



ভারতীয় বিশিষ্ট পরিচয় প্রাধিকরণ  
 ভারত সরকার  
 Unique Identification Authority of India  
 Government of India

তালিকাভুক্তির নম্বর/ Enrolment No.: 2017/80720/77016

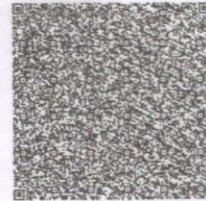
To  
 মৌসুমী দত্ত  
 Mousumi Dutta  
 W/O: Debgopal Dutta  
 Ghoradanga  
 Purba para  
 Hosenpur  
 Hossainpur  
 Barddhaman West Bengal - 713125  
 8370979042

Download Date: 03/04/2018

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আপনার আধার সংখ্যা / Your Aadhaar No. :

3409 3611 4330

আমার আধার, আমার পরিচয়



ভারত সরকার  
 Government of India



মৌসুমী দত্ত  
 Mousumi Dutta  
 জন্মতারিখ/DOB: 04/02/1991  
 মহিলা/ FEMALE

3409 3611 4330



আমার আধার, আমার পরিচয়

Mousumi Dutta



18 Dec 2021 9:46:57 am



REDMI NOTE 6 PRO  
MI DUAL CAMERA

2021/12/18 12:45

|                          |                  |                  |
|--------------------------|------------------|------------------|
| NAME: MRS. MOUSUMI DUTTA | AGE: 30YRS       | SEX: FEMALE      |
| REF BY: SELF (CORPORATE) | MR NO: FSIN-0000 | DATE: 18/12/2021 |

### ULTRASOUND OF WHOLE ABDOMEN

**LIVER:** Liver is **enlarged** in size (**16.79cm**) normal in shape outline and echotexture. The intrahepatic tubular structures are normal. No focal area of alterea echogenicity is noted. The porta hepatis is normal. The common bile duct measures (**5mm**) in diameter. The portal vein measures (**10mm**) at porta.

**GALL BLADDER:** Operated.

**SPLEEN:** It is normal in size (**9.99cm**), Shape, Outline and echotexture. No parenchymal lesion is noted.

**PANCREAS:** It is normal in size, Shape, Outline and echotexture. Pancreatic duct is not dilated.

**RIGHT KIDNEY:** kidney are normal in position, size, shape, outline and echotexture. The cortico medullary differentiation is maintained. No calculus or hydronephrosis is seen.

**RIGHT KIDNEY:** measures – (**9.52cm**).

**LEFT KIDNEY:** kidney are normal in position, size, shape, outline and echotexture. The cortico medullary differentiation is maintained. No calculus or hydronephrosis is seen.

**LEFT KIDNEY:** measures – (**9.86cm**).

**URINARY BLADDER:** It is well distended with normal wall thickness. No calculus or mass is seen within the urinary bladder.

**UTERUS:** It is **Bulky** in size, shape and echotexture. It is anteverted. No SOL is seen in the myometrium. Uterine cavity is empty. Endometrial thickness is normal. Uterus measures- (**10.79cmX4.95cmX3.61cm**). Endometrial thickness is normal measures- **0.65cm**.

**BOTH OVARIES:** Both ovaries normal in size, shape, outline and echotexture.

Right ovary measures- (**2.61cmX0.92cm**)

Left ovary measures- (**1.94cmX1.92cm**). Cystic changes left ovary.

#### IMPRESSION:

- HEPATOMEGALLY.
- CYSTIC CHANGES LEFT OVARY.
- BULKY UTERUS.
- GB OPERATED.

