

91 90029 54162

today at 9:25 am



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

ভূমিকাতন্ত্রের আই ডি / Enrollment No.: 1111/36927/00158

To
ব্রততী বানার্জী
BRATATI BANERJEE
HABRA(M) WORD NO 4
Habra - I
Habra
Habra - I North 24 Parganas
West Bengal 743263

22/10/2013
58030404


MN580304041FT



আপনার **আধার** সংখ্যা / Your **Aadhaar** No. :
9900 8899 5080

আধার - সাধারণ মানুষের অধিকার

 **ভারত সরকার**
Government of India


ব্রততী বানার্জী
BRATATI BANERJEE
পিতা : ব্রহ্মানন্দ বানার্জী
Father : Brohmananda Banerjee
জন্মতারিখ / DOB : 09/01/1991
মহিলা / Female



9900 8899 5080

আধার - সাধারণ মানুষের অধিকার

Bratati Banerjee

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36C, B.T ROAD OPP "RBU"
KOL 700002
Ph 033 25565555
033 25563333

Bratati

Banerjee

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बँक ऑफ बरोडा
Bank of Baroda

नाम : ब्रतती बरती
नाम : **BANERJEE BRATATI**
संस्थापक सं. क्र. २०१९६०
E. C. No. 174760


संस्थापक संस्थापक


ब्रतती बरती
ब्रतती बरती



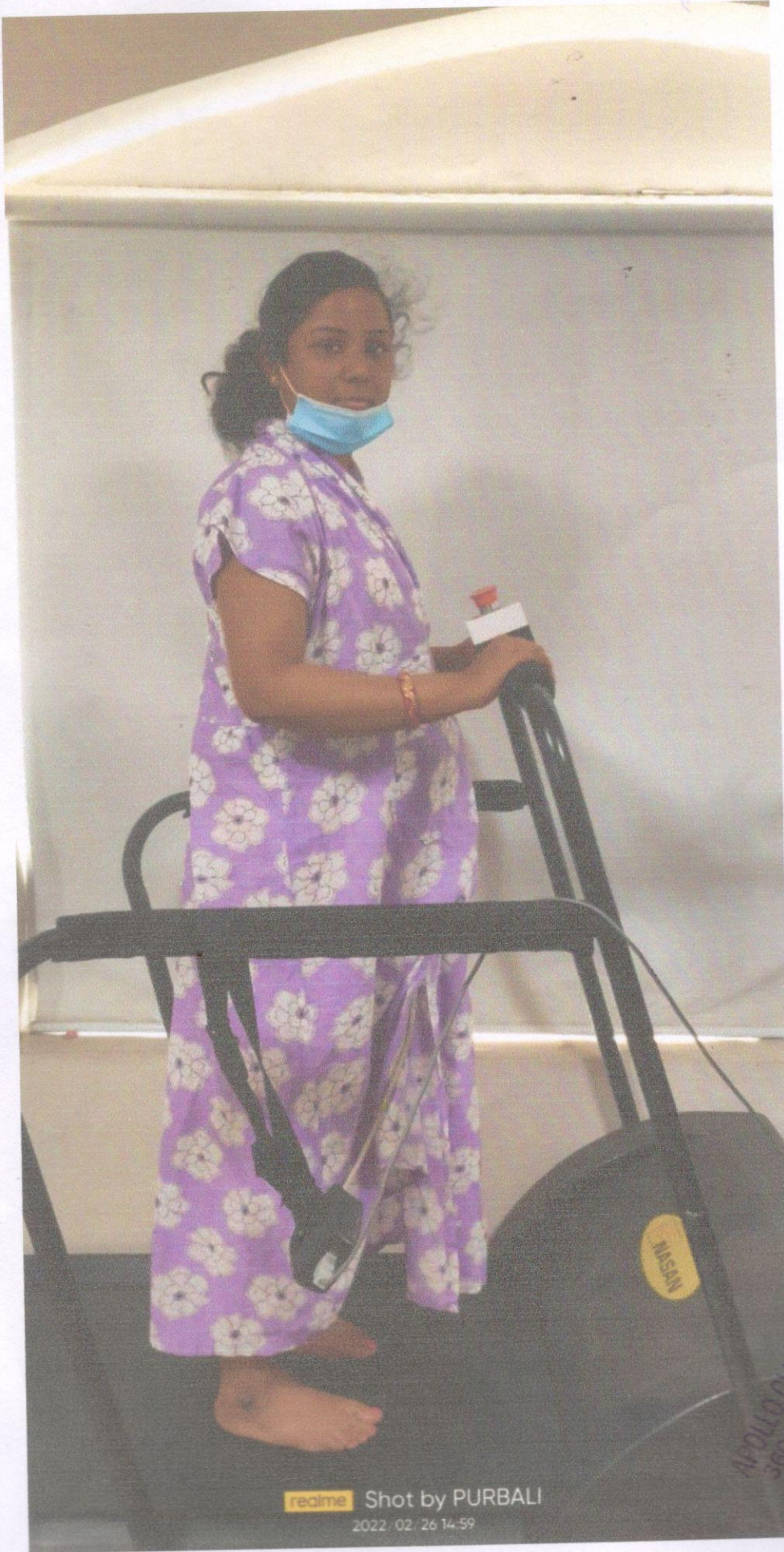
26 Feb 2022 10:18:07 am
Satchasi Para

APOLLO CLINIC, CHENNAI
36C, B.T ROAD OPP "RBS"
KOL 701102
0255565555
0255563333



26 Feb 2022 10:31:56 am
Satchasi Para

APOLLO CLINIC (CIVIL)
36C, B.T ROAD, DRR
KOLKATA 700002
Ph 033 25565555
033 25563333



realme Shot by PURBALI
2022-02-26 14:59

APOLLO CLINIC OM TOWER
569, B.T. ROAD OPP "R8U"
KOL 700002
Ph 033 25565555
033 25563333

Patient Name: MRS. BRATATI BANERJEE
UHID/MR No.: FSIN.0000014124
Visit Date: 26.02.2022
Sample collected on: 26.02.2022
