Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 09:20 AM Reported On: 27/05/2023 10:13 AM

Barcode : 802305270287 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	CLINICAL CHE	MISTRY	
Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	1.00	mg/dL	0.66-1.25
eGFR	86.6	mL/min/1.73m <sup>2</sup>	-
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric - Urease)	6.17 L	-	9.0-20.0
Serum Sodium (Direct ISE - Potentiometric)	138	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.2	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
<b>Cholesterol Total</b> (Colorimetric - Cholesterol Oxidase)	204 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric )	154	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	46	mg/dL	40.0-60.0
Non-HDL Cholesterol	158.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	116.82 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	30.8	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	4.5	-	-

LIVER FUNCTION TEST(LFT)

Page 1 of 3

Patient Name : Ankit MRN : 17510001187688 Gen	ider/Age : MALE ,	32y (11/11/1990)	
Bilirubin Total (Colorimetric -Diazo Method)	1.09	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.17	mg/dL	0.0-0.4
<b>Unconjugated Bilirubin (Indirect)</b> (Colorimetric Endpoint)	0.93	-	-
Total Protein (Biuret Method)	7.40	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.60	gm/dL	3.5-5.0
Serum Globulin (Calculated)	2.8	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.65	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal- 5-phosphate))	32	U/L	17.0-59.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	42	U/L	<50.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	69	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide ( Szasz Method))	34	U/L	15.0-73.0

--End of Report-

Dr. Debasree Biswas MD, Biochemistry Clinical Biochemist MBBS, MD

Alphosh

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

### Note

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

(LFT, -> Auto Authorized) (Lipid Profile, -> Auto Authorized)

(Blood Urea Nitrogen (Bun), -> Auto Authorized)

(Serum Sodium, -> Auto Authorized)

(Serum Potassium, -> Auto Authorized)

(CR -> Auto Authorized)





Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 09:20 AM Reported On: 27/05/2023 10:57 AM

Barcode : 802305270287 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	CLINICAL CHEMISTRY		
Test	Result	Unit	<b>Biological Reference Interval</b>
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.25	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	9.35	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	5.564 H	uIU/ml	0.4001-4.049

--End of Report-

Alphosh

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

### Note

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



 Patient Name : Ankit
 MRN : 17510001187688
 Gender/Age : MALE , 32y (11/11/1990)

 Collected On : 27/05/2023 09:01 AM
 Received On : 27/05/2023 09:56 AM
 Reported On : 27/05/2023 11:54 AM

 Barcode : BR2305270026
 Specimen : Whole Blood
 Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

IMMUNOHAEMATOLOGY		
Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	А	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report-

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Dr. Amal Kumar Saha MBBS, D.PED, ECFMG Blood Bank Officer

Note

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





Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 09:21 AM Reported On: 27/05/2023 10:13 AM

Barcode : 802305270290 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	CLINICAL CHEMISTRY		
Test	Result	Unit	<b>Biological Reference Interval</b>
HBA1C			
HbA1c (HPLC)	5.3	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (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-

Shosh

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D

#### Note

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





Final Report

Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 09:21 AM Reported On: 27/05/2023 09:52 AM

Barcode : 812305270234 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	HAEMATOLO		
Test COMPLETE BLOOD COUNT (CBC)	Result	Unit	Biological Reference Interval
Haemoglobin (Hb%) (Photometric Measurement)	12.9 L	g/dL	13.0-17.0
Red Blood Cell Count (Electrical Impedance)	6.34 H	millions/ μL	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Calculated)	41.4	%	40.0-54.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	65.3 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	20.3 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.2 L	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	17.2 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	179	10 <sup>3</sup> /μL	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	10.0	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	6.0	10 <sup>3</sup> /µL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	65.4	%	40.0-75.0
Lymphocytes (VCSn Technology)	21.4	%	20.0-40.0
Monocytes (VCSn Technology)	5.8	%	2.0-10.0
Eosinophils (VCSn Technology)	6.8 H	%	1.0-6.0

Patient Name : Ankit	MRN : 17510001187688	Gender/Age : M	ALE , 32y (11/11/1990)		
Basophils (VCSn Techn	ology)	0.6	%	0.0-2.0	
Absolute Neutrophil	Count (Calculated)	3.93	10 <sup>3</sup> /μL	1.8-7.8	
Absolute Lympocyte	Count (Calculated)	1.29	10 <sup>3</sup> /μL	1.0-4.8	
Absolute Monocyte	Count (Calculated)	0.35	10 <sup>3</sup> /μL	0.0-0.8	
Absolute Eosinophil	Count (Calculated)	0.41	10 <sup>3</sup> /μL	0.0-0.45	
Absolute Basophil Co	ount (Calculated)	0.04	10 <sup>3</sup> /μL	0.0-0.2	

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

Hb HPLC is advised.