**DR. A.K. ROY**

M.B.B.S, Dip BMSc, DTM&H (Cal)  
Certificate on CEBT Abdomino Pelvic, USG(WBHSU)

**DEPARTMENT OF RADIOLOGY X-RAY OF CHEST (PA) VIEW**

MR. NO- FSIN.0000000

SEX-FEMALE

NAME: -MOUSUMI DUTTA

EXAMINATION DATE-18/12/2021

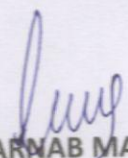
AGE-30 YRS

REPORT DATE-18/12/2021

REF DR. SELF


**FINDINGS:**

- Bilateral lung fields are clear.
- Tracheal shadow is in the midline.
- Bilateral CP angle are clear
- Both hilum appear normal .
- CTR appears normal .
- No definite bone fracture is noted.

  
**DR. ARNAB MANDAL**

MD, Physician, PGDUS (Delhi) CEBT-USG (WBUHS KOLKATA)  
Fellow of Jefferson Ultrasound Radiology and Education Institute  
Philadelphia Ex-Radiology Resident (S.E.Railway)  
Regd No:72022(WBMC)

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Patient Name: MRS. MOUSUMI DUTTA  
UHID/MR No.: FSIN.0000013769  
Visit Date: 18.12.2021  
Sample collected on: 18.12.2021  
Ref Doctor: SELF

Age/Gender: 30 Years / Female  
OP Visit No.: FSINOPV16813  
Reported on: 18.12.2021  
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

| <u>TEST NAME</u><br><u>UNIT</u> | <u>RESULT</u> | <u>BIOLOGICAL REFERENCE</u> |
|---------------------------------|---------------|-----------------------------|
| BLOOD GROUP                     | "B"           |                             |
| RH TYPE                         | POSITIVE(+Ve) |                             |

Results are to be correlate clinically.

\*\*\* End of the report\*\*\*

Lab Technician/Technologist  
Madhumita\_Biswas

  
Dr. BIPARNAK HALDAR  
MBBS, MD(PATHOLOGY)  
CONSULTANT PATHOLOGIST

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UHID/MR No.: FSIN.0000013769  
Visit Date: 18.12.2021  
Sample collected on: 18.12.2021  
Ref Doctor: SELF

Age/Gender: 50 Years / Female  
OP Visit No.: FSINOPV16813  
Reported on: 18.12.2021  
Specimen: BLOOD

DEPARTMENT OF HAEMATOLOGY

| TEST NAME                    | RESULT | BIOLOGICAL REFERENCE           | UNIT           |
|------------------------------|--------|--------------------------------|----------------|
| <b>COMPLETE BLOOD COUNT</b>  |        |                                |                |
| HAEMOGLOBIN                  | 12.9   | Female 12-15<br>Male 13-16     | gm%            |
| Method: Non cyanideSis Based |        |                                |                |
| RBC COUNT                    | 4.49   | Female 3.8-4.8<br>Male 4.5-5.5 | mill/Cumm      |
| Method: Electrical Impedence |        |                                |                |
| HEMATPOCRIT (PCV)            | 39.6   | Female 36-46<br>Male 42-52     | %              |
| MCV                          | 88.2   | 83-101 fl                      | fl             |
| Method: Calculated           |        |                                |                |
| MCH                          | 28.9   | 27-32 pg                       | pg             |
| Method: Calculated           |        |                                |                |
| MCHC                         | 32.7   | 31.5-34.5                      | %              |
| Method: Calculated           |        |                                |                |
| PLATELET COUNT               | 2.85   | 1.5-4 lakhs/cu mm              | Lac/cumm       |
| Method: Electrical Impedence |        |                                |                |
| TOTAL WBC COUNT              | 9900   | 4.0-10.0                       | /cumm          |
| Method: Electrical Impedence |        |                                |                |
| NEUTROPHIL                   | 69     | 40-80                          | %              |
| Method: Microscopy           |        |                                |                |
| LYMPHOCYTE                   | 25     | 20-45                          | %              |
| Method: Microscopy           |        |                                |                |
| MONOCYTE                     | 02     | 2-10                           | %              |
| Method: Microscopy           |        |                                |                |
| EOSINOPHIL                   | 04     | 1-6                            | %              |
| Method: Microscopy           |        |                                |                |
| BASOPHIL                     | 00     | <1-2                           | %              |
| Method: Microscopy           |        |                                |                |
| ESR                          | 26     | Male:12<br>Female:19           | mm/hr<br>mm/hr |
| Method: westergren's         |        |                                |                |

Note: RBC are Normocytic with normochromic.

