

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs SUDESHNA AGARWAL MRN : 1765000033722 Gender/Age : FEMALE , 37y (05/04/1985)

Collected On : 25/03/2023 09:04 AM Received On : 25/03/2023 09:25 AM Reported On : 25/03/2023 10:55 AM

Barcode : J12303250095 Specimen : Plasma Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-018 Patient Mobile No : 9051507444

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	107 H	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

Note

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



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Barcode : J12303250094 Specimen : Serum Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-018 Patient Mobile No : 9051507444

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.64	mg/dL	0.52-1.04
eGFR (Calculated By MDRD Formula)	104.5	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)	8.87	mg/dL	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	138	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)	174	mg/dL	Both: Desirable: < 200 Both: Borderline High: 200-239 Both: High: > 240
Triglycerides	167	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)	44	mg/dL	40.0-60.0
Non-HDL Cholesterol	130	-	-
LDL Cholesterol (Colorimetric)	98.39	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

Narayana Superspeciality Hospital

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Appointments
180-0309-0309 (Toll Free)

Emergencies
83348 30003

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VLDL Cholesterol (Calculated)	33.4	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	4	-	-

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.9	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.1	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Calculated)	0.8	-	-
Total Protein (Colorimetric - Biuret Method)	7.4	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.1	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.3	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.24	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	20	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	18	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	57	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	21	U/L	12.0-43.0

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Collected On : 25/03/2023 09:04 AM Received On : 25/03/2023 09:25 AM Reported On : 25/03/2023 12:23 PM

Barcode : J32303250006 Specimen : Serum Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-018 Patient Mobile No : 9051507444

IMMONOLOGY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.19	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.47	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.989	µIU/mL	Pregnancy: 1st Trimester: 0.1298-3.120 2nd Trimester: 0.2749-2.652 3rd Trimester: 0.3127-2.947

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Final Report

Patient Name : Mrs SUDESHNA AGARWAL MRN : 1765000033722 Gender/Age : FEMALE , 37y (05/04/1985)

Collected On : 25/03/2023 10:36 AM Received On : 25/03/2023 10:43 AM Reported On : 25/03/2023 12:39 PM

Barcode : J42303250006 Specimen : Urine Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-018 Patient Mobile No : 9051507444

CLINICAL PATHOLOGY

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

URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	50	ml	-
Colour	Pale Straw	-	-
Appearance	Slight Hazy	-	-

CHEMICAL EXAMINATION

pH(Reaction)	6.0	-	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	Trace	-	-
Blood Urine	Trace	-	Negative
Nitrite	Absent	-	Negative

Page 1 of 2

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MICROSCOPIC EXAMINATION

Pus Cells	6-8	/hpf	0 - 2
RBC	1-2	/hpf	-
Epithelial Cells	10-12	/hpf	-
Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Present(+)	-	-
Yeast Cells	Not Found	-	-

--End of Report--



Dr. Sourav Sarkar
MBBS, MD, Pathology
Consultant

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Collected On : 25/03/2023 09:04 AM Received On : 25/03/2023 09:25 AM Reported On : 25/03/2023 10:57 AM

Barcode : J22303250089 Specimen : Whole Blood - ESR Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-018 Patient Mobile No : 9051507444

HAEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	93 H	mm/1hr	0.0-12.0

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Collected On : 25/03/2023 09:04 AM Received On : 25/03/2023 09:25 AM Reported On : 25/03/2023 01:03 PM

Barcode : J12303250096 Specimen : Whole Blood Consultant : SELF(GENERAL ADMINISTRATION)

Sample adequacy : Satisfactory Visit No : OP-018 Patient Mobile No : 9051507444

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.5	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	111.15	-	-

Interpretation:

- 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.
- 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.
- Any sample with >15% should be suspected of having a haemoglobin variant.

