

#### **DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Collected On: 03/05/2023 10:21 AM Received On: 03/05/2023 10:28 AM Reported On: 03/05/2023 11:37 AM

Barcode : J12305030100 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
Fasting Blood Sugar (FBS) (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-

Ritu Briya

Dr. Ritu Priya MBBS, MD, Biochemistry Consultant

#### Note

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



#### Narayana Superspeciality Hospital

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> Emergencies 83348 30003



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**Final Report** 

Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Collected On: 03/05/2023 10:21 AM Received On: 03/05/2023 10:28 AM Reported On: 04/05/2023 12:13 PM

Barcode : L12305030004 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

#### NARAYANA SUPERSPECIALITY HOSPITAL BLOOD CENTRE

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

--End of Report-

Smita Priyom

Dr. Smita Priyam MBBS, MD, Pathology REGISTRAR

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Final Report

 Patient Name : Mr Suman Deb Burman
 MRN : 17650000238035
 Gender/Age : MALE , 37y (04/07/1985)

 Collected On : 03/05/2023 12:36 PM
 Received On : 03/05/2023 12:37 PM
 Reported On : 04/05/2023 05:31 PM

 Barcode : J42305030013
 Specimen : Urine
 Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

	CLINICAL PATHOLOGY		
Test	Result	Unit	<b>Biological Reference Interval</b>
Urine For Sugar	Absent	-	-
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	30	ml	-
Colour	Pale Yellow	-	-
Appearance	Slight Hazy	-	-
CHEMICAL EXAMINATION			
pH(Reaction)	6.0	-	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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Hospital Address : 120/1, Andul Road, Howrah 711 103 Email: info.nshhowrah@narayanahealth.org   <b>www.narayanahealth.org</b>	Emergencies 83348 30003	



Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

MICROSCODIC	EXAMINATION
WIICKUSCUPIC	EVAIMINATION

Pus Cells	5-6(in Clump)	/hpf	0 - 2
RBC	Not Found	-	0 - 3
Epithelial Cells	1-2	/hpf	-
Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Scanty	-	-
Yeast Cells	Not Found	-	-

--End of Report-

Smita Priyam

Dr. Smita Priyam MBBS, MD, Pathology REGISTRAR

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Final Report

Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Collected On: 03/05/2023 10:21 AM Received On: 03/05/2023 10:28 AM Reported On: 03/05/2023 12:52 PM

Barcode : J32305030009 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

IMMONOLOGY					
Test	Result	Unit	<b>Biological Reference Interval</b>		
THYROID PROFILE (T3, T4, TSH)					
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.54	ng/mL	0.97-1.69		
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	10.1	µg/dl	5.53-11.0		
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	2.188	μIU/mL	0.4001-4.049		

--End of Report-

Ritu Briya

Dr. Ritu Priya MBBS, MD, Biochemistry Consultant

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#### **DEPARTMENT OF LABORATORY MEDICINE**

Final Report

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 Patient Name :
 Mr Suman Deb Burman
 MRN : 17650000238035
 Gender/Age : MALE , 37y (04/07/1985)

 Collected On :
 03/05/2023 10:21 AM
 Received On : 03/05/2023 10:28 AM
 Reported On : 03/05/2023 10:54 AM

 $Barcode: J22305030094 \quad Specimen: Whole Blood \quad Consultant: EXTERNAL(EXTERNAL) \\$ 

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

HAEMATOLOGY				
Test	Result	Unit	Biological Reference Interval	
COMPLETE BLOOD COUNT (CBC)				
Haemoglobin (Hb%) (sodium Lauryl Sulphate (SLS) Method)	15.0	g/dL	13.0-17.0	
Red Blood Cell Count (Electrical Impedance)	5.40	millions/ µL	4.5-5.5	
PCV (Packed Cell Volume) / Hematocrit (Calculated)	46.5	%	40.0-54.0	
MCV (Mean Corpuscular Volume) (Derived)	86.0	fL	83.0-101.0	
MCH (Mean Corpuscular Haemoglobin) (Calculated)	27.7	pg	27.0-32.0	
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.2	%	31.5-34.5	
Red Cell Distribution Width (RDW)	15.4 H	%	11.6-14.0	
Platelet Count (Electrical Impedance)	322	Thous/Cumm	150.0-400.0	
Mean Platelet Volume (MPV)	8.5	fL	7.0-11.7	
Total Leucocyte Count(WBC) (Electrical Impedance)	10.0	-	4.0-10.0	
DIFFERENTIAL COUNT (DC)				
Neutrophils	70.8	%	40.0-75.0	
Lymphocytes (Fluorescent Flow Cytometry)	22.0	%	20.0-40.0	
Monocytes (Fluorescent Flow Cytometry)	5.7	%	2.0-10.0	
Eosinophils (Fluorescent Flow Cytometry)	1.0	%	1.0-6.0	

