

FINDINGS: Normal Variant with ~~non specific ST changes~~ *no significant st-t changes. severe conduction slivity*
Vent Rate : 80 bpm; PR Interval : 130 ms; QRS Duration: 114 ms; QT/QTc Int : 285/330 ms
P-QRS-T axis: 66° - 159° - -80° (Deg)
Comments :

Shilpa
29/3/24

Dr. Abhishek Kumar
Consultant Cardiologist
MBBS, MD, DM (Cardiology)



Patient Name :	SHILPA JHAWAR	Patient ID :	79630
Modality :	DX	Sex :	F
Age :	35Yrs	Study :	CHEST PA
Reff. Dr. :	SELF	Study Date :	29-03-2024

X-RAY CHEST PA VIEW

FINDINGS :

Bilateral bronchovascular markings are prominent.

Bilateral costophrenic angles are unremarkable.

Bilateral hila are unremarkable.

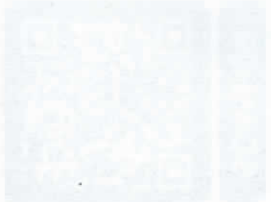
Domes of diaphragm are normal in morphology and contour.

Cardiac size is within normal limits.

Bony thoracic cage appears normal.

"Recommended clinical correlation with other investigation;

Dr. Manish Kumar Jha
MBBS, MD (Radio-diagnosis)
Registration No. 77237 (WBMC)





Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Optional ID : -

Collection Time : 29/03/2024, 09:51 a.m.

Receiving Time : 29/03/2024, 12:08 p.m.

Reporting Time : 29/03/2024, 06:01 p.m.

Sample ID : 1924021759

Sample Type : USG

USG Whole Abdomen

LIVER

Is enlarged in size (measures 16.4 cm) and shows mild diffuse increase in echogenicity. No focal lesion is seen. Intrahepatic biliary radicles are not seen dilated. Hepatic & Portal venous systems appear normal. Portal vein measures 0.71 cm. in calibre.

GALL BLADDER

Is seen normal in size, shape, outline, position & wall thickness. **A small polyp measuring 0.37 cm is seen in gall bladder lumen.** No intraluminal calculus is seen. No pericholecystic fluid collection is seen.

CBD

Is not seen dilated and measures 0.42 cm.

PANCREAS

Is normal in size, shape, outline and echotexture. No definite focal lesion is evident. Pancreatic duct is not seen dilated. No tenderness is seen over the region.

SPLEEN

Is normal in shape, size, position and echotexture. No focal lesion is seen. No abnormal vessels are seen at the splenic hilum. Spleen measures 9.6 cm. in length.

KIDNEYS

Both kidneys appear normal in size, shape, position and echotexture. Cortico-medullary differentiation is normal. Central echocomplexes of both kidneys appear normal. No focal lesion is seen. No evidence of hydronephrosis or calculus is seen in either kidneys.

Right kidney measures 11.2 cm.

Left kidney measures 12.4 cm.

URETERS

Ureters are not seen dilated.

URINARY BLADDER



Reported By : Prasenjit Sarkar

Registered By : Sumita Das



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Sample ID : 1924021759

Sample Type : USG

Urinary bladder appears optimally distended. It appears smooth in outline. No mass lesion or any calculus is seen within the urinary bladder.

UTERUS

Uterus is anteverted in position, regular in outline and **mildly bulky in size**. Myometrial echotexture is homogeneous & normal. No focal lesion is seen. Endometrial echo measures 0.83 cm. Cervix is normal in size & echotexture.

Uterus measures 9.3 x 5.8 x 5.0 cm.

ADNEXA

Both ovaries are normal in size & echotexture. **A simple cyst measuring 2.6 x 1.8 cm is seen in left ovary.**

Right ovary measures 2.9 x 1.4 cm.

Left ovary measures 3.2 x 2.8 cm.

No evidence of free fluid in P.O.D.

Retroperitoneum- No abdominal lymphadenopathy is seen.

No evidence of Ascites is seen.

IMPRESSION :

1. **Hepatomegaly with grade I fatty liver.**
2. **Small gall bladder polyp.**
3. **Mildly bulky uterus.**
4. **Simple cyst in left ovary.**

Please correlate with clinical findings.