--End of Report--

Ritu Priya

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Appearance	Slight Hazy	-	-

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Ketone Bodies	Absent	-	-
Bile Salts	Absent	-	Negative
Bile Pigment (Bilirubin)	Absent	-	Negative
Urobilinogen	Normal	-	-
Urine Leucocyte Esterase	Trace	-	-
Blood Urine	Trace	-	Negative
Nitrite	Absent	-	Negative

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Crystals	Not Found	-	-
Casts	Not Found	-	-
Bacteria	Present(+)	-	-
Yeast Cells	Not Found	-	-

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ID: 1765000033722
Name: SUDESHNA AGARWAL
Age: 37 Years
Gender: Female

2023-03-25 09:39:44

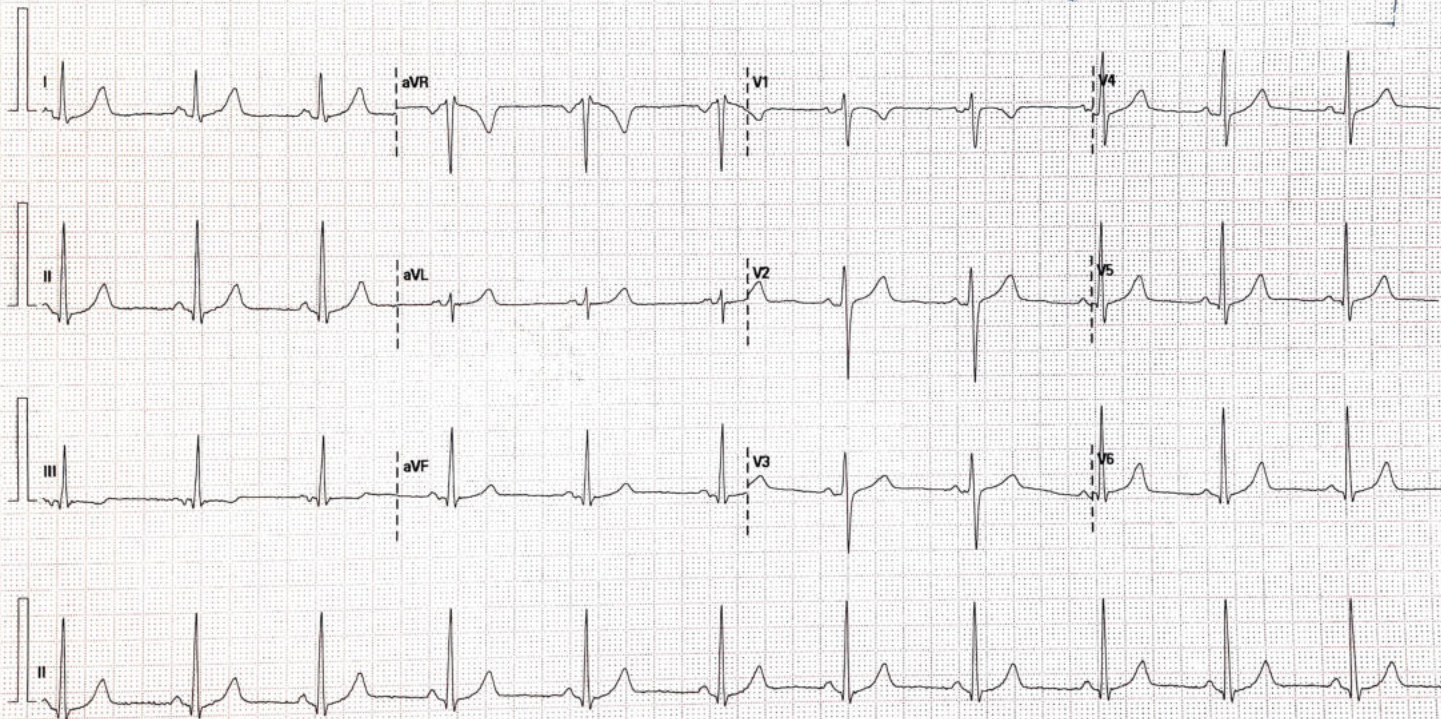
Vent. Rate
PR Interval
QRS Duration
QT/QTc Interval
P/QRS/T Axes
QTc:Hodges

65 bpm
128 ms
92 ms
402/411 ms
24/59/24 deg

Sinus rhythm
Normal ECG

Unconfirmed Diagnosis

PLEASE CORRELATE CLINICALLY



Patient details:
Name: MRS. SUDESHNA AGARWAL
Age: 37 YEARS
Examination Date: 25.03.2023
Consultant Name: DR.

