

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Abhishek Sharma MRN : 17650000243190 Gender/Age : MALE , 31y (12/11/1991)

Collected On : 24/06/2023 10:40 AM Received On : 24/06/2023 10:43 AM Reported On : 25/06/2023 03:31 PM

Barcode : L12306240009 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

NARAYANA SUPERSPECIALITY HOSPITAL BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group	B	-
RH Typing	Positive	-


--End of Report--

Dr. Arnab Singha
MEDICAL OFFICER

Note

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



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Collected On : 24/06/2023 10:40 AM Received On : 24/06/2023 10:43 AM Reported On : 24/06/2023 01:06 PM

Barcode : J22306240108 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	40 H	mm/1hr	0.0-10.0

--End of Report--



Dr. Smita Priyam
MBBS, MD, Pathology
REGISTRAR

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Emergencies
83348 30003

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Collected On : 24/06/2023 10:40 AM Received On : 24/06/2023 10:43 AM Reported On : 24/06/2023 02:53 PM
Barcode : J32306240027 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

IMMONOLOGY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.37	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	7.53	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.874	µIU/mL	0.4001-4.049

--End of Report--



Dr. Ritu Priya
MBBS, MD, Biochemistry
Consultant

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 Barcode : J22306240109 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)
 Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (sodium Lauryl Sulphate (SLS) Method)	14.1	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	4.51	millions/ µL	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	42.6	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived)	94.5	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	31.3	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.2	%	31.5-34.5
Red Cell Distribution Width (RDW)	12.9	%	11.6-14.0
Platelet Count (Electrical Impedance)	237	Thous/Cumm	150.0-400.0
Mean Platelet Volume (MPV)	10.9	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	8.2	-	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils	58.4	%	40.0-75.0
Lymphocytes (Fluorescent Flow Cytometry)	31.3	%	20.0-40.0
Monocytes (Fluorescent Flow Cytometry)	7.1	%	2.0-10.0
Eosinophils (Fluorescent Flow Cytometry)	2.3	%	1.0-6.0

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Basophils (Fluorescent Flow Cytometry)	0.9	%	0.0-2.0
NRBC	0.0	-	-
Absolute Neutrophil Count	4.8	-	-
Absolute Lymphocyte Count	2.6	-	-
Absolute Monocyte Count	0.6	-	-
Absolute Eosinophil Count	0.19	-	-
Absolute Basophil Count	0.08	-	-

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. Smita Priyam
MBBS, MD, Pathology
REGISTRAR

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Collected On : 24/06/2023 10:40 AM Received On : 24/06/2023 10:43 AM Reported On : 26/06/2023 10:44 AM

Barcode : J42306240007 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

CLINICAL PATHOLOGY

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

URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	60	ml	-
Colour	Pale Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction)	6.5	-	4.8-7.5
Sp. Gravity	1.015	-	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	2-3	/hpf	-
Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Not Found	-	-

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Collected On : 24/06/2023 10:40 AM Received On : 24/06/2023 10:43 AM Reported On : 24/06/2023 12:14 PM

Barcode : J12306240168 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.76	mg/dL	0.66-1.25
eGFR (Calculated By MDRD Formula)	119.7	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)	12.61	mg/dL	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	139	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)	192	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides	275 H	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)	31 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	161	-	-
LDL Cholesterol (Colorimetric)	147.83 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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Patient Name : Mr Abhishek Sharma MRN : 17650000243190 Gender/Age : MALE , 31y (12/11/1991)

VLDL Cholesterol (Calculated)	55 H	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	6.2	-	-

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.8	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.4	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect)	0.4	-	-
Total Protein (Colorimetric - Biuret Method)	8.2	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.8	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.4	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.41	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	29	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	40	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	94	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	64	U/L	15.0-73.0

--End of Report-



Dr. Ritu Priya
MBBS, MD, Biochemistry
Consultant

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Collected On : 24/06/2023 10:40 AM Received On : 24/06/2023 10:43 AM Reported On : 24/06/2023 01:37 PM

Barcode : J12306240170 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.0	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	96.8	-	-

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--

Ritu Priya

Dr. Ritu Priya
MBBS, MD, Biochemistry
Consultant

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UJ-118900043190
Name: ABHISHEK SHARMA
Age: 31 Years
Gender: Male

