

### DEPARTMENT OF LABORATORY MEDICINE

**Final Report** 

Patient Name : Mr Shovan MandalMRN : 17600000235965Gender/Age : MALE , 34y (25/07/1988)Collected On : 25/03/2023 10:52 AMReceived On : 25/03/2023 10:55 AMReported On : 25/03/2023 12:18 PMBarcode : F22303250090Specimen : Whole Blood - ESRConsultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

|                                      | HAEMATOLOGY LAB |        |                                      |  |
|--------------------------------------|-----------------|--------|--------------------------------------|--|
| Test                                 | Result          | Unit   | <b>Biological Reference Interval</b> |  |
| Erythrocyte Sedimentation Rate (ESR) | 18 H            | mm/1hr | 0.0-10.0                             |  |
| (Westergren Method)                  |                 |        |                                      |  |

--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.





### Narayana Multispeciality Hospital

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497 Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099 Hospital Address: 78, Jessore Road (South), Kolkata 700127, West Bengal Email: info.brs.kolkata@narayanahealth.org | www.narayanahealth.org Page 1 of 1

Appointments 1800-309-0309 (Toll Free)



### **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name : Mr Shovan Mandal MRN : 17600000235965 Gender/Age : MALE , 34y (25/07/1988)

Collected On: 25/03/2023 10:52 AM Received On: 25/03/2023 10:55 AM Reported On: 25/03/2023 01:38 PM

Barcode : F12303250118 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

| BIOCHEMISTRY  |        |       |   |  |
|---|--------|-------|---|--|
| Test  | Result | Unit  | <b>Biological Reference Interval</b>                        |  |
| Fasting Blood Sugar (FBS) (Glucose Oxidase,<br>Hydrogen Peroxidase) | 97     | mg/dL | Normal: 70-109<br>Pre-diabetes: 110-125<br>Diabetes: => 126 |  |

--End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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**Final Report** 

Patient Name : Mr Shovan MandalMRN : 17600000235965Gender/Age : MALE , 34y (25/07/1988)Collected On : 25/03/2023 10:52 AMReceived On : 25/03/2023 10:55 AMReported On : 25/03/2023 01:39 PMBarcode : F22303250089Specimen : Whole BloodConsultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

|  | HAEMATOLOGY LAB       |                           |                         |                        |
|--|-----------------------|---------------------------|-------------------------|------------------------|
| Test   | Result                | Unit                      | Biological Reference Ir | nterval                |
| BLOOD GROUP & RH TYPING  |                       |                           |                         |                        |
| Blood Group (Slide Technique And Tube Technique)   | "O"                   | -                         | -                       |                        |
| RH Typing (Slide Technique And Tube Technique)   | Positive              | -                         | -                       |                        |
| COMPLETE BLOOD COUNT (CBC)   |                       |                           |                         |                        |
| Haemoglobin (Hb%) (Cyanide-free Hemoglobin<br>Method)  | 13.8                  | -                         | -                       |                        |
| Red Blood Cell Count (Impedance Variation)   | 4.86                  | millions/ μL              | 4.5-5.5                 |                        |
| PCV (Packed Cell Volume) / Hematocrit<br>(Impedance)   | 44.3                  | %                         | 40.0-50.0               |                        |
| MCV (Mean Corpuscular Volume) (Calculated)   | 91                    | fL                        | 83.0-101.0              |                        |
| MCH (Mean Corpuscular Haemoglobin)<br>(Calculated)   | 28.3                  | pg                        | 27.0-32.0               |                        |
| MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)   | 31.1 L                | g/dL                      | 31.5-34.5               |                        |
| Red Cell Distribution Width (RDW) (Impedance)  | 17.3 H                | %                         | 11.6-14.0               |                        |
| Platelet Count (Impedence Variation/Microscopy)  | 170                   | Thousand / $\mu L$        | 150.0-410.0             |                        |
| Total Leucocyte Count(WBC) (Impedance Variation)   | 7.1                   | x10 <sup>3</sup> cells/µl | 4.0-10.0                |                        |
| DIFFERENTIAL COUNT (DC)  |                       |                           |                         |                        |
| <b>Neutrophils</b> (Impedance Variation And Absorbency /Microscopy)  | 52.8                  | %                         | 40.0-80.0               |                        |
| Lymphocytes (Impedance Variation And Absorbency /Microscopy)   | 37.5                  | %                         | 20.0-40.0               |                        |
|  |                       |                           |                         | Page 1 of 2            |
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| Hospital Address: 78, Jessore Road (South), Kolkata 700127, West Bengal               | Emergencies               |
| Email: info.brs.kolkata@narayanahealth.org   www.narayanahealth.org                   | 9836-75-0808              |