MRN: 1765000003372
Gender: FEMALE
Processed Date: 25.03.2023
Patient Location: OPD

ECHOCARDIOGRAPHY REPORT

MEASUREMENT:

AO: 25 (20-40) mm	LVID(d): 45 (36-52) mm	IVS(d): 10 (6-11) mm
LA: 35 (19-40) mm	LVID(s): 30 (23-39) mm	PWd: 10 (6-11) mm
RVOT: 24 mm	TAPSE: 18 mm	LVEF ~ 64 %

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

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DOPPLER DATA:

	Velocity(In m/s)	Peak PG(mmHg)	Mean PG(mmHg)	Regurgitation
Mitral	E - 0.8 , A - 0.6			0/4
Aortic	0.9	3.7		0/4
Tricuspid	2.0	16		Trivial
Pulmonary	0.7	2.4		0/4

LVOT : No significant gradient noted.

Vegetation/Thrombus: Nil

Pericardium : Normal

Other Findings : E/E':07

Final Diagnosis:

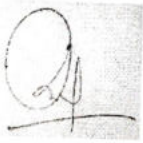
Normal size cardiac chambers.
 No significant regional wall motion abnormality of LV at rest.
 Normal LV systolic function. LV EF~ 64%
 Adequate LV diastolic compliance.

Clinical correlation please.

NOTE: Echo of Patient: MRS.SUDESHNA AGARWAL

MRN: 17650000033722

has been done on 25.03.2023 and reported on 25.03.2023



DR. SHAMICK SAHA
 Junior consultant

TECHNICIAN
 YADAV

TB: K. DEB

Patient Name	SUDESHNA AGARWAL	Requested By	SELF
MRN	17650000033722	Procedure DateTime	2023-03-25 10:32:49
Age/Sex	37Y 11M / Female	Hospital	NH-NMH & NSH

USG OF WHOLE ABDOMEN (SCREENING)

USG OBSERVATIONS:

LIVER:

Enlarged in size (15.4 cm). Parenchymal echogenicity is 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.

C.B.D: Not dilated. It measures 4.8 mm.

PORTAL VEIN: Portal vein is normal. It measures 11.6 mm.

PANCREAS:

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

SPLEEN:

Normal in size (7.8 cm) and echotexture. No focal or diffuse lesion seen.

KIDNEYS:

Right kidney measures 9.7 cm.

Left kidney measures 9.5 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.

UTERUS:

Measures: 8.6 x 3.8 x 6.2 cm. Anteverted, normal in shape & size. **Diffusely heterogeneous myometrium with indistinct endo-myometrium junction. A well defined heterogeneously hypoechoic SOL measures 1.9 x 2.3 cm noted in posterior wall to subserosal extension.** Endometrium thickness measures 2.5 mm. Cervix appears normal.

BOTH OVARIES:

Right ovary: 5.3 x 3.5 x 4.8 cm = 48 cc.

Bulky in size. Right ovary contains a thin walled cyst measures 3.6 x 2.9 x 4.2 cm = 23 cc without any internal echoes / internal vascularity.

Left ovary: 2.4 x 1.6 cm.

Normal in size, shape and echo pattern and show normal follicular pattern.

POD is clear.

No Ascites/ pleural effusion is seen at present.

IMPRESSION:

Present study suggests:

- **Hepatomegaly with Grade I fatty changes.**
- **Adenomyosis of uterus.**
- **? Uterine fibroid.**
- **Bulky right ovary.**
- **Right ovarian simple cyst.**

--- TVS 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.



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

This is a digitally signed valid document. Reported Date/Time: 2023-03-25 16:40:01