

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Saikat Ghosh MRN : 17650000258627 Gender/Age : MALE , 32y (23/12/1990)

Collected On : 27/11/2023 09:14 AM Received On : 27/11/2023 09:23 AM Reported On : 27/11/2023 10:17 AM

Barcode : J12311270093 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
FASTING BLOOD GLUCOSE (FBG) (Glucose Oxidase, Peroxidase)	101 H	mg/dL	Both: Normal: 70-99 Both: Pre-diabetes: 100-125 Both: Diabetes: => 126 ADA standards 2019

--End of Report--



Dr. Ritu Priya
MBBS, MD, Biochemistry
Consultant

Note

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



Narayana Superspeciality Hospital

(A Unit of Meridian Medical Research & Hospital Ltd.) CIN U85110W81995PLC071440
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Hospital Address : 120/1, Andul Road, Howrah 711 103
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Appointments
180-0309-0309 (Toll Free)

Emergencies
83348 30003

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Patient Name : Saikat Ghosh MRN : 17650000258627 Gender/Age : MALE , 32y (23/12/1990)

Collected On : 27/11/2023 09:14 AM Received On : 27/11/2023 09:23 AM Reported On : 27/11/2023 12:49 PM

Barcode : J12311270094 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.8 H	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	119.76	-	-

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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Collected On : 27/11/2023 09:14 AM Received On : 27/11/2023 09:23 AM Reported On : 27/11/2023 11:03 AM

Barcode : J32311270010 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

IMMONOLOGY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.58	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	6.69	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	2.569	µIU/mL	0.4001-4.049

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Patient details:
Name:MR.SAIKAT GHOSH
Age: 32 YEARS
Examination Date: 27.11.2023
Consultant Name:DR.

MRN:17650000258627
Gender:MALE
Processed Date: 27.11.2023
Patient Location: OPD

ECHOCARDIOGRAPHY REPORT

MEASUREMENT:

AO: 28 (20-40) mm	LVID(d): 47 (36-52) mm	IVS(d): 09 (6-11) mm
LA: 34 (19-40) mm	LVID(s) : 29 (23-39) mm	PWd: 09 (6-11) mm
RVOT: 23 mm		LVEF ~ 65 %

VALVES:

Mitral Valve : Normal
Aortic Valve : Normal
Tricuspid Valve : Normal
Pulmonary Valve : Normal

CHAMBERS (Dimension)

Left Atrium : Normal
Right Atrium : Normal
Left Ventricle : Normal
Right Ventricle : Normal

SEPTAL

IVS : Intact
IAS : Intact

GREAT ARTERIES:

Aorta : Normal
Pulmonary Artery : Normal



PATIENT HELPLINE
1800-309-0309

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(Junction of 2nd Hooghly Bridge & Andul Road)
Tel: 033-71205055
info.nshhowrah@narayanahealth.org, www.narayanahealth.org

DOPPLER DATA:

	Velocity(in m/s)	Peak PG(mmHg)	Mean PG(mmHg)	Regurgitation
Mitral	E - 0.6 , A - 0.4			0/4
Aortic	0.9	3.2		0/4
Tricuspid	2.2	19		Trivial
Pulmonary	1.0	4.4		0/4

LVOT : No significant gradient noted.

Vegetation/Thrombus : Nil

Pericardium : Normal

Other Findings :

Final Diagnosis:

Normal sized cardiac chambers.
 No significant regional wall motion abnormality of LV at rest.
 Normal LV systolic function. LV EF~ 65%
 Adequate LV diastolic compliance.

Clinical correlation please.

NOTE: Echo of Patient: MR.SAIKAT GHOSH

MRN: 17650000258627

has been done on 27.11.2023 and reported on 27.11.2023



Dr. Masud Syed mehedi
 Associate consultant

TECHNICIAN
 YADAV

TB: K. DEB



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 (Junction of 2nd Hooghly Bridge & Andul Road)
 Tel: 033-71205055

