr 0.0-10.0

(Modified Westergren Method)

-- End of Report-

Dr. Shanaz Latif MD, Pathology

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

Note

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- Kindly correlate clinically.







Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:54 AM Reported On: 23/09/2023 11:36 AM

Barcode: 802309230451 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

CLINICAL CHEMISTRY

Test Result Unit **Biological Reference Interval** mg/dL 99 Normal: 70-99 Fasting Blood Sugar (FBS) (Glucose Oxidase,

Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019

-- End of Report-

Dr. Sujata Ghosh PhD, Biochemistry

Biochemist M.Sc, Ph. D

Note

Peroxidase)

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically. (Fasting Blood Sugar (FBS) -> Auto Authorized)



Dr. Debasree Biswas

MD, Biochemistry





Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 10:26 AM Received On: 23/09/2023 10:54 AM Reported On: 23/09/2023 11:22 AM

Barcode: 802309230452 Specimen: Whole Blood Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.4	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	108.29	-	-

Interpretation:

- 1. 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.
- 2. 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.
- 3. 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

Alphosh

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E-mail: email.rtiics@narayanahealth.org | Web: www.narayanahealth.org

GISTIN/UIN: 19AABCN1685J1Z5



Emergencies **99033 35544**



ADA standards 2019

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name: Mr Pritthish Dutta MRN: 17510001218912 Gender/Age: MALE, 46y (28/12/1976)

Collected On: 23/09/2023 02:30 PM Received On: 23/09/2023 02:40 PM Reported On: 23/09/2023 03:18 PM

Barcode: 802309230663 Specimen: Plasma Consultant: EXTERNAL(EXTERNAL)

Sample adequacy: Satisfactory Visit No: OP-001 Patient Mobile No: 9618419001

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

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	Pritthish Dutta	Requested By	EXTERNAL
MRN	17510001218912	Procedure DateTime	2023-09-23 14:57:05
Age/Sex	46Y 8M/Male	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

It is normal in size and echogenicity. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

PORTAL VEIN:

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus.

GALL BLADDER:

It is optimally distended. No calculus or sludge is seen within it. The wall is not thickened.

CBD:

The common duct is not dilated at porta. No intraluminal calculus is seen.

SPLEEN:

It is normal in size measuring 8.9 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

PANCREAS:

It is normal in size and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

KIDNEYS:

Both kidneys are normal in size, position and echogenicity. The corticomedullary differentiation is maintained.

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No hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 10.1 cm and 10.1 cm respectively.

URINARY BLADDER:

It is normal in capacity. The wall is not thickened. No intraluminal calculus or mass is seen.

PROSTATE:

It is normal in size measuring $3.0 \times 2.7 \times 2.6 \text{ cm}$ (Weight = 11 gms). It shows a homogenous echotexture and smooth outline.

IMPRESSION:

• Essentially normal study.

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 :Arpita

Dr. Ashish Kumar Consultant Sonologist

* This is a digitally signed valid document. Reported Date/Time: 2023-09-23 15:02:58