## --End of Report-

Dr. Sanjib Kumar Pattari MD, Pathology Consultant Pathology MBBS, MD. Reg No : 53635 (WBMC)

#### Note

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





Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 09:20 AM Reported On: 27/05/2023 09:58 AM

Barcode : 802305270289 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

Test	Result	Unit	<b>Biological Reference Interval</b>	
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	86	mg/dL	Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019	

### --End of Report-

CURICAL CUERAICTOV

Dr. Debasree Biswas MD, Biochemistry Clinical Biochemist MBBS, MD

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
   (Fasting Blood Sugar (FBS) -> Auto Authorized)

Shooh

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D





Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 09:20 AM Reported On: 27/05/2023 11:14 AM

Barcode : 812305270233 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	HAEMATOLOGY LAB			
Test	Result	Unit	<b>Biological Reference Interval</b>	
Erythrocyte Sedimentation Rate (ESR)	5	mm/1hr	0.0-10.0	
(Modified Westergren Method)				

--End of Report-

Dr. Rakhi Mandal MD, Pathology Consultant Pathology MBBS, MD

#### Note

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





Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On : 27/05/2023 12:22 PM Received On : 27/05/2023 12:49 PM Reported On : 27/05/2023 01:38 PM

Barcode : 802305270624 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	CLINICAL CHEMISTRY		
Test	Result	Unit	<b>Biological Reference Interval</b>
<b>Post Prandial Blood Sugar (PPBS)</b> (Glucose Oxidase, Peroxidase)	69 L	mg/dL	Normal: 70-139 Pre-diabetes: 140-199 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-

Dr. Debasree Biswas MD, Biochemistry Clinical Biochemist MBBS, MD

### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
   (Post Prandial Blood Sugar (PPBS) -> Auto Authorized)

Shooh

Dr. Sujata Ghosh PhD, Biochemistry Biochemist M.Sc , Ph. D





 Patient Name : Ankit
 MRN : 17510001187688
 Gender/Age : MALE , 32y (11/11/1990)

 Collected On : 27/05/2023 09:01 AM
 Received On : 27/05/2023 10:47 AM
 Reported On : 27/05/2023 01:02 PM

 Barcode : 822305270021
 Specimen : Urine
 Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

	CLINICAL PATH	HOLOGY	
Test	Result	Unit	<b>Biological Reference Interval</b>
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	40	ml	-
Colour	Light-Yellow	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Mixed PH Indicator)	6.5	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance )	1.008	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Negative	-	-
Urine Glucose (Glucose Oxidase, Peroxidase)	Negative	-	Negative
Ketone Bodies (Legal's Method)	Negative	-	Negative
Bile Salts (Dual Wavelength Reflectance/Manual)	Negative	-	Negative
Bile Pigment (Bilirubin) (Coupling Of Bilirubin With Diazonium Salt)	Negative	-	Negative
<b>Urobilinogen</b> (Coupling Reaction Of Urobilinogen With A Stable Diazonium Salt In Buffer)	Normal	-	Normal
Urine Leucocyte Esterase (Enzymatic, Indoxyl Ester And Diazonium Salt)	Negative	-	Negative
Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen)	Trace	-	-
Nitrite (Modified Griess Reaction)	Negative	-	Negative

### Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Pus Cells	2-4	/hpf	1-2
RBC	2-4	/hpf	0 - 3
Epithelial Cells	1-2	/hpf	2-3
Crystals	NIL	-	
Casts	NIL	-	-

--End of Report-

Dr. Shanaz Latif MD, Pathology Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

### Note

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





Patient Name : Ankit MRN : 17510001187688 Gender/Age : MALE , 32y (11/11/1990)

Collected On: 27/05/2023 09:01 AM Received On: 27/05/2023 10:49 AM Reported On: 27/05/2023 01:01 PM

Barcode : 802305270288 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9643000642

Test

CLINICAL CHEMISTRY Result Unit NEGATIVE mg

**Biological Reference Interval** ATEST

--End of Report-

**Urine For Sugar** 

Dr. Shanaz Latif MD, Pathology Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

