

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)

Collected On : 20/05/2023 11:05 AM Received On : 20/05/2023 11:12 AM Reported On : 20/05/2023 12:29 PM

Barcode : F22305200065 Specimen : Whole Blood - ESR Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	7	mm/1hr	0.0-20.0

--End of Report--

Dr. Prithwijit Ghosh  
MBBS, MD, Pathology  
Consultant Pathologist

**Note**

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



MC-5371



**Narayana Multispeciality Hospital**

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

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Appointments  
**1800-309-0309 (Toll Free)**

Emergencies  
**9836-75-0808**

<b>Patient Name</b>	Arpita Das	<b>Requested By</b>	Dr. Swarup Paul
<b>MRN</b>	17600000239366	<b>Procedure DateTime</b>	2023-05-20 12:57:36
<b>Age/Sex</b>	32Y 5M/Female	<b>Hospital</b>	NH-BARASAT

### **ULTRASONOGRAPHY OF WHOLE ABDOMEN**

**LIVER** : Liver is mildly enlarged in size ( 16.3 cm) but has normal shape and outline. There is mild diffuse homogenous increase of hepatic parenchymal echogenicity. No focal SOL seen. IHBRs are not dilated.

**CBD** : It is not dilated, measuring – 5.3 mm at porta, visualized proximal lumen is clear. Distal CBD is obscured by bowel gas shadow.

**PV** : It appears normal, measuring – 13.2 mm at porta.

**GALL BLADDER** : It is optimally distended. No evidence of intraluminal calculus or sludge is seen. Gall bladder wall is normal in thickness.

No pericholecystic collection or frank mass formation is seen.

**SPLEEN** : It is normal in size (9.8 cm), shape, outline & echotexture. No focal lesion seen.

**PANCREAS** : It is normal in size and echotexture . No focal lesion is seen. No calcification is seen. Main pancreatic duct is not dilated.

**ADRENAL GLANDS** : They are not enlarged.

**KIDNEYS** : Both kidneys are normal in size, shape, position and axis.

Cortical echo is normal. Cortico-medullary differentiation is maintained.

No calculus or hydronephrosis is seen.

Perirenal fascial planes are intact.

Measures : Right kidney – 9.9 cm. Left kidney – 11.4 cm.

**URETERS** : They are not visualized as they are not dilated.

Aorta – Normal.

IVC – Normal

**URINARY BLADDER** : It is well distended. Wall is normal. No intraluminal pathology seen.

**UTERUS** : It is normal in size ( 7.4 cm x 3.6 cm x 3.9 cm, volume = 53.9 cc),retroflexed. Myometrial echopattern is within normal limits. No focal SOL is seen. Endometrial echoes are central ( 6.8 mm) and shows normal echogenicity. Endomyometrial junction appears normal.

The cervix appears normal. Internal os is closed at present.

**OVARIES** : Both ovaries are normal in shape, size, position & echotexture .

Measures : Right Ovary – 2.6 cm x 1.4 cm ,Left Ovary – 2.7 cm x 1.3 cm.

No adnexal lesion is seen.

**RIF/ LIF:** Appendix is not visualized. No mass lesion or lymphadenopathy seen at RIF/ LIF.

No ascites seen.

No pleural effusion seen.

**IMPRESSION :**

- **Mild hepatomegaly with mild fatty liver.**

Advise : Clinical correlation & further relevant investigation suggested.

*Goutam Das*

**Dr. Goutam Das**  
MD (Radiodiagnosis)

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)

Collected On : 20/05/2023 11:09 AM Received On : 20/05/2023 02:46 PM Reported On : 20/05/2023 04:06 PM

Barcode : F32305200011 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**CLINICAL PATHOLOGY**

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

**PHYSICAL EXAMINATION**

Volume (Visible)	50	ml	-
Colour (Visible)	Pale Yellow	-	-
Appearance (Visible)	Slightly Hazy	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (Dual Wavelength Reflectance )	6.0	-	5.0-8.0
Sp. Gravity (Dual Wavelength Reflectance)	1.015	-	1.002-1.030
Protein (Dual Wavelength Reflectance/Acetic Acid Tes (Heat Test))	Absent	-	-
Urine Glucose (Dual Wavelength Reflectance /Benedict's Test)	Absent	-	-
Ketone Bodies (Dual Wavelength Reflectance /Manual)	Absent	-	Negative
Bile Salts (Dual Wavelength Reflectance/Hay's Test)	Absent	-	Negative
Bile Pigment (Bilirubin) (Dual Wavelength Reflectance/Fouchet's Test)	Absent	-	Negative
Urobilinogen (Dual Wavelength Reflectance /Ehrlich's Method)	Normal	-	-
Urine Leucocyte Esterase (Dual Wavelength Reflectance)	Absent	-	Negative
Blood Urine (Dual Wavelength Reflectance)	Absent	-	-

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Nitrite (Dual Wavelength Reflectance) Absent - -

#### MICROSCOPIC EXAMINATION

Pus Cells (Microscopy) 2-3/hpf - 1 - 2

RBC (Microscopy) Not Seen - 1-2/hpf

Epithelial Cells (Microscopy) 4-6/hpf - 2-3

Crystals (Microscopy) Not Seen - -

Casts (Microscopy) **Absent** - -

Others (Microscopy) Nil - -

--End of Report--



Dr. Ruby Sarkar  
MBBS, MD Pathology Consultant

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- Kindly correlate clinically.