ID: 1765000258627

Name: Ghost, Saikat

Age: 32 Years

Gender: Male

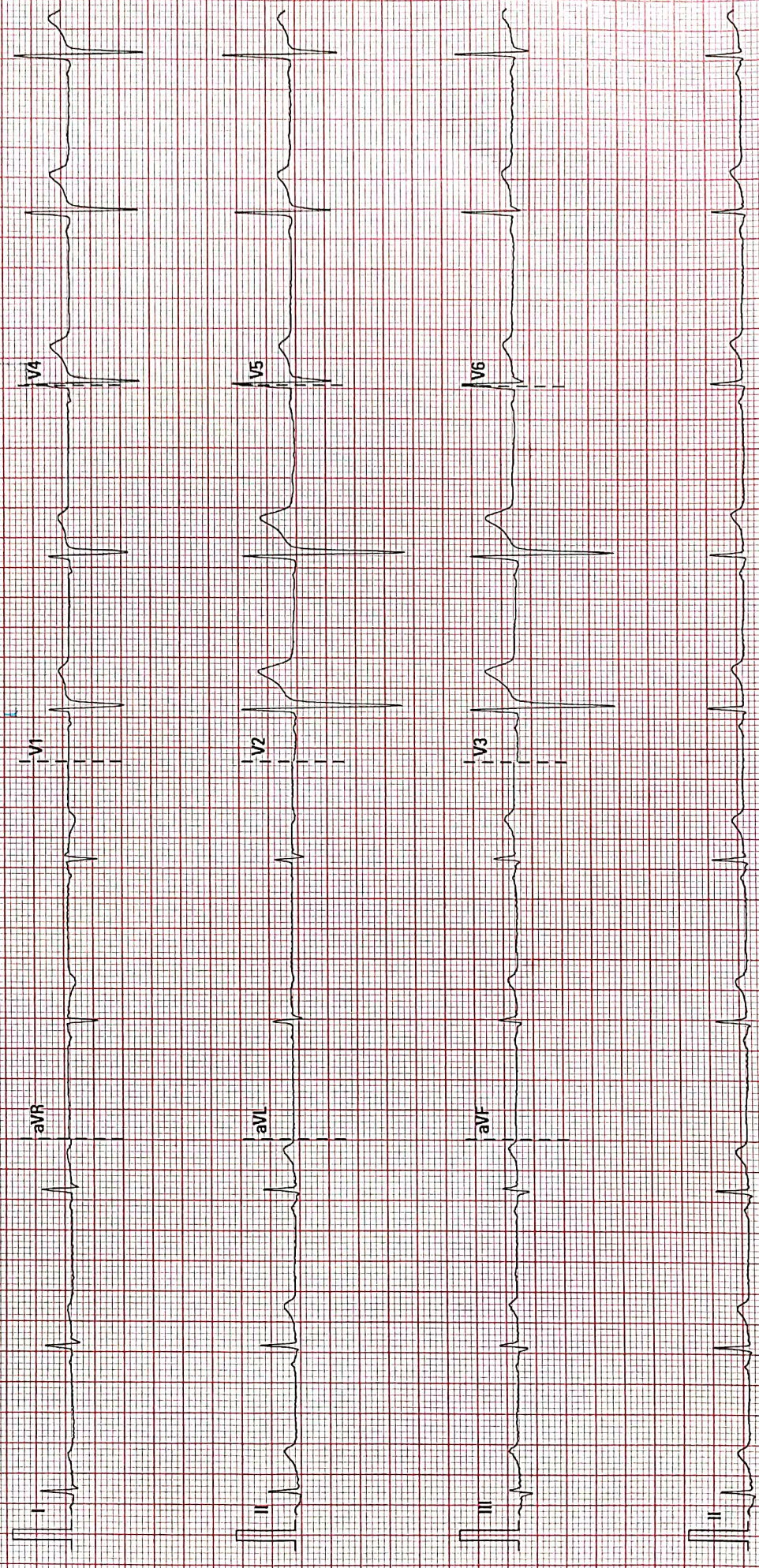
2023-11-27 11:14:07

Heart Rate	56 bpm
PR Interval	140 ms
QRS Duration	96 ms
QT/QTc Interval	390/383 ms
P/QRS/T Axes	58/38/71 deg
QTc-Hodges	

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis

PLEASE CORRELATE CLINICALLY



Please Keep A Photocopy

25 mm/s

10 mm/mV

50 Hz

BDR 35 Hz

Narayana Superspecialty Hospital

02.10.00/V28.4.1

SN:FN-19030337

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Collected On : 27/11/2023 09:14 AM Received On : 27/11/2023 09:23 AM Reported On : 27/11/2023 10:21 AM