INSTRUMENT USED:

SYSTEMEX (XP 100)

\*Please correlate with clinical conditions.

\*\*\*End of the report\*\*\*

Lab Technician/Technologist

Madhumita Biswas

Dr. BIPARNAK HALDAR

MBBS, MD(PATHOLOGY)

CONSULTANT PATHOLOGIST

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UHID/MR No.: FSIN.0000013769  
Visit Date: 18.12.2021  
Sample collected on: 18.12.2021  
Ref Doctor: SELF

Age/Gender: 30 Years / Female  
APOLLO CLINIC @ OM TOWER  
OP Visit No.: FSINOPV16813  
Opp. of Rabindra Bharati University  
Reported on: 18.12.2021  
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

| <u>TEST NAME</u>  | <u>RESULT</u> | <u>BIOLOGICAL REFERENCE INTERVALS</u> | <u>UNITS</u> |
|---|---------------|---------------------------------------|--------------|
| GLUCOSE- (FASTING)<br>GLUCOSE- (FASTING)<br>Method: (GOD-POD)             | 115.0         | 70.0- 110.0                           | mg/dL        |
| GLUCOSE- (POST PRANDIAL)<br>GLUCOSE- (POST PRANDIAL)<br>Method: (GOD-POD) | 136.0         | 80.0- 140.0                           | mg/dL        |

End of the report

*Results are to be correlate clinically*

*BK*

Lab Technician / Technologist  
Madhumita\_Biswas

DR. BIPARNAK HALDAR  
MBBS, MD (PATHOLOGY)  
CONSULTANT PATHOLOGIST





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Specimen: BLOOD

**DEPARTMENT OF SPECIAL BIOCHEMISTRY**  
**REPORT PREPARED ON PATHOLOGY**

| Test Name                              | Value | Unit  | Normal Range  |
|--|-------|-------|---|
| Glycosylated Haemoglobin (HbA1c), HPLC | 4.6   | %     | Excellent Control: <4<br>Good Control: 4-6<br>Fair Control : >6-7<br>Action Suggested: >7-8<br>Poor Control : >8                |
| <i>Methodology: HPLC</i>               |       |       |   |
| <i>Instrument Used: Bio-Rad D-10</i>   |       |       |   |
| Estimated Average Glucose (EAG)        | 120   | mg/dL | Excellent Control: 90-120<br>Good Control: 120-150<br>Fair Control: > 150-180<br>Action Suggested: 181-210<br>Panic Value: >211 |

**Comment**

- For patients with Hb variant diseases there may be lowering of HbA1c due to low HBA synthesis.
- EAG is value calculated from HbA1c & indicates average glucose level over past three months.

**Factors that interfere with HbA1c Measurement:** Genetic variants (e.g. Hbs trait, HbC trait), elevated fetal hemoglobin (Hb<sub>f</sub>) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements. The effects vary depending on the specific Hb variant or derivative and the specific HbA1c method.

**Factors that affect interpretation of HbA1c Results:** Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g. recovery from acute blood loss, hemolytic anemia) will falsely lower HbA1c test results regardless of the assay method used.