| Patient Name : Mr Shovan Mandal MRN : 1760000                | 0235965 | Gender/Age : MALE , 34 | y (25/07/1988) |  |
|--|---------|------------------------|----------------|--|
| Monocytes (Impedance Variation And Absorbency /Microscopy)   | 4.3     | %                      | 2.0-10.0       |  |
| Eosinophils (Impedance Variation And Absorbency /Microscopy) | 5.3     | %                      | 1.0-6.0        |  |
| Basophils (Impedance Variation And Absorbency /Microscopy)   | 0.1 L   | %                      | 1.0-2.0        |  |
| Absolute Neutrophil Count                                    | 3.75    | -                      | -              |  |
| Absolute Lympocyte Count                                     | 2.66    | -                      | -              |  |
| Absolute Monocyte Count                                      | 0.31    | -                      | -              |  |
| Absolute Eosinophil Count                                    | 0.38    | -                      | -              |  |
| Absolute Basophil Count                                      | 0.01    | -                      | -              |  |

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. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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### DEPARTMENT OF LABORATORY MEDICINE

**Final Report** 

Patient Name: Mr Shovan Mandal MRN: 17600000235965 Gender/Age: MALE, 34y (25/07/1988)

Collected On: 25/03/2023 10:52 AM Received On: 25/03/2023 10:55 AM Reported On: 25/03/2023 06:23 PM

Barcode : F12303250119 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

| BIOCHEMISTRY              |        |      |   |  |
|---------------------------|--------|------|---|--|
| Test                      | Result | Unit | <b>Biological Reference Interval</b>  |  |
| HBA1C                     |        |      |   |  |
| HbA1c (HPLC)              | 5.3    | %    | Both: Normal: 4.0-5.6<br>Both: Prediabetes: 5.7-6.4<br>Both: Diabetes: => 6.5<br>ADA standards 2019<br>(Carpenter/ Coustan) |  |
| Estimated Average Glucose | 105.41 | -    | -   |  |

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. Samarpita Mukherjee MBBS, MD Biochemistry CONSULTANT

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Emergencies

# ADULT TRANS-THORACIC ECHO REPORT



| PATIENT NAME<br>GENDER/AGE<br>LOCATION                                | : Mr Shovan Mandal<br>: Male, 34 Years<br>: -                                     | PATIENT MRN<br>PROCEDURE DATE<br>REQUESTED BY    | : 17600000235965<br>: 25/03/2023 01:55 PM<br>: Dr. Swarup Paul |
|---|---|--|--|
| IMPRESSION  | <ul> <li>NO RWMA</li> <li>GOOD LEFT VENTRIC</li> <li>GRADE I DIASTOLIC</li> </ul> | RICULAR SYSTOLIC FUNCT                           |  |
| FINDINGS<br>CHAMBERS<br>LEFT ATRIUM<br>RIGHT ATRIUM<br>LEFT VENTRICLE |   |  | RWMA. GOOD LEFT VENTRICULAR<br>DIASTOLIC DYSFUNCTION.          |
| RIGHT VENTRICLE   | : NORMAL IN SIZE. GOO   | D RV SYSTOLIC FUNCTION                           | N, TAPSE 26 MM   |
| <b>VALVES</b><br>MITRAL<br>AORTIC<br>TRICUSPID<br>PULMONARY           |   | ORMAL, AV VMAX 123 CI<br>ORMAL, TRIVIAL TR, TRPO | M/SEC, PEAK PG - 6.6 MMHG<br>G 13 MMHG                         |
| <b>SEPTAE</b><br>IAS<br>IVS   | : INTACT<br>: INTACT  |  |  |
| <b>ARTERIES AND VEI</b><br>AORTA<br>PA<br>IVC                         | : NORMAL<br>: NORMAL , NO PULMOI  | NARY HYPERTENSION<br>MAL RESPIRATORY VARIA       | ATION  |
| PERICARDIUM   | : NORMAL  |  |  |
| INTRACARDIAC M  | ASS : NO INTRACARDIAC MA  | SS OR THROMBUS SEEN                              | IN TTE.  |