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Collected On : 20/05/2023 11:09 AM Received On : 20/05/2023 02:46 PM Reported On : 20/05/2023 04:22 PM

Barcode : F32305200011 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**CLINICAL PATHOLOGY**

Test	Result	Unit
Urine For Sugar	Negative	-

--End of Report--



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# ADULT TRANS-THORACIC ECHO REPORT

**PATIENT NAME** : Ms Arpita Das  
**GENDER/AGE** : Female, 32 Years  
**LOCATION** : -

**PATIENT MRN** : 17600000239366  
**PROCEDURE DATE** : 20/05/2023 01:58 PM  
**REQUESTED BY** : Dr. Swarup Paul



## IMPRESSION

- NORMAL SIZED LEFT VENTRICULAR CAVITY
- NO RWMA
- GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 64 %
- NORMAL DIASTOLIC INFLOW PATTERN
- GOOD RIGHT VENTRICULAR SYSTOLIC FUNCTION
- NO PULMONARY HYPERTENSION

## FINDINGS

### CHAMBERS

LEFT ATRIUM : NORMAL  
RIGHT ATRIUM : NORMAL  
LEFT VENTRICLE : NORMAL SIZED LEFT VENTRICULAR CAVITY. NO RWMA. GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 64 %. NORMAL DIASTOLIC INFLOW PATTERN.  
RIGHT VENTRICLE : NORMAL IN SIZE. GOOD RV SYSTOLIC FUNCTION, TAPSE 24 MM, TASV 14 CM/SEC

### VALVES

MITRAL : MORPHOLOGICALLY NORMAL  
AORTIC : MORPHOLOGICALLY NORMAL  
TRICUSPID : MORPHOLOGICALLY NORMAL, TRIVIAL TR, TRPG 22 MMHG  
PULMONARY : MORPHOLOGICALLY NORMAL

### SEPTAE

IAS : INTACT  
IVS : INTACT

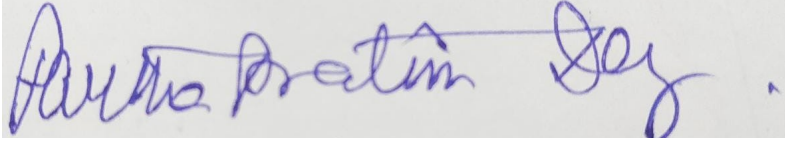
### ARTERIES AND VEINS

AORTA : NORMAL  
PA : NORMAL , NO PULMONARY HYPERTENSION  
IVC : IVC 3 MM WITH NORMAL RESPIRATORY VARIATION

**PERICARDIUM** : NORMAL

**INTRACARDIAC MASS** : NO INTRACARDIAC MASS OR THROMBUS SEEN IN TTE.

MS ARPITA DAS (17600000239366)



DR. PARTHA PRATIM DEY  
ASSOCIATE CONSULTANT

20/05/2023 01:58 PM

**PREPARED BY** : SURAJIT BISWAS(353011)  
**GENERATED BY** : ANKANA GHOSH(357843)

**PREPARED ON** : 20/05/2023 02:06 PM  
**GENERATED ON** : 23/05/2023 01:10 PM



<b>Patient Name</b>	Arpita Das	<b>Requested By</b>	Dr. Swarup Paul
<b>MRN</b>	17600000239366	<b>Procedure DateTime</b>	2023-05-20 12:43:32
<b>Age/Sex</b>	32Y 5M/Female	<b>Hospital</b>	NH-BARASAT

**X-RAY - CHEST (PA)**

Increased vascular markings seen at left parahilar & right paracardiac regions

Trachea is in situ

CP angles are clear.

Cardiac shadow is normal.

**Suggested clinical correlation and further investigations**



**Dr. Subrata Sanyal**  
(Department of Radiology)

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)

Collected On : 20/05/2023 01:47 PM Received On : 20/05/2023 01:47 PM Reported On : 20/05/2023 04:08 PM

Barcode : F12305200121 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Glucose Oxidase, Hydrogen Peroxidase)	88	mg/dL	Normal: ≤140 Pre-diabetes: 141-199 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. Samarpita Mukherjee  
MBBS, MD Biochemistry  
CONSULTANT

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- Kindly correlate clinically.