Ref Doctor: SELF

Age/Gender: 31 Years / Female
OP Visit No.: FSINOPV17177
Reported on: 26.02.2022
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

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

Results are to be correlate clinically.

*** End of the report***

BK

Lab Technician/Technologist
Madhumita_Biswas

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

Patient Name: MRS. BRATATI BANERJEE
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APOLLO CLINIC @ OM TOWER
 Opp. of Rabindra Bharati University

DEPARTMENT OF HAEMATOLOGY

TEST NAME	RESULT	BIOLOGICAL REFERENCE	UNIT
COMPLETE BLOOD COUNT			
HAEMOGLOBIN	12.3	Female 11.5-14.5 Male 12.5-16.5	gm%
Method: Non cyanideSis Based			
RBC COUNT	4.1	Female 3.8-4.8 Male 4.5-5.5	mill/Cumm
Method: Electrical Impedence			
HEMATPOCRIT (PCV)	38.0	Female 36-46 Male 42-52	%
MCV	92.6	83-101 fl	fl
Method: Calculated			
MCH	30.0	27-32 pg	pg
Method: Calculated			
MCHC	32.3	31.5-34.5	%
Method: Calculated			
PLATELET COUNT	2.35	1.5-4.5 lakhs/cu mm	Lakhs/cumm
Method: Electrical Impedence			
TOTAL WBC COUNT	9400	4000-11000	/cumm
Method: Electrical Impedence			
NEUTROPHIL	67	40-80	%
Method: Microscopy			
LYMPHOCYTE	38	20-45	%
Method: Microscopy			
MONOCYTE	03	2-10	%
Method: Microscopy			
EOSINOPHIL	02	1-6	%
Method: Microscopy			
BASOPHIL	00	<1-2	%
Method: Microscopy			
ESR	25	Male:12 Female:19	mm/hr mm/hr
Method: westergreen's			

Note: RBC are Normocytic with normochromic.

INSTRUMENT USED:

SYSTEMEX (XP 100)

*Please correlate with clinical conditions.