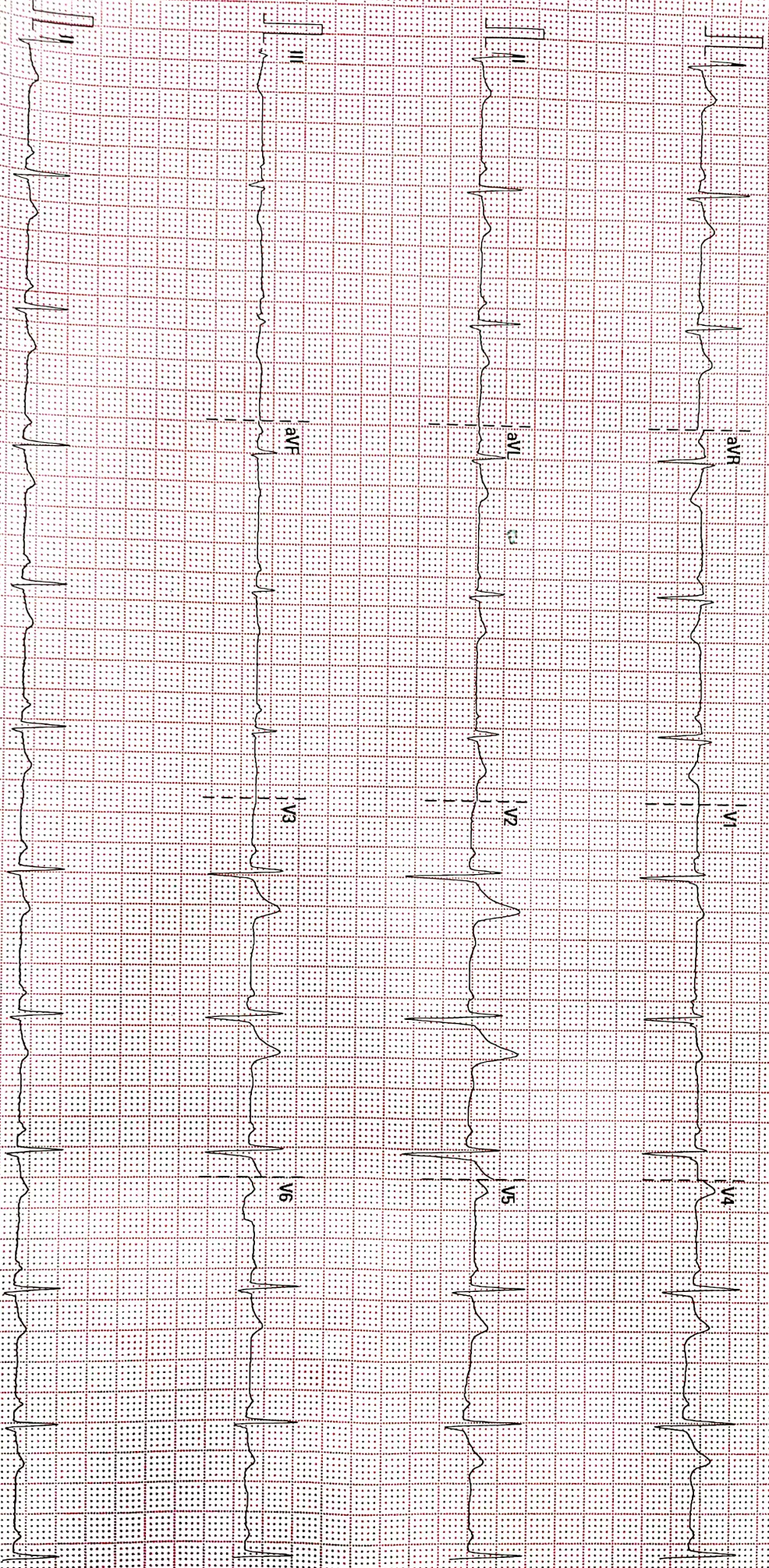
2023-06-24 10:59:02

Vent. Rate	66 bpm
PR Interval	146 ms
QRS Duration	88 ms
QT/QTc Interval	384/395 ms
P/QRS/T Axes	46/27/12 deg

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis

PLEASE CORRELATE CLINICALLY



25 mm/s
10 mm/mV
50 Hz
BDR 35 Hz

02.10.00.V28.4.1

SN.FN.1903037

Keen Keep a Photocopy

Patient Name	Abhishek Sharma	Requested By	EXTERNAL
MRN	17650000243190	Procedure DateTime	2023-06-24 13:36:27
Age/Sex	31Y 7M / Male	Hospital	NH-NMH & NSH

USG OF WHOLE ABDOMEN (SCREENING)

CLINICAL INDICATION:

Health check up.