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DR. SANYAL SOUGATA ASSOCIATE CONSULTANT

25/03/2023 01:55 PM

| PREPARED BY  | : SURAJIT BISWAS(353011) | PREPARED ON  | : 25/03/2023 01:57 PM |
|--------------|--------------------------|--------------|-----------------------|
| GENERATED BY | : ANKANA GHOSH(357843)   | GENERATED ON | : 30/03/2023 09:46 AM |

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Narayana Multispeciality Hospital

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| Patient Name | Shovan Mandal  | Requested By       | Dr. Swarup Paul     |
|--------------|----------------|--------------------|---------------------|
| MRN          | 17600000235965 | Procedure DateTime | 2023-03-25 12:06:13 |
| Age/Sex      | 34Y 8M/Male    | Hospital           | NH-BARASAT          |

# ULTRASONOGRAPHY OF WHOLE ABDOMEN

<u>LIVER</u> : Liver is mildly enlarged in size (15.8 cm) but has normal shape and outline. There is moderate diffuse homogenous increase of hepatic parenchymal echogenicity with slightly impaired visualization of intrahepatic vessels and diaphragm. 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 – 9.1 mm at porta.

**<u>GALL BLADDER</u>**: It is optimally distended. No evidence of intraluminal calculus or sludge is seen. **Few echogenic foci casting distal comet-tail artifact noted in wall of gall bladder, suggesting cholesterosis.** Gall bladder wall is normal in thickness. No pericholecystic collection or frank mass formation is seen.

**<u>SPLEEN</u>**: It is normal in size (10.9 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 – 9.6 cm. Left kidney – 11.1 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.

**PROSTATE GLAND** : It is normal in size, shape, outline & echotexture. Capsule is intact. Margin is regular. Median lobe is not enlarged. Prostate measures : (3.4 x 3.0 x 3.4) cm Volume : 18.6 cc

Both seminal vesicles appear normal.

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

No ascites seen.

No pleural effusion seen.

# **IMPRESSION**:

- Mild hepatomegaly with moderate fatty liver.
- Cholesterosis of gall bladder.

Advise : Clinical correlation & further relevant investigation suggested.



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

# 1334

| Patient Name | Shovan Mandal  | Requested By       | Dr. Swarup Paul     |
|--------------|----------------|--------------------|---------------------|
| MRN          | 17600000235965 | Procedure DateTime | 2023-03-25 11:22:55 |
| Age/Sex      | 34Y 8M/Male    | Hospital           | NH-BARASAT          |

# X-RAY - CHEST (PA)

Lung fields appear normal.

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 : Mr Shovan Mandal MRN : 17600000235965 Gender/Age : MALE , 34y (25/07/1988)

Collected On : 25/03/2023 01:26 PM Received On : 25/03/2023 01:29 PM Reported On : 25/03/2023 03:11 PM

Barcode : F12303250137 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

| BIOCHEMISTRY                              |        |       |                                       |  |
|---|--------|-------|---------------------------------------|--|
| Test                                      | Result | Unit  | <b>Biological Reference Interval</b>  |  |
| Post Prandial Blood Sugar (PPBS) (Glucose | 129    | mg/dL | Normal: ≤140<br>Pre-diabetes: 141-199 |  |
| Oxidase, Hydrogen Peroxidase)             |        |       | 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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Final Report

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 Mr Shovan Mandal
 MRN : 17600000235965
 Gender/Age : MALE , 34y (25/07/1988)

 Collected On :
 25/03/2023 10:52 AM
 Received On : 25/03/2023 10:55 AM
 Reported On : 25/03/2023 01:33 PM

 Barcode :
 F12303250117
 Specimen :
 Serum
 Consultant :
 Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