****END OF REPORT****


Dr. Mukesh Kumar Gupta
DMRD, ENB (Radio-Diagnosis)
WBMC - 68415

Checked by
Jhumpa Halder



Reported By : Prasenjit Sarkar

Registered By : Sumita Das

Page 18 of 21



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:51 AM

Receiving Time : 29/03/2024, 11:45 AM

Reporting Time : 29/03/2024, 02:04 PM

Sample ID : 1924021759

Sample Type : 2D Echo

Echocardiography/TMT

M Mode Data : Parameter	Test Value	Normal Range (Adults)	Unit
Aortic Root Diameter	2.7	2.0 – 4.0	cm
Left atrial diameter	3.0	2.0 – 4.0	cm
RV internal diameter	2.2	2.2 – 3.0	cm
IV septal thickness (diastole)	1.0	0.60 – 1.1	cm
LV Internal diameter (diastole)	4.8	3.50 – 5.4	cm
Post. Wall thickness (diastole)	1.0	0.60 – 1.1	cm
Internal diameter (systole)	3.0	2.4 – 4.2	cm
LV Ejection fraction	65 %	55 – 65	%

LV shows:

Normal size cardiac chambers.

No RWMA.

Grade I diastolic dysfunction. E/E' - 8

Good LV systolic function with LVEF – 65 %

Normal RV systolic function.

All valve morphology normal.

IAS & IVS intact.

No PDA/COA.

Trivial TR (19 mmHg).

No PE / PAH.

IVC normal in size, collapsing well.



Reported By : APURBA DUTTA

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

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Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:51 AM

Receiving Time : 29/03/2024, 11:45 AM

Reporting Time : 29/03/2024, 02:04 PM

Sample ID : 1924021759

Sample Type : 2D Echo

CONCLUSION:

Normal size cardiac chambers.

Good biventricular systolic function.


Grade I diastolic dysfunction.

Trivial TR.

No PE / PAH.

****END OF REPORT****

Checked by
Mousumi Das Sharma


Dr. Abhinay Tibdewal
MD, DM (Cardiologist)
Regn. No.: WBMC 95911



Reported By : APURBA DUTTA

Registered By : Sumita Das

Page 16 of 21

PREVENTIVE HEALTH CHECKS

Mr./Mrs./Ms. SHILPA JHAWAR Date: 29/03/2024
 Age: 35Y Sex: Male Female ID No: _____
 Case Examined by Dr. _____
 Ref. by Dr. _____

Present Complaint: No Periods since 6 months. Breathing problem majorly while sleeping & chest pain. Skin black rashes.

Known Case of DM: Yes No HTN: Yes No CAD: Yes No Ashma: Yes No
 Anyothers _____

Present Medication Currently Nil (Temporary skin & periods medicine) Since 7 months

Past History Medical Cyst in ovary, Eczema

Surgical C-section

Gynaec & Obstetric Irregular Periods & Over heavy bleeding when happens

Family History a) Allergy Yes No b) Pressure Yes No c) Diabetes Yes No d) Thyroid Yes No e) Cancer Yes No f) Others Yes No

Personal History Status Smoking Non-smoker Smoker Since: Years Alcohol Nil Social Habitual Diet Vegetarian Non-Vegetarian Physical Activity Exercise Regular Irregular No

Centre Lansdowne Behala James Long Sarani Shyambazar Howrah Ekbalpur

PHYSICAL EXAMINATION

Height : 5'7"

Weight : 106 kgs

Gen. Examination : Anaemia Oedema Jaundice Others Normal

Blood Pressure : 175/109 mmHg Pulse Rate 89 /min Normal

C.V.S. : 1st & 2nd Sound, Murmurs Yes No

Abdomen : C.N.S.: *ou.* R.S.: *ou.*

Breast Examination : *ou.*

Laboratory Investigations

Haematology : *Normal.*

Biochemistry : *Normal.*

Clinical Pathology : *ou.*
Urine Routine

ECG (Resting) : *ou.*

X-Ray (Chest) : *ou.*

Echocardiogram : *ou.*

Treadmill (CST) : *ou.*

SPIROMETRY : *Normal.*

PAP SMEAR : *ou.*

Others :

Clinical Impression : Normal Health

Advice :

Medically fit

DR. SOURAV GHOSH
M.B.B.S
Reg. No. 42482



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:51 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 01/04/2024, 01:11 PM
Sample ID : 1924021759
Sample Type : Fluid/Cervical/Vaginal/Vault

Test Description	Value(s)	Unit(s)	Reference Range
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Pap Smear

C Y T O L O G Y R E P O R T

Brief History :
 Routine check

Specimen Type :
 Cervical smear

Specimen Identified :
 Yes

Specimen Adequacy :
 Specimen adequate with presence of endocervical cells.