End of the report

BX

Lab Technician/Technologist
 Madhumita_Biswas

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DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
GLUCOSE- (FASTING) GLUCOSE- (FASTING) Method: (GOD-POD)	92.0	70.0- 110.0	mg/dl
GLUCOSE- (POST PRANDIAL) GLUCOSE- (POST PRANDIAL) Method: (GOD-POD)	121.0	80.0- 140.0	mg/dl

End of the report

Results are to be correlate clinically

BL

Lab Technician / Technologist
Madhumita_Biswas

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DEPARTMENT OF SPECIAL BIOCHEMISTRY
REPORT PREPARED ON PATHOLOGY

Test Name	Value	Unit	Normal Range
Glycosylated Haemoglobin (HbA1c), HPLC Glycosylated Haemoglobin (HbA1c), HPLC	4.3	%	Excellent Control: <4 Good Control: 4-6 Fair Control : >6-7 Action Suggested: >7-8 Poor Control : >8
<i>Methodology: HPLC</i> <i>Instrument Used: Bio-Rad D-10</i>			
Estimated Average Glucose (EAG)	118	mg/dL	Excellent Control: 90-120 Good Control: 120-150 Fair Control: > 150-180 Action Suggested: 181-210 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 (HbF) 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 *****

BK

Lab Technician / Technologist
Susmita_Saha

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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIPID PROFILE			
Triglyceride Method: GPO-POD	152	<200	mg/dl
Cholesterol Method: CHO - POD	226	Desirable blood cholesterol :< 220 Borderline High: 170.0-199.0 High: > 199.0 mg/dl	mg/dl
HDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	62	50-80mg/dl	mg/dl
LDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	134	<130.0 mg/dl	mg/dl
VLDL CHOLESTEROL	30	20-35 mg/dl	mg/dl
CHOLESTEROL: HDL RATIO *	3.6		
LDL: HDL RATIO	2.1		

End of the report

Results are to be correlate clinically

BK

Lab Technician / Technologist
Madhumita_Biswas

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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIVER FUNCTION TEST (PACKAGE)			
BILIRUBIN- TOTAL Method: Daizo	0.9	1.1 Adult	mg/dl
BILIRUBIN- DIRECT Method: Daizo with DPD	0.3	Adult & Children: <0.25	mg/dl
BILIRUBIN- INDIRECT Method: calculated	0.6	0.1-1.0	mg/dl
TOTAL- PROTIEN Method: Photometric UV test	6.5	Adult: 6.6-8.8	gms/dl
ALBUMIN Method: BCG	3.8	3.5-5.2	gms/dl
GLOBULIN Method: calculated	2.7	1.8-3.0	gms/dl
A:G Ratio	1.4:1		
SGOT/AST Method: IFCC WITHOUT P5P	45	up to 45	U/L
SGPT/ALT Method: IFCC WITHOUT P5P	52	up to 40	U/L
ALKA-PHOS Method: PNPP- AMP BUFFER	182	Adult: 20-220 Child: 104-380	U/L
GGT [Gamma Glutamyl Transferase]	29	7-32	U/L

*Please correlate with clinical conditions.

End of the report

BL

Lab Technician / Technologist

Susmita Saha

DR. BIPARNAK HALDAR

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CONSULTANT PATHOLOGIST

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Age/Gender: 31 Years / Female
OP Visit No.: FSINOPV17177
Reported on: 26.02.2022
Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>	<u>UNITS</u>
BLOOD UREA NITROGEN (BUN) BLOOD UREA NITROGEN (BUN) Method: Calculated	11.9	8 - 20	mg/ dl
CREATININE Methodology: Jaffe Reaction Instrument Used: FULLY AUTOMATED ANALYZER EM-200	0.87	Male: 0.7-1.4 Female: 0.6-1.2 Newborn: 0.3-1.0 Infant: 0.2-0.4 Child: 0.3-0.7 Adolescent: 0.5-1.0	mg/dl
URIC ACID Method: Uricase	4.25	Female: 2.6 - 6.0 Male: 3.4 - 7.0	mg/dl

End of the report

Results are to be correlate clinically

BL

Lab Technician / Technologist
Susmita_Saha

DR. BIPARNAK HALDAR
MBBS, MD (PATHOLOGY)
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Patient Name: MRS. BRATATI BANERJEE
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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNIT
TSH:THYROID STIMULATING HORMONE-SERUM Method : CLIA	1.25	0.35-5.50	μIU/ml
TOTAL T3: TRI IODOTHYRONINE – SERUM Method : CLIA	1.05	0.87 – 1.78	ng/dl
TOTAL T4: THYROXINE – SERUM Method : CLIA	9.65	8.09 – 14.03	μg/Dl