| BIOCHEMISTRY  |          |                           |   |  |  |  |  |
|---|----------|---------------------------|---|--|--|--|--|
| Test  | Result   | Unit                      | <b>Biological Reference Interval</b>  |  |  |  |  |
| SERUM CREATININE  |          |                           |   |  |  |  |  |
| Serum Creatinine (Enzymatic Method)                         | 1.0      | mg/dL                     | 0.66-1.25   |  |  |  |  |
| eGFR  | 85.6     | mL/min/1.73m <sup>2</sup> | -   |  |  |  |  |
| Serum Sodium (ISE Direct )                                  | 143      | mmol/L                    | 137.0-145.0   |  |  |  |  |
| Serum Potassium (ISE Direct )                               | 4.3      | mmol/L                    | 3.5-5.1   |  |  |  |  |
| LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)                      |          |                           |   |  |  |  |  |
| Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase) | 202 H    | mg/dL                     | Desirable: < 200<br>Borderline High: 200-239<br>High: > 240   |  |  |  |  |
| Triglycerides (Enzymatic End Point)                         | 176      | mg/dL                     | Normal: < 150<br>Borderline: 150-199<br>High: 200-499<br>Very High: > 500   |  |  |  |  |
| HDL Cholesterol (HDLC) (Direct Measure, PTA<br>/MgCl2)      | 45       | mg/dL                     | Low: <40.0 mg/dL<br>High: >60.0 mg/dL   |  |  |  |  |
| Non-HDL Cholesterol   | 157.0    | -                         | -   |  |  |  |  |
| LDL Cholesterol (End Point)                                 | 125.16 H | mg/dL                     | Optimal: < 100<br>Near to above optimal: 100-129<br>Borderline High: 130-159<br>High: 160-189<br>Very High: > 190 |  |  |  |  |
| VLDL Cholesterol (Calculated)                               | 35       | mg/dL                     | 0.0-40.0  |  |  |  |  |
| Cholesterol /HDL Ratio (Calculated)                         | 4.5      | -                         | -   |  |  |  |  |
| LIVER FUNCTION TEST(LFT)                                    |          |                           |   |  |  |  |  |
| Bilirubin Total (Dyphylline, Diazonium Salt)                | 1.1      | mg/dL                     | 0.2-1.3   |  |  |  |  |
| Conjugated Bilirubin (Direct) (Direct Measure)              | 0.4 H    | mg/dL                     | 0.0-0.3 Page 1 of 3   |  |  |  |  |
|   |          |                           |   |  |  |  |  |

| Narayana Multispeciality Hospital   | Appointments              |  |
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| Email: info.brs.kolkata@narayanahealth.org   www.narayanahealth.org                   | 9836-75-0808              |  |



| Patient Name: Mr Shovan Mandal MRN: 1760000                      | 0235965 | Gender/Age : MALE , 34y (25/0 | 7/1988)    |
|--|---------|-------------------------------|------------|
| Unconjugated Bilirubin (Indirect) (Direct<br>Measure)            | 0.7     | mg/dL                         | 0.3-1.3    |
| Total Protein (Biuret, No Serum Blank, End Point)                | 7.8     | g/dL                          | 6.3-8.2    |
| Serum Albumin (Bromcresol Green (BCG))                           | 4.5     | gm/dL                         | 3.5-5.0    |
| Serum Globulin (Calculated)                                      | 3.3     | g/dL                          | 2.0-3.5    |
| Albumin To Globulin (A/G)Ratio (Calculated)                      | 1.36    | -                             | 1.0-2.1    |
| SGOT (AST) (Multiple-point Rate)                                 | 54      | U/L                           | 17.0-59.0  |
| SGPT (ALT) (Uv With P5p)   | 86 H    | U/L                           | <50.0      |
| Alkaline Phosphatase (ALP) (PMPP, AMP Buffer)                    | 86      | IU/L                          | 38.0-126.0 |
| Gamma Glutamyl Transferase (GGT) (G-<br>glutamyl-p-nitroanilide) | 75 H    | U/L                           | 15.0-73.0  |
| THYROID PROFILE (T3, T4, TSH)                                    |         |                               |            |
| Tri lodo Thyronine (T3) (CLIA)                                   | 1.53    | ng/mL                         | 0.97-1.69  |
| Thyroxine (T4) (CLIA)  | 8.62    | μg/dl                         | 5.53-11.0  |
| TSH (Thyroid Stimulating Hormone) (CLIA)                         | 2.232   | μlU/mL                        | 0.4-4.049  |
|  |         |                               |            |

--End of Report-

qual

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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Barcode : F12303250117 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7001216691

| BIOCHEMISTRY                           |        |       |                                      |  |  |
|--|--------|-------|--------------------------------------|--|--|
| Test                                   | Result | Unit  | <b>Biological Reference Interval</b> |  |  |
| Blood Urea Nitrogen (BUN) (Urease, UV) | 10.27  | mg/dL | 9.0-20.0                             |  |  |

--End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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