Descriptive Interpretation :
 Smears show mixed population of superficial cells and intermediate cells.

Organisms :
 Haemophilus vaginalis & Yeast cells of Candida.

Epithelial abnormalities :
 Many of the cells show nucleomegaly. Smears are negative for malignancy.

Impression :
Cervical smear ----- ASC-US with Candidiasis

****END OF REPORT****

Checked by
 Payel Mitra

Dr. Nabanita Banerjee
 MBBS (Cal), DNB (I), MIAPM
 Pathologist



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 05:49 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
Complete Blood Count			
HAEMOGLOBIN	10.2	gm/dl	11 - 14
TOTAL LEUCOCYTE COUNT	14,200	/cumm	4000 - 11000
HCT	34.2	Vol%	33 - 42
R B C	4.51	millions/cumm	3.8 - 4.8
M C V	75.8	Femtolitre(fl)	80 - 100
M C H	22.6	Picograms(pg)	27 - 31
M C H C	29.8	gm/dl	32 - 36
PLATELET COUNT	3,58,000	/cumm	150000 - 450000
DIFFERENTIAL COUNT			
Neutrophils	73	%	40 - 75
Lymphocytes	17	%	20 - 40
Monocytes	02	%	2 - 8
Eosinophils	08	%	1 - 6
Basophils	00	%	0 - 1
ESR	29	mm	2 - 17
Remarks	Predominantly Normocytic Normochromic. Neutrophilic leucocytosis seen with eosinophilia. Platelets adequate.		
Note	XN 1000, SYSMEX METHOD : FLOWCYTOMETRY ESR : AUTOMATED VESCUBE - 30 TOUCH		

****END OF REPORT****

Checked by
Tamal Sarkar

Meenakshi Mohan
 Dr. Meenakshi Mohan
 MD (Pathology)
 Consultant Pathologist
 Regn. No. : WBMC 54631



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 01:54 PM
Sample ID : 1924021759F
Sample Type : Fluoride - F

Test Description	Value(s)	Unit(s)	Reference Range
Glucose Fasting Plasma			
GLUCOSE FASTING PLASMA	86	mg/dL	74 - 109
Method : Hexokinase			

****END OF REPORT****

Checked by
Barun Jana

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD,
Consultant Biochemist



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 02:57 PM
Receiving Time : 29/03/2024, 03:54 PM
Reporting Time : 29/03/2024, 04:19 PM
Sample ID : 1924021759P
Sample Type : Fluoride Plasma

Test Description	Value(s)	Unit(s)	Reference Range
Glucose Post Prandial Plasma			
GLUCOSE POST PRANDIAL PLASMA Method : Hexokinase	114	mg/dL	70 - 140

****END OF REPORT****

Checked by
Barun Jana

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD,
Consultant Biochemist



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 12:13 PM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 03:13 PM
Sample ID : 1924021759
Sample Type : Urine

Test Description	Value(s)	Unit(s)	Reference Range
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Urine Fasting Sugar

URINE FOR SUGAR

Result

Absent

****END OF REPORT****

Checked by
Gouranga Bera

Nabanita Banerjee
 Dr. Nabanita Banerjee
 MBBS (Cal), DNB (I), MIAPM
 Pathologist



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:30 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
HbA1c HPLC			
HbA1c HPLC Method : High Performance Liquid Chromatography (HPLC)	5.5	%	Normal : < 5.7 Pre Diabetes : 5.7 - 6.4 Diabetes : >= 6.5
Estimated Average Glucose	111	mg/dL	70 - 116

NOTE :

1. Glucose combines with haemoglobin(Hb) continuously and nearly irreversibly during life span of RBC(120 days); thus glycosylated Hb is proportional to mean plasma glucose level during the previous 2-3 months. Therefore A1c assay is a useful mean of evaluation of success of long term diabetic control by monitoring diabetic patient~s compliance with therapeutic regimen used and long-term blood glucose level control. Added advantage is its ability to predict progression of diabetic complications.
2. Presence of Hb variant may interfere with accurate estimation of HbA1c. Please do Hb HPLC test to identify Haemoglobinopathy if any and also do Glycated albumin or Fructosamine tests to assess glycemic status if required.
3. Inappropriately low value may be seen in anemia due to iron deficiency or due to other causes, acute blood loss, recent blood transfusion, hemoglobinopathies, CLD, Hypertriglyceridemia, intake of Vitamin E & C, Aspirin, Co-trimoxazole etc.