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	Emergencies 83348 30003	



Patient Name : Mr Suman Deb Burman	MRN : 17650000238035	Gender/Age :	MALE , 37y (04/07/1985)	
Basophils (Fluorescent Flow Cytometry)	0.5	%	0.0-2.0	
Absolute Neutrophil Count	7.1	-	-	
Absolute Lympocyte Count	2.2	-	-	
Absolute Monocyte Count	0.6	-	-	
Absolute Eosinophil Count	0.1	-	-	
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-

Smita Priyam

Dr. Smita Priyam MBBS, MD, Pathology REGISTRAR

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**Final Report** 

#### Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Collected On : 03/05/2023 10:21 AM Received On : 03/05/2023 10:28 AM Reported On : 03/05/2023 12:48 PM

Barcode : J12305030101 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

BIOCHEMISTRY					
Test	Result	Unit	<b>Biological Reference Interval</b>		
HBA1C					
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:

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 Briya

Dr. Ritu Priya MBBS, MD, Biochemistry Consultant

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Collected On: 03/05/2023 10:21 AM Received On: 03/05/2023 10:28 AM Reported On: 03/05/2023 11:59 AM

Barcode : J22305030093 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

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

--End of Report-

Smita Priyam

Dr. Smita Priyam MBBS, MD, Pathology REGISTRAR

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> Emergencies 83348 30003



#### **DEPARTMENT OF LABORATORY MEDICINE**

**Final Report** 

Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Collected On : 03/05/2023 02:56 PM Received On : 03/05/2023 03:00 PM Reported On : 03/05/2023 03:53 PM

Barcode : J12305030155 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

	BIOCHE	MISTRY	
Test	Result	Unit	<b>Biological Reference Interval</b>
Post Prandial Blood Sugar (PPBS) (Glucose	151 H	mg/dL	Both: Normal: 70-139 Both: Pre-diabetes: 140-199
Oxidase, Peroxidase)			Both: Diabetes: => 200 ADA standards 2019

#### 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-

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Appointments 180-0309-0309 (Toll Free)

Emergencies 83348 30003



#### **DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Collected On: 03/05/2023 10:21 AM Received On: 03/05/2023 10:28 AM Reported On: 03/05/2023 12:48 PM

Barcode : J12305030099 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

	BIOCHEMI	STRY	
Test	Result	Unit	<b>Biological Reference Interval</b>
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.80	mg/dL	0.66-1.25
eGFR (Calculated By MDRD Formula)	108.8	mL/min/1.73m <sup>2</sup>	Indicative for renal impairment: <60 Note: eGFR is inaccurate for Hemodynamically unstable patients . eGFR is not applicable for less than 18 years of age .
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric - Urease)	13.08	mg/dL	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	141	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.7	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	230 H	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides	208 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)	52	mg/dL	40.0-60.0
Non-HDL Cholesterol	178.0	-	-
LDL Cholesterol (Colorimetric)	127.09 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 Suman Deb Burman MRN : 1	7650000238035	Gender/Age : MAL	Е , 37у (04/07/1985)	
VLDL Cholesterol (Calculated)	42 H	mg/dL	0.0-40.0	
Cholesterol /HDL Ratio	4.5	-	-	
LIVER FUNCTION TEST(LFT)				
Bilirubin Total (Colorimetric -Diazo Method)	1.0	mg/dL	0.2-1.3	
Conjugated Bilirubin (Direct) (Calculated)	0.4	mg/dL	0.0-0.4	
Unconjugated Bilirubin (Indirect) (Calculated)	0.6	-	-	
Total Protein (Colorimetric - Biuret Method)	8.2	g/dL	6.3-8.2	
Serum Albumin (Colorimetric - Bromo-Cresol Gre	een) 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 (pyridoxa 5-phosphate))	al- 21	U/L	17.0-59.0	
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxa phosphate))	II-5- <b>19</b>	U/L	<50.0	
Alkaline Phosphatase (ALP) (Multipoint-Rate - nitro Phenyl Phosphate, AMP Buffer)	P- 81	U/L	38.0-126.0	
Gamma Glutamyl Transferase (GGT) (Multipo Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	pint <b>21</b>	U/L	15.0-73.0	

--End of Report-

Ritu Briya

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#### **DEPARTMENT OF LABORATORY MEDICINE**

Final Report

 Patient Name : Mr Suman Deb Burman
 MRN : 17650000238035
 Gender/Age : MALE , 37y (04/07/1985)

 Collected On : 03/05/2023 02:55 PM
 Received On : 03/05/2023 03:00 PM
 Reported On : 04/05/2023 05:33 PM

 Barcode : J42305030018
 Specimen : Stool
 Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9830518221

	<b>CLINICAL PAT</b>	HOLOGY	
Test	Result	Unit	Biological Reference Interval
STOOL ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
Colour	Brownish	-	-
Consistency	Soft	-	-
Mucus	Present	-	-
Blood	Not Visible	-	-
CHEMICAL EXAMINATION			
Reaction	Acidic	-	-
MICROSCOPE EXAMINATION			
Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Trophozoite	Not Seen	-	-
Red Blood Cells (Stool)	Not Seen	-	-
Pus Cells	1-3	/hpf	0 - 2
Starch	Not Seen	-	-
Epithelial Cells	Not Seen	/hpf	-
Veg Cells	Present (+)	-	-
Fat	Not Seen	-	-