Comment: Note :>1. TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm . The variation is of the order of 50% . hence time of the day has influence on the measured serum TSH concentrations
> 2. Values <0.03 μIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals.
Clinical Use:> Primary Hypothyroidism > Hyperthyroidism > Hypothalamic – Pituitary hypothyroidism
> Inappropriate TSH secretion > Nonthyroidal illness > Autoimmune thyroid disease
>Pregnancy associated thyroid disorders > Thyroid dysfunction in infancy and early childhood.

Results are to be correlate clinically .

End of the report

BK

Lab Technician / Technologist
Ranit Bhattacharjee

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CONSULTANT PATHOLOGIST

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Age/Gender: 31 Years / Female
OP Visit No.: FSINOPV17177
Reported on: 26.02.2022
Specimen: URINE

URINE ROUTINE EXAMINATION

URINE FOR ROUTINE EXAMINATION

Test Name	Result	Unit	Method
<u>PHYSICAL EXAMINATION</u>			
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
<u>CHEMICAL EXAMINATION</u>			
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
<u>MICROSCOPIC EXAMINATION</u>			
PUS CELL	1-2	/HPF	Light Microscopy
RBC	Not found	/HPF	Light Microscopy
EPITHELIAL CELL	3-4	/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

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

MR. NO- FSIN.0000000

SEX-FEMALE

NAME:-BRATATI BANERJEE

EXAMINATION DATE-26/02/2022

AGE-31 YRS

REPORT DATE-26/02/2022

REF DR. SELF

FINDINGS:

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



DR. ARNAB MANDAL

MD, Physician, PGDUS (Delhi) CEPT-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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NAME: MRS.BRATATI BANERJEE	AGE: 31YRS	SEX:FEMALE
REF BY: SELF	MR NO:FSIN-0000	DATE: 26/02/2022

ULTRASOUND OF WHOLE ABDOMEN

LIVER: Liver is **enlarged** in size(**16.18cm**), 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 (**6mm**) in diameter. The portal vein measures (**10mm**) at porta.

GALL BLADDER:Gall bladder is normal .Wall is normal. No calculus or mass is seen within the gall bladder.

SPLEEN: It is normal in size (**8.68cm**), Shape, Outline and echotexture. No parenchymal lesion is noted.

PANCREAS: It is normal 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 – (**9.77cm**).

LEFT KIDNEY: kidney are normal in position, size, shape, outline and echotexture. Small cardigan cist

LEFT KIDNEY: measures –(**10.10cm**).

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

UTERUS : It is normal in size, shape and echotexture. It is anteverted. No SOL is seen in the myometrium. Uterine cavity is empty. Uterus measures- (**5.61cmX8.43cmX2.78cm**) Endometrial thickness is normal measures- **0.90cm**

RIGHT OVARY- They are normal in size, shape ,outline and echotexture.

measures-(**2.85cmX1.75cmX1.37cm**)

- CC Changes in right ovary(**1.82cmX1.09cm**)

LEFT OVARY- They are normal in size, shape ,outline and echotexture.

measures-(**2.79cmX1.83cmX1.24cm**)

- CC Changes in left ovary(**1.37cmX1.04cm**)

IMPRESSION:

- CC CHANGES IN BOTH OVARIES.



A.K.ROY

M.B.B.S, Dip BMSc, DTM&H (Cal)

Certificate on CEBT Abdomino Pelvic, USG(WBHSU)