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
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Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:30 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
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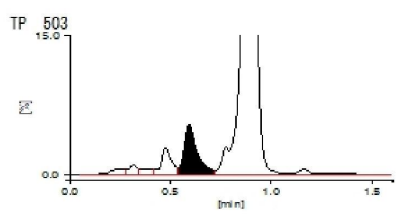
Chromatogram Report

TOSOH G8 VAR V05.29 490206 2024-03-29 16:29:33
 ID 1924021759
 Sample No. 03290039 SL 0001 - 01
 Patient ID
 Name
 Comment

CALIB			
Name	%	Time	Area
A1A	0.6	0.24	11.04
A1B	0.6	0.31	11.01
F	0.5	0.39	10.10
LA1C+	1.9	0.48	37.03
SA1C	5.5	0.59	88.19
AO	92.6	0.88	1844.39
H-V0			
H-V1			
H-V2			

Total Area 2001.76

HbA1c 5.5 % **IFCC 37 mmol/mol**
 HbA1 6.6 % HbF 0.5 %



29-03-2024 16:30:02 TOSOH

1 / 1

NEUBERG PULSE DIAGNOSTIC CENTRE
 75,SARAT BOSE RD, KOL - 26

****END OF REPORT****



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
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Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:30 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
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Checked by
Nisha Malakar

Supratik Biswas
 Dr. Supratik Biswas
 MBBS, MD
 Consultant Biochemist
 Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 02:10 PM
Sample ID : 1924021759
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Lipid Profile</u>			
TRIGLYCERIDES Method : Enzymatic Colorimetric Assay using GPO-POD	59	mg/dL	Normal : < 150 Borderline High : 150 - 199 High : 200 - 499 Very High : >= 500
CHOLESTEROL Method : Enzymatic Colorimetric Assay using CHOD-POD	127	mg/dl	Desirable : < 200 Borderline High : 200 - 240 High Risk : > 240
HDL CHOLESTEROL Method : Enzymatic Inhibition	53	mg/dl	Low HDL : <40 High HDL : >= 60
LDL CHOLESTEROL Method : Enzymatic Selective Protection	64	mg/dl	Optimal : < 100 Above Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : > 190
VLDL / CHOLESTEROL REMNANTS Method : Calculation	10	mg/dl	< 30
NON HDL CHOLESTEROL Method : Calculation	74	mg/dl	<130
TOTAL CHOLESTEROL / HDL CHOLESTEROL RATIO	2.40	Ratio	
LDL CHOLESTEROL / HDL CHOLESTEROL RATIO	1.21	Ratio	

Remark :

* National Cholesterol Education Programme Adult Treatment Panel III Guidelines (US)

****END OF REPORT****

Checked by
Pintu Manna

Supratik Biswas
Dr. Supratik Biswas
 MBBS, MD
 Consultant Biochemist
 Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

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Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:58 AM

Receiving Time : 29/03/2024, 01:05 PM

Reporting Time : 29/03/2024, 02:07 PM

Sample ID : 1924021759

Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Liver Function Test</u>			
TOTAL BILIRUBIN Method : DPD	0.91	mg/dL	<1.2
CONJUGATED BILIRUBIN Method : DPD	0.48	mg/dl	< 0.2
UNCONJUGATED BILIRUBIN Method : Calculation	0.43	mg/dL	
SGPT Method : IFCC (without pyridoxal phosphate activation)	13	U/L	< 35
SGOT Method : IFCC (without pyridoxal phosphate activation)	20	U/L	< 35
ALKALINE PHOSPHATASE Method : IFCC AMP Buffer	70	U/L	30 - 120
TOTAL PROTEIN Method : Biuret	7.23	g/dL	6.6 - 8.3
ALBUMIN Method : Bromocresol Green	4.14	g/dL	Adults: 3.5 - 5.2 Newborn (1-4 days): 2.8 - 4.4
GLOBULIN Method : Calculation	3.09	g/dL	1.80 - 3.60
A/G RATIO Method : Calculation	1.34		1.2 - 2
GAMMA-GLUTAMYL TRANSFERASE Method : IFCC	26	U/L	< 38

****END OF REPORT****

Checked by
Pintu Manna

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD
Consultant Biochemist
Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:58 AM