\*\*\*\*\* End Of Report \*\*\*\*\*

Lab Technician / Technologist  
Susmita\_Saha

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Age/Gender: 30 Years / Female  
OP Visit No.: FSINOPV16813  
Reported on: 18.12.2021  
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME                                    | RESULT | BIOLOGICAL REFERENCE INTERVALS  | UNITS  |
|--|--------|---------------------------------|--------|
| LIVER FUNCTION TEST (PACKAGE)                |        |                                 |        |
| BILIRUBIN-TOTAL<br>Method: Daizo             | 0.7    | 1.1 Adult                       | mg/dl  |
| BILIRUBIN-DIRECT<br>Method: Daizo with DPD   | 0.2    | Adult & Children: <0.25         | mg/dl  |
| BILIRUBIN-INDIRECT<br>Method: calculated     | 0.5    | 0.1-1.0                         | mg/dl  |
| TOTAL-PROTIEN<br>Method: Photometric UV test | 6.9    | Adult: 6.6-8.8                  | gms/dl |
| ALBUMIN<br>Method: BCG                       | 4.1    | 3.5-5.2                         | gms/dl |
| GLOBULIN<br>Method: calculated               | 2.8    | 1.8-3.0                         | gms/dl |
| A:G Ratio                                    | 1.4:1  |                                 |        |
| SGOT/AST<br>Method: IFCC WITHOUT P5P         | 22     | up to 38                        | U/L    |
| SGPT/ALT<br>Method: IFCC WITHOUT P5P         | 21     | up to 38                        | U/L    |
| ALKA-PHOS<br>Method: PNPP-AMP BUFFER         | 129    | Child: 104-380<br>Adult: 20-116 | U/L    |
| GGT [Gamma Glutamyl Transferase]             | 19     | 7-32                            | U/L    |

\*Please correlate with clinical conditions.

\*\*\*End of the report\*\*\*

Lab Technician / Technologist

Susmita Saha

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Specimen: BLOOD

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DEPARTMENT OF LABORATORY MEDICINE


| TEST NAME   | RESULT | BIOLOGICAL REFERENCE INTERVALS   | UNITS |
|---|--------|--|-------|
| <b>LIPID PROFILE</b>                                      |        |  |       |
| Triglyceride<br>Method: GPO-POD                           | 157    | <200   | mg/dl |
| Cholesterol<br>Method: CHOD - POD                         | 145    | Desirable blood cholesterol < 220<br>Borderline High: 170.0-199.0<br>High: > 199.0 mg/dl | mg/dl |
| HDL CHOLESTEROL [DIRECT]<br>Method: PVS and PEGME Coupled | 36     | 50-80mg/dl   | mg/dl |
| LDL CHOLESTEROL [DIRECT]<br>Method: Selective Detergent   | 78     | <130.0 mg/dl   | mg/dl |
| VLDL CHOLESTEROL  | 31     | 20-35 mg/dl  | mg/dl |
| LDL: HDL RATIO  | 2.1    | 3.0-5.0  |       |

End of the report  
Results are to be correlate clinically

Lab Technician / Technologist  
Madhumita\_Biswas

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UHID/MR No.: FSIN.0000013769  
Visit Date: 18.12.2021  
Sample collected on: 18.12.2021  
Ref Doctor: SELF

Age/Gender: 30 / Female  
**APOLLO CLINIC @ OM TOWER**  
OP Visit No.: FSINOPV16813  
Opp. of Rabindra Bharati University  
Reported on: 18.12.2021  
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

| TEST NAME   | RESULT | BIOLOGICAL REFERENCE INTERVALS   | UNITS  |
|---|--------|--|--------|
| BLOOD UREA NITROGEN (BUN)<br>BLOOD UREA NITROGEN (BUN)<br>Method: Calculated                  | 8.4    | 8 - 20   | mg/ dl |
| CREATININE<br>Methodology: Jaffe Reaction<br>Instrument Used: FULLY AUTOMATED ANALYZER EM-200 | 0.87   | Male: 0.7-1.4<br>Female: 0.6-1.2<br>Newborn: 0.3-1.0<br>Infant: 0.2-0.4<br>Child: 0.3-0.7<br>Adolescent: 0.5-1.0 | mg/dl  |
| URIC ACID<br>URIC ACID<br>Method: Uricase   | 3.9    | Female: 2.6 - 6.0<br>Male: 3.4 - 7.0   | mg/dl  |