Barcode : J12311270092 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.82	mg/dL	0.66-1.25
eGFR (Calculated By MDRD Formula)	108.9	mL/min/1.73m ²	Indicative for renal impairment: <60 Note: eGFR is inaccurate for Hemodynamically unstable patients . eGFR is not applicable for less than 18 years of age .
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	13.08	mg/dL	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	140	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.1	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	198	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides	169	mg/dL	Both: Normal: < 150 Both: Borderline: 150-199 Both: High: 200-499 Both: Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	34 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	164	-	-
LDL Cholesterol (Colorimetric)	134.49 H	mg/dL	Both: Optimal: < 100 Both: Near to above optimal: 100-129 Both: Borderline High: 130-159 Both: High: 160-189 Both: Very High: > 190

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VLDL Cholesterol (Calculated)	33.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	5.8	-	-

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.7	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.3	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect)	0.4	-	-
Total Protein (Colorimetric - Biuret Method)	7.1	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.2	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.9	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))	53	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	130 H	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	102	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	108 H	U/L	15.0-73.0

--End of Report--



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Consultant

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Final Report

Patient Name : Saikat Ghosh MRN : 17650000258627 Gender/Age : MALE , 32y (23/12/1990)

Collected On : 27/11/2023 12:59 PM Received On : 27/11/2023 01:00 PM Reported On : 27/11/2023 02:27 PM

Barcode : J12311270185 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
POST PRANDIAL BLOOD GLUCOSE (PPBG) (Glucose Oxidase, Peroxidase)	97	mg/dL	Normal: 70-139 Pre-diabetes: 140-199 Diabetes: => 200 ADA standards 2019

Interpretations:

(ADA Standards Jan 2017)

PPBS can be less than FBS 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.

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Collected On : 27/11/2023 09:14 AM Received On : 27/11/2023 09:23 AM Reported On : 27/11/2023 11:27 AM

Barcode : J22311270086 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	12 H	mm/1hr	0.0-10.0

--End of Report--



Dr. Smita Priyam
MBBS, MD, Pathology
REGISTRAR

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Collected On : 27/11/2023 09:14 AM Received On : 27/11/2023 09:23 AM Reported On : 27/11/2023 10:42 AM

Barcode : J22311270087 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (sodium Lauryl Sulphate (SLS) Method)	14.9	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	5.33	millions/ µL	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	44.4	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived)	83.3	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.0	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.7	%	31.5-34.5
Red Cell Distribution Width (RDW)	13.9	%	11.6-14.0
Platelet Count (Electrical Impedance)	183	Thous/Cumm	150.0-400.0
Mean Platelet Volume (MPV)	9.7	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.9	-	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils	55.2	%	40.0-75.0
Lymphocytes (Fluorescent Flow Cytometry)	31.7	%	20.0-40.0
Monocytes (Fluorescent Flow Cytometry)	8.4	%	2.0-10.0
Eosinophils (Fluorescent Flow Cytometry)	4.1	%	1.0-6.0

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Basophils (Fluorescent Flow Cytometry)	0.6	%	0.0-2.0
NRBC	0.0	-	-
Absolute Neutrophil Count	4.37	-	-
Absolute Lymphocyte Count	2.51	-	-
Absolute Monocyte Count	0.67	-	-
Absolute Eosinophil Count	0.33	-	-
Absolute Basophil Count	0.05	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

--End of Report--



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REGISTRAR

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Collected On : 27/11/2023 10:43 AM Received On : 27/11/2023 10:43 AM Reported On : 27/11/2023 06:12 PM

Barcode : J42311270008 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001558998

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
Urine For Sugar	Absent	-	-

URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	60	ml	-
Colour	Straw	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction)	6.5	-	4.8-7.5
Sp. Gravity	1.010	-	1.002-1.030
Protein	Absent	-	-
Urine Glucose	Absent	-	Negative
Ketone Bodies	Absent	-	-
Bile Salts	Absent	-	Negative
Bile Pigment (Bilirubin)	Absent	-	Negative
Urobilinogen	Normal	-	-
Urine Leucocyte Esterase	Absent	-	-
Blood Urine	Absent	-	Negative
Nitrite	Absent	-	Negative

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MICROSCOPIC EXAMINATION

Pus Cells	1-2	/hpf	0 - 2
RBC	Not Found	-	0 - 3
Epithelial Cells	0-2	/hpf	-
Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Not Found	-	-

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