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(A Unit of Meridian Medical Research & Hospital Ltd.) CIN U85110W81995PLC071440 Registered office : Andul Road, Podrah, Howrah 711 109	180-0309-0309 (Toll Free)
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Patient Name : Mr Suman Deb Burman MRN : 17650000238035 Gender/Age : MALE , 37y (04/07/1985)

Larvae

Not Seen

Bacteria

Present(+)

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Patient details: Name:MR.SUMAN DEB BURMAN Age: 37 YEARS Examination Date: 03.05.2023 Consultant Name:DR.

MRN:17650000238035

Gender:MALE Processed Date: 03.05.2023 Patient Location: OPD

# ECHOCARDIOGRAPHY REPORT

### MEASUREMENT:

AO: 28 (20-40) mm	LVID(d): 46 (36-52) mm	IVS(d): 09 (6-11) mm
LA: 30 (19-40) mm	LVID(s): 27 (23-39) mm	PWd: 09 (6-11) mm
RVOT: 24 mm		LVEF ~ 64 %

#### VALVES:

1

Naraya

(A Unit of Me

fice : Andul Road, Podrah, H	Uman	111 100	Emergeno
a Superspeciality	ospital	1d) CIN U85110W01990FL011440	Appointmen 1800-309-0309 (Toll Fre
GREAT ARTERIES:	:	Normal	
IAS	:	Intact	
<u>SEPTAL</u> IVS	:	Intact	
Right Ventricle	:	Normal	
Left Ventricle	:	Normal	
Right Atrium	:	Normal	
Left Atrium	:	Normal	
CHAMBERS (Dime	nsior	1)	
Pulmonary Valve	:	Normal	
Tricuspid Valve	:	Normal	
Aortic Valve	:	Normal	
Mitral Valve	:	Normal	

1

Registered office : Andul Road, Podrah, Howrah 711 103 Hospital Address : 120/1, Andul Road, Howrah 711 103 Emergencies 83348 30003

### DOPPLER DATA:



	Velocity(in m/s)	Peak PG(mmHg)	Mean PG(mmHg)	Regurgitation
Mitral	E-0.7, A-0.5			0/4
Aortic	0.9	3.9		0/4
Tricuspid	2.3	22		Trivial
Pulmonary	0.9	3.9		Trivial

LVOT : No significant gradient noted.

Vegetation/Thrombus : Nil

Pericardium : Normal

**Other Findings** : E/E'

**Final Diagnosis:** 

Normal size cardiac chambers. No significant regional wall motion abnormality of LV at rest. Normal LV systolic function. LV EF~ 64% Adequate LV diastolic compliance.

Clinical correlation please. NOTE: Echo of Patient: MR.SUMAN DEB BURMAN MRN: 17650000238035 has been done on 03.05.2023 and reported on 03.05.2023

Dr. Masud Syed mehedi Associate consultant

TECHNICIAN MUSTARI

TB: K. DEB

# Narayana Superspeciality Hospital

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Patient Name	Suman Data				
MRN	Suman Deb Burman	Requested By	EXTERNAL		
	17650000238035	Procedure DateTime			
Age/Sex	37Y 9M / Male	rocedure Datelime	2023-05-03 12:37:48		
	and / Male	Hospital	NH-NMH & NSH		

# USG OF WHOLE ABDOMEN (SCREENING)

# USG OBSERVATIONS:

### LIVER

Normal in size (12.4 cm), shape and outline. Increased parenchymal echogenicity is noted. Two well defined hyperechogenic lesions measures 1.6 x 1.4 cm & 1.5 x 1.1 cm adherent to each other noted in right lobe of liver --- likely ? hemangiomas. No intrahepatic biliary dilatation. Intrahepatic

# GALL BLADDER:

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

C.B.D: Not dilated. It measures 4.1 mm.

PORTAL VEIN: Portal vein is normal. It measures 9.6 mm.

# PANCREAS:

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

### SPLEEN:

Normal in size (10.4 cm) and echotexture. No focal or diffuse lesion seen.

# KIDNEYS:

Right kidney measures 9.9 cm. Left kidney measures 10.5 cm. Normal in size, 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.

URINARY BLADDER: Wall thickness normal. Luminal echoes normal. No calculi.

#### PROSTATE:

Measures: 2.2 x 4.5 x 2.9 cm = 15 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.

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# Narayana Superspeciality Hospital

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Emergencies 83348 30003

Appointments



#### **IMPRESSION:**

Present study suggests:

- Two well defined hyperechogenic lesions adherent to each other noted in right lobe of liver ---likely ? hemangiomas.
- · Grade I fatty liver.

# ---- Further evaluation and clinical correlation suggested.

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.

maitri

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

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