USG OBSERVATIONS:

LIVER: Enlarged in size (18.0 cm) with normal shape and outline. **Parenchymal echogenicity is diffusely increased.** No focal cystic or solid mass lesion. No intrahepatic biliary dilatation. Intrahepatic portion of IVC is normal. Porta hepatis is normal.

GALL BLADDER: Wall thickness is normal. Luminal echoes are normal. No calculi. No pericholecystic fluid seen.

PORTAL VEIN: It appears normal. It measures 10.8 mm.

C.B.D: Not dilated. It measures 5.8 mm.

PANCREAS: Parenchymal echotexture normal. MPD appears normal. No focal lesion.

SPLEEN: Borderline enlarged in size (11.9 cm) with normal echotexture. No focal or diffuse lesion.

KIDNEYS:

Right kidney measures 13.1 cm.

Left kidney measures 12.4 cm.

Right kidney is enlarged in size while left kidney is normal in size. Both kidneys are normal in shape and outline. Parenchymal echotexture normal. Corticomedullary differentiation is well made out and is normal. Sinus echoes are normal. No hydronephrosis seen in both kidneys. **Multiple tiny calcific foci are seen in left kidney.**

URINARY BLADDER: Wall thickness normal. **Multiple floating echos are seen within urinary bladder lumen.**

PROSTATE: Measures: 4.1 x 2.9 x 3.1 cm = 20.4 gms. Normal in size, shape and echo pattern with well demarcated outlines. No obvious focal area of calcification or mass lesion.

- No Ascites/ pleural effusion is seen at present.



IMPRESSION:

Present study suggests:

- Hepatomegaly with grade -II fatty liver --*Lipid profile suggested.*
- Enlarged right kidney.
- Multiple tiny calcific foci in left kidney.
- Borderline enlarged spleen.
- Multiple floating echos within urinary bladder lumen --- cystitis --*Urine RE, C/S suggested.*

--- Suggested clinical correlation and follow up.

Not for medico legal purpose. 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.



Dr. MAITRI RANG
CONSULTANT SONOLOGIST
MBBS,CBET (IPGMER & SSKM HOSPITAL)
REGISTRATION NO - 89027 WBMC

This is a digitally signed valid document. Reported Date/Time: 2023-06-24 16:20:13

Patient details:
Name: MR. ABHISHEK SHARMA
Age: 31 YEARS
Examination Date: 24.06.2023
Consultant Name: DR.

MRN: 17650000243190
Gender: MALE
Processed Date: 24.06.2023
Patient Location: OPD

ECHOCARDIOGRAPHY REPORT

MEASUREMENT:

AO: 31 (20-40) mm	LVID(d): 49 (36-52) mm	IVS(d): 10 (6-11) mm
LA: 39 (19-40) mm	LVID(s): 31 (23-39) mm	PWd: 10 (6-11) mm
RVOT: 26 mm	TAPSE: 17 mm	LVEF ~ 63 %

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



DOPPLER DATA:

	Velocity(in m/s)	Peak PG(mmHg)	Mean PG(mmHg)	Regurgitation
Mitral	E - 0.7 , A - 0.6			Trivial
Aortic	0.9	3.3		0/4
Tricuspid	2.0	16		Trivial
Pulmonary	1.0	4.2		0/4

LVOT : No significant gradient noted.

Vegetation/Thrombus: Nil

Pericardium : Normal

Other Findings : E/E':09

Final Diagnosis:

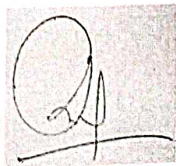
Normal size cardiac chambers.
No significant regional wall motion abnormality of LV at rest.
Normal LV systolic function. LV EF~ 63%
Adequate LV diastolic compliance.

Clinical correlation please.

NOTE: Echo of Patient: MR.ABHISHEK SHARMA

MRN: 17650000243190

has been done on 24.06.2023 and reported on 24.06.2023



DR. SHAMICK SAHA
Junior consultant

TECHNICIAN
YADAV

TB: K. DEB

DEPARTMENT OF LABORATORY MEDICINE

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Barcode : J12306240169 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9334182726

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	96	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

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