**DEPARTMENT OF LABORATORY MEDICINE**

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Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)

Collected On : 20/05/2023 11:05 AM Received On : 20/05/2023 11:12 AM Reported On : 20/05/2023 06:29 PM

Barcode : F12305200086 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC)	5.4	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	108.28	-	-

**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--

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Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)  
Collected On : 20/05/2023 11:05 AM Received On : 20/05/2023 11:12 AM Reported On : 20/05/2023 01:07 PM  
Barcode : F12305200084 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)  
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Enzymatic Method)	<b>0.5 L</b>	mg/dL	0.52-1.04
eGFR	143.0	mL/min/1.73m <sup>2</sup>	-
<b>Serum Sodium</b> (ISE Direct )	142	mmol/L	137.0-145.0
<b>Serum Potassium</b> (ISE Direct )	4.7	mmol/L	3.5-5.1
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase)	163	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic End Point)	114	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl <sub>2</sub> )	<b>31 L</b>	mg/dL	Low: <40.0 mg/dL High: >60.0 mg/dL
Non-HDL Cholesterol	132	-	-
LDL Cholesterol (End Point)	<b>105.40 H</b>	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	22.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	5.3	-	-

**LIVER FUNCTION TEST(LFT)**

Bilirubin Total (Dyphylline, Diazonium Salt)	0.5	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Direct Measure)	0.2	mg/dL	0.0-0.3

Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)			
Unconjugated Bilirubin (Indirect) (Direct Measure)	0.3	mg/dL	0.3-1.3
Total Protein (Biuret, No Serum Blank, End Point)	<b>8.4 H</b>	g/dL	6.3-8.2
Serum Albumin (Bromcresol Green (BCG))	4.6	gm/dL	3.5-5.0
Serum Globulin (Calculated)	<b>3.8 H</b>	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.21	-	1.0-2.1
SGOT (AST) (Multiple-point Rate)	24	U/L	14.0-36.0
SGPT (ALT) (Uv With P5p)	23	U/L	<35.0
Alkaline Phosphatase (ALP) (PMPP, AMP Buffer)	60	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (G-glutamyl-p-nitroanilide)	13	U/L	12.0-43.0
<b>THYROID PROFILE (T3, T4, TSH)</b>			
Tri Iodo Thyronine (T3) (CLIA)	1.21	ng/mL	0.97-1.69
Thyroxine (T4) (CLIA)	7.09	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (CLIA)	1.921	µIU/mL	0.4-4.049

--End of Report--



Dr. Samarpita Mukherjee  
MBBS, MD Biochemistry  
CONSULTANT

Patient Name : Ms Arpita Das MRN : 17600000239366 Gender/Age : FEMALE , 32y (05/12/1990)

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Barcode : F12305200084 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Blood Urea Nitrogen (BUN)</b> (Urease, UV)	7.48	mg/dL	7.0-17.0

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MBBS, MD Biochemistry  
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Collected On : 20/05/2023 11:05 AM Received On : 20/05/2023 11:12 AM Reported On : 20/05/2023 01:07 PM

Barcode : F12305200085 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Glucose Oxidase, Hydrogen Peroxidase)	95	mg/dL	Normal: 70-109 Pre-diabetes: 110-125 Diabetes: => 126

--End of Report--

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Collected On : 20/05/2023 11:05 AM Received On : 20/05/2023 11:12 AM Reported On : 20/05/2023 01:27 PM

Barcode : F22305200064 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9674055801

**HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
<b>BLOOD GROUP &amp; RH TYPING</b>			
Blood Group (Slide Technique And Tube Technique)	"A"	-	-
RH Typing (Slide Technique And Tube Technique)	Positive	-	-
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Cyanide-free Hemoglobin Method)	12.6	g/dL	12.0-15.0
Red Blood Cell Count (Impedance Variation)	4.64	millions/ $\mu$ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Impedance)	38.9	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Calculated)	84	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.1	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.3	g/dL	31.5-34.5
Red Cell Distribution Width (RDW) (Impedance)	<b>14.8 H</b>	%	11.6-14.0
Platelet Count (Impedance Variation/Microscopy)	184	Thousand / $\mu$ L	150.0-410.0
Total Leucocyte Count(WBC) (Impedance Variation)	8.7	$\times 10^3$ cells/ $\mu$ l	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (Impedance Variation And Absorbency /Microscopy)	60.9	%	40.0-80.0
Lymphocytes (Impedance Variation And Absorbency /Microscopy)	33.2	%	20.0-40.0

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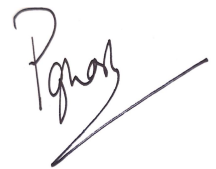
Emergencies

**9836-75-0808**

Patient Name : Ms Arpita Das    MRN : 17600000239366    Gender/Age : FEMALE , 32y (05/12/1990)			
Monocytes (Impedance Variation And Absorbency /Microscopy)	2.6	%	2.0-10.0
Eosinophils (Impedance Variation And Absorbency /Microscopy)	3.2	%	1.0-6.0
Basophils (Impedance Variation And Absorbency /Microscopy)	<b>0.1 L</b>	%	1.0-2.0
Absolute Neutrophil Count	5.3	-	2.0-7.0
Absolute Lymphocyte Count	2.89	-	1.0-3.0
Absolute Monocyte Count	0.23	-	0.2-1.0
Absolute Eosinophil Count	0.28	-	0.02-0.5
Absolute Basophil Count	<b>0.01 L</b>	-	0.02-0.1

*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. Prithwijiit Ghosh  
 MBBS, MD, Pathology  
 Consultant Pathologist

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