### Note

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





# ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME GENDER/AGE LOCATION	: Ankit : Male, 32 Years : -	PATIENT MRN PROCEDURE DATE REQUESTED BY	: 17510001187688 : 27/05/2023 12:44 PM : EXTERNAL
IMPRESSION FINDINGS	<ul> <li>NO SIGNIFICANT ECHC</li> </ul>	OCARDIOGRAPHIC ABN	ORMALITY DETECTED.
CHAMBERS LEFT ATRIUM RIGHT ATRIUM LEFT VENTRICLE	FUNCTION WITH EJECTIC	IN FRACTION: 66%. NO	OTION ABNORMALITY. GOOD SYSTOLIC RMAL DIASTOLIC FLOW PATTERN.
RIGHT VENTRICLE VALVES MITRAL AORTIC TRICUSPID PULMONARY	: NORMAL SIZE AND THICK : NORMAL. : NORMAL. : NORMAL. : NORMAL. : NORMAL.	NESS WITH NORMAL F	UNCTION
<b>SEPTAE</b> IAS IVS	: INTACT : INTACT		
ARTERIES AND VEI AORTA PA IVC SVC & CS PULMONARY VEINS	: NORMAL, LEFT AORTIC A : NORMAL SIZE : NORMAL SIZE & COLLAPS : NORMAL		
PERICARDIUM INTRACARDIAC MA OTHERS	<ul> <li>NORMAL PERICARDIAL TI</li> <li>NO TUMOUR, THROMBU</li> <li>NIL.</li> </ul>		

Langerta Das

Page 1 of 2

DR. SANGEETA DAS CONSULTANT GENERAL MEDICINE MBBS SANJOY CHOWDHURY TECHNICIAN

27/05/2023 12:44 PM

PREPARED BY	: NITA PAUL(308573)	PREPARED ON	: 27/05/2023 01:26 PM
GENERATED BY	: MADHUPARNA DASGUPTA(333433	GENERATED ON	: 30/05/2023 12:59 PM

Patient Name	Ankit	Requested By	EXTERNAL
MRN	17510001187688	Procedure DateTime	2023-05-27 10:46:07
Age/Sex	32Y 6M/Male	Hospital	NH-RTIICS

## **USG OF WHOLE ABDOMEN (SCREENING)**

### LIVER:

It is normal in size and echogenicity. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

### **PORTAL VEIN:**

The portal vein is normal in calibre measuring 9.0 mm at the porta. There is no intraluminal thrombus. No collaterals are seen.

### GALL BLADDER:

It is optimally distended. No calculus or sludge is seen within it. The wall is not thickened.

### CBD:

The common duct is not dilated measuring 3.0 mm at porta. No intraluminal calculus is seen.

### SPLEEN:

It is normal in size measuring 10.7 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

### **PANCREAS:**

It is normal in size and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

### KIDNEYS:

Page 1 of 2

Both kidneys are normal in size, position and echogenicity. The corticomedullary differentiation is maintained. No hydronephrosis, calculus or mass is seen.

Right kidney and left kidney measures 9.4 cm and 9.8 cm respectively.

### **URINARY BLADDER:**

It is normal in capacity. The wall is not thickened. No intraluminal calculus or mass is seen.

### **PROSTATE:**

It is normal in size measuring  $2.8 \times 2.9 \times 3.0 \text{ cm}$  (Weight = 14 gms). It shows a homogenous echotexture and smooth outline.

### **IMPRESSION:**

• Normal study.

### NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. 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.

Assist By :Kanta

Colom Hymers.

Dr. Lalan Kumar

Consultant Sonologist MBBS CBET (USG)

\* This is a digitally signed valid document. Reported Date/Time: 2023-05-27 11:15:28

Page 2 of 2

Patient Name	Ankit	Requested By	EXTERNAL
MRN	17510001187688	Procedure DateTime	2023-05-27 09:49:33
Age/Sex	32Y 6M/Male	Hospital	NH-RTIICS

## CHEST RADIOGRAPH (PA VIEW)

## FINDINGS :

- Trachea is normal and is central.
- The cardiac shadow is normal in contour.
- Mediastinum and great vessels are within normal limits.
- The hilar shadows are within normal limits.
- The costo-phrenic angles are clear.
- The lung fields and bronchovascular markings appear normal.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

### **IMPRESSION:**

• No significant radiological abnormality detected.

### NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, X-RAY also has its limitations. Therefore X-RAY 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.

la

Dr. Sarbari Chatterjee Consultant Radiologist