End of the report

Results are to be correlate clinically

*BSK*

Lab Technician / Technologist  
Susmita\_Saha

DR. BIPARNAK HALDAR  
MBBS, MD (PATHOLOGY)  
CONSULTANT PATHOLOGIST



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Visit Date: 18.12.2021  
Sample collected on: 18.12.2021  
Ref Doctor: SELF

Age/Gender: 30 Years / Female  
OP Visit No.: FSINOPV16813  
Reported on: 18.12.2021  
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

| <u>TEST NAME</u>  | <u>RESULT</u> | <u>BIOLOGICAL REFERENCE INTERVALS</u> | <u>UNIT</u> |
|---|---------------|---------------------------------------|-------------|
| TSH: THYROID STIMULATING HORMONE-SERUM<br>TSH: THYROID STIMULATING HORMONE-SERUM<br>Method : CLIA | 8.4           | 0.35-5.50                             | uIU/ml      |
| TOTAL T3: TRI IODOTHYRONINE – SERUM<br>TOTAL T3: TRI IODOTHYRONINE – SERUM<br>Method : CLIA       | 2.45          | 0.87 – 1.78                           | ug/dl       |
| TOTAL T4: THYROXINE – SERUM<br>TOTAL T4: THYROXINE – SERUM<br>Method : CLIA                       | 15.25         | 8.09 – 14.03                          | ug/dl       |

Results are to be correlate clinically .

\*\*\*End of the report\*\*\*

Lab Technician / Technologist  
Susmita\_Saha

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 Visit Date: 18.12.2021  
 Sample collected on: 18.12.2021  
 Ref Doctor: SELF

Age/Gender: 30 Years / Female  
 OP Visit No.: FSINOPV16813  
 Reported on: 18.12.2021  
 Specimen: URINE

**URINE ROUTINE EXAMINATION**

URINE FOR ROUTINE EXAMINATION

| Test Name                             | Result        | Unit | Method                                      |
|---------------------------------------|---------------|------|---|
| <b><u>PHYSICAL EXAMINATION</u></b>    |               |      |   |
| QUANTITY                              | 30            | ml   | Container Measurement                       |
| COLOUR                                | Pale yellow   |      | Naked Eye Observation                       |
| APPEARANCE                            | Slightly hazy |      | Naked Eye Observation                       |
| REACTION                              | Acidic        |      | Multiple Reagent Strip                      |
| SPECIFIC GRAVITY                      | 1.015         |      | Multiple Reagent Strip                      |
| <b><u>CHEMICAL EXAMINATION</u></b>    |               |      |   |
| BLOOD                                 | Nil           |      | Multiple Reagent Strip                      |
| ALBUMIN                               | Nil           |      | Multiple Reagent Strip / Heat & Acetic Acid |
| BILE PIGMENT                          | Nil           |      | Fuchet's Test                               |
| BILE SALT                             | Nil           |      | Hey's Sulphur Test                          |
| KETONE BODIES                         | Nil           |      | Multiple Reagent Strip / Rothera Test       |
| SUGAR                                 | Nil           |      | Multiple Reagent Strip / Benedict           |
| <b><u>MICROSCOPIC EXAMINATION</u></b> |               |      |   |
| PUS CELL                              | 1-2           | /HPF | Light Microscopy                            |
| RBC                                   | Not found     | /HPF | Light Microscopy                            |
| EPITHELIAL CELL                       | 2-3           | /HPF | Light Microscopy                            |
| MICRO ORGANISM                        | Present(+)    |      |   |
| Others                                | Not found     |      |   |

Note : Any Abnormal Chemical Analysis Rechecked By Respective Manual Method  
 \*\*\* End of Report\*\*\*