Patient Name: Mrs. BRATATI BANERJEE 31/F

Resting ECG Report

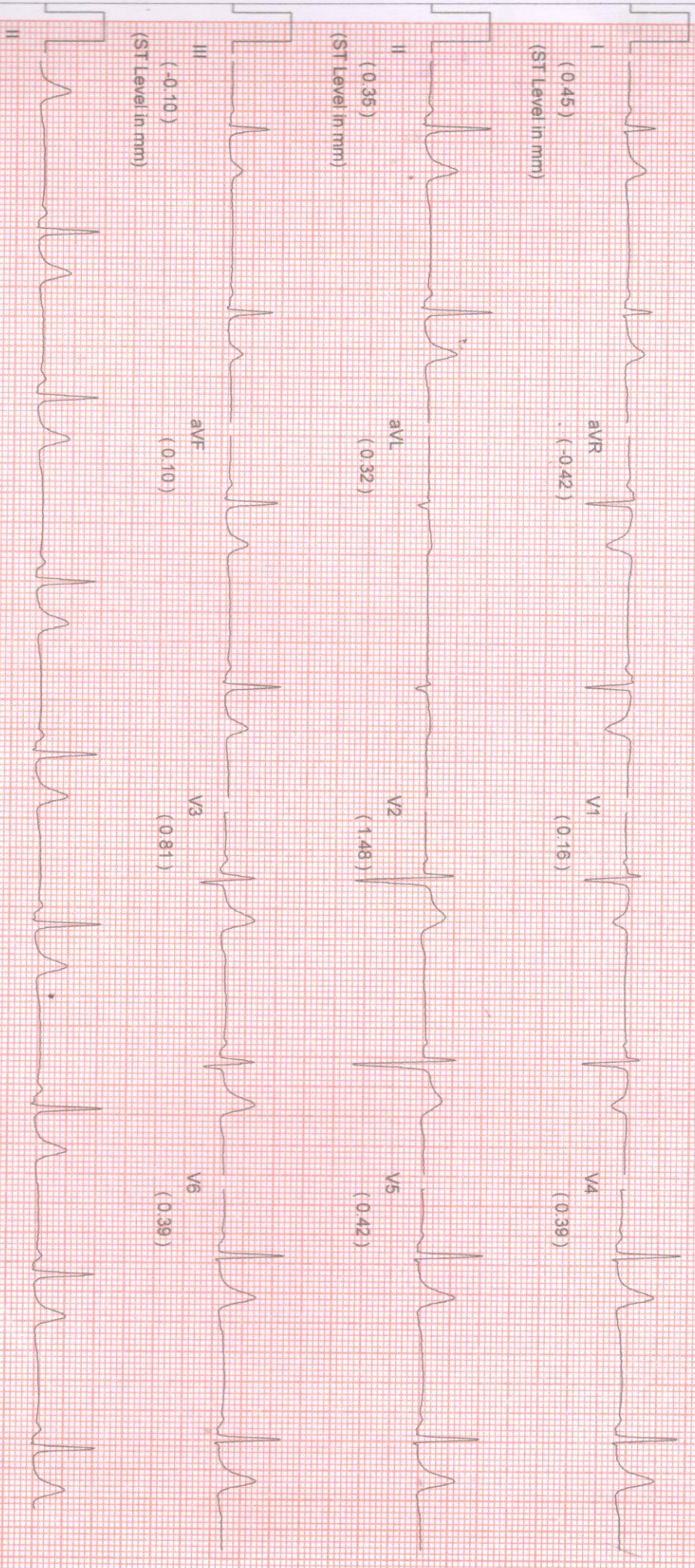
February 26, 2022
Time 11:04:31

QT/QTc: 0.552 / 0.509 Sec
P-QRS-T Axis (48)-(64)-(48) deg

PR Interval: 0.15 sec
QRS Duration: 0.076 Sec

RR Interval: 1.18 sec

HR: 50 bpm
BP: 140/70 mmHg



Comments :-

Bratati Banerjee


NAME: MS.BRATATI BANERJEE	MR NO: FSIN-0000	DATE : 26.02.2022
AGE: 31YRS.	SEX:FEMALE	REF BY: SELF

ECG REPORT

HR : 50 b/min
AXIS : NORMAL
RHYTHM : SINUS
PR INTERVAL : 0.15 sec
QT INTERVAL : 0.509 sec
QRS DURATION : 0.076 sec
T-WAVE : NORMAL.


IMPRESSION:

- RESTING ECG IS WITHIN NORMAL LIMITS.


Dr. SIDDHARTHA KUNDU
MBBS (Cal), PGDCC, CCEBDM
Clinical Cardiologist
Ex Sr Resident, Cardiology Dept
B.R Singh Hospital, Eastern Railway

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