*BK*

Lab Technician / Technologist  
 Madhumita\_Biswas

Dr. BIPARNAK HALDER  
 MBBS, MD (PATHOLOGY)  
 CONSULTANT PATHOLOGIST

|  |  |
|--|--|
| <b>Report Number</b> : IR/302468               | <b>Web Slip No</b> : SAS/INV/99/197055-12/2021 |
| <b>Lab Slip No.</b> : SASGO/INV/197639-12/2021 | <b>Report Date</b> : 18/12/2021 8:05:00PM      |
| <b>Patient Name</b> : MOUSUMI DUTTA            | <b>Collection Date</b> : 18/12/2021 3:09:00PM  |
| <b>Age / Sex</b> : 30 Year /Female             | <b>Phlebotomist</b> :                          |
| <b>Referred By</b> : SELF                      | <b>Collected From</b> : SINTHI-APOLLO          |

**DEPARTMENT OF CLINICAL PATHOLOGY**  
**ROUTINE EXAMINATION OF STOOL**


| Test Name                        | Value       | Unit | Normal Range |
|----------------------------------|-------------|------|--------------|
| <b>PHYSICAL EXAMINATION</b>      |             |      |              |
| Colour                           | Brownish    |      |              |
| Consistency                      | Semi solid  |      |              |
| Odour                            | Offensive   |      |              |
| Mucus                            | Present (+) |      |              |
| <b>CHEMICAL EXAMINATION:</b>     |             |      |              |
| Reaction                         | Acidic      |      |              |
| <b>MICROSCOPICAL EXAMINATION</b> |             |      |              |
| Veg Cell                         | Present (+) | /hpf |              |
| Pus Cells                        | 1-2         | /hpf |              |
| R.B.C.                           | Nil         | /hpf |              |
| Ova                              | Nil         |      |              |
| Parasite                         | Nil         |      |              |
| Cyst                             | Nil         |      |              |
| Others                           | Nil         |      |              |

\*\*\*\*\* End Of Report \*\*\*\*\*

Report Prepared By  
SUVENDU KARMAKAR

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|  |  |
|--|--|
| <b>Report Number</b> : IR/302480               | <b>Web Slip No</b> : SAS/INV/99/197055-12/2021 |
| <b>Lab Slip No.</b> : SASGO/INV/197639-12/2021 | <b>Report Date</b> : 18/12/2021 8:23:00PM      |
| <b>Patient Name</b> : MOUSUMI DUTTA            | <b>Collection Date</b> : 18/12/2021 3:09:00PM  |
| <b>Age / Sex</b> : 30 Year /Female             | <b>Phlebotomist</b> :                          |
| <b>Referred By</b> : SELF                      | <b>Collected From</b> : SINTHI-APOLLO          |

**REPORT PREPARED ON PATHOLOGY**  
**DEPARTMENT OF SPECIAL BIOCHEMISTRY**

| Test Name   | Value | Unit  | Normal Range  |
|-------------|-------|-------|---|
| IgE (Total) | 33.2  | IU/ml | 1 Day to 11 Month -<br>1.35 - 19.5<br>11 Month to 3 Year -<br>5.24 - 30.0<br>3 Year to 6 Year -<br>5.20 - 112.0<br>6 Year to 9 Year -<br>13.12 - 142.0<br>9 Year to 12 Year -<br>11.2 - 172.0<br>12 Year to 18 Year -<br>25.0-126.0<br>> 18 Years -<br>28.0-140.0 |

Methodology: CLIA


**Comment:** IgE mediates allergic and hypersensitivity reactions. There is a significant overlap in total IgE between allergic and non-allergic individuals. IgE is increase in atopic diseases- Exogenous asthma in approximately 60% of patients, Hay fever in approximately 30% of patients, Atopic eczema; Parasitic diseases (e.g. ascariasis, visceral larva migrans, hookworm disease, schistosomiasis, Echinococcus infection); Monoclonal IgE myeloma. IgE is decreased in Hereditary deficiencies and Aquired immunodeficiency. A normal level of IgE in serum does not eliminate the possibility of allergic disease.

\*\*\*\*\* End Of Report \*\*\*\*\*


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