Receiving Time : 29/03/2024, 01:05 PM

Reporting Time : 29/03/2024, 02:13 PM

Sample ID : 1924021759

Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>T3,T4 & TSH</u>			
T3 Method : Chemiluminescent Microparticle Immunoassay (CMIA)	1.57	ng/mL	1 - 30 days: 1 - 7.4 1m - 11m: 1.05 - 2.45 1yr - 5yrs: 1.05 - 2.69 6yrs - 10yrs: 0.94 - 2.41 11yrs - 15yrs: 0.82 - 2.13 16yrs- 20yrs: 0.8 - 2.1 Adult: 0.58 - 1.59
T4 Method : Chemiluminescent Microparticle Immunoassay (CMIA)	9.46	µg/dL	1d - 6d : 11.8 - 22.6 7d - 14d : 9.9 - 16.6 15d - 4m : 7.2 - 14.4 4m - 12m : 7.8 - 16.5 1yr - 5yr : 7.2 - 15.0 5yr - 10yr : 6.4 - 13.6 > 10yr : 4.87 - 11.72 Adult : 4.87 - 11.72
TSH Method : Chemiluminescent Microparticle Immunoassay (CMIA)	4.53	µIU/ml	0.35 - 4.94

Interpretation :

T3
Triiodothyronine (3,5,3' triiodothyronine or T3) is the thyroid hormone principally responsible for the regulation of metabolism of the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by enzymatic 5' deiodination of T4 (thyroxine). A reduction in the conversion of T4 to T3 results in a decrease in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non thyroidal illness (NTI), and is referred to as "low T3 syndrome". The determination of T3 is utilized in the diagnosis of T3 hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

T4
The hormone thyroxine (T4) is the main product secreted by the thyroid gland and is an integral component of the hypothalamus anterior pituitary thyroid regulating system. The major part (> 99 %) of total thyroxine in serum is present in proteinbound form. As the concentrations of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken into account in the assessment of the thyroid hormone concentration in serum. If this is ignored, changes in the binding proteins (e.g. due to estrogen containing preparations, during pregnancy or in the presence of a nephrotic syndrome etc.) can lead to erroneous assessments of the thyroid metabolic state. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the



Reported By : -

Registered By : Sumita Das





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Sample ID : 1924021759
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
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detection of primary and secondary hypothyroidism, and the monitoring of TSH suppression therapy.

TSH

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

****END OF REPORT****

Checked by
Barun Jana

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD,
Consultant Biochemist



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 02:00 PM
Sample ID : 1924021759
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Uric Acid, Serum</u>			
URIC ACID Method : Uricase PAP	4.08	mg/dL	2.6 - 6

****END OF REPORT****

Checked by
Barun Jana

Supratik Biswas
 Dr. Supratik Biswas
 MBBS, MD,
 Consultant Biochemist



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF

Optional ID : -
Collection Time : 29/03/2024, 09:58 a.m.
Receiving Time : 29/03/2024, 01:05 p.m.
Reporting Time : 29/03/2024, 03:49 p.m.
Sample ID : 1924021759
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Bun / Creatrine Ratio</u>			
BUN/Creatinine ratio	10.85		12 - 20
Method : Calculation			

****END OF REPORT****

Checked by
Pintu Manna

Supratik Biswas
 Dr. Supratik Biswas
 MBBS, MD
 Consultant Biochemist
 Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 02:51 PM
Sample ID : 1924021759
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Total Proteins, Serum</u>			
TOTAL PROTEIN	7.23	g/dl	6.6 - 8.3
Method : Biuret			
ALBUMIN	4.14	g/dl	Adults: 3.5 - 5.2 Newborn(0-4days): 2.8 - 4.4
Method : Bromocresol green			
GLOBULIN	3.09	g/dl	1.8 - 3.6
Method : Calculation			
A/G RATIO	1.34		1.2 - 2.0
Method : Calculation			

****END OF REPORT****

Checked by
Pintu Manna

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD
Consultant Biochemist
Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:51 AM

Receiving Time : 29/03/2024, 11:45 AM

Reporting Time : 29/03/2024, 02:04 PM

Sample ID : 1924021759

Sample Type : 2D Echo

Echocardiography/TMT

M Mode Data : Parameter	Test Value	Normal Range (Adults)	Unit
Aortic Root Diameter	2.7	2.0 – 4.0	cm
Left atrial diameter	3.0	2.0 – 4.0	cm
RV internal diameter	2.2	2.2 – 3.0	cm
IV septal thickness (diastole)	1.0	0.60 – 1.1	cm
LV Internal diameter (diastole)	4.8	3.50 – 5.4	cm
Post. Wall thickness (diastole)	1.0	0.60 – 1.1	cm
Internal diameter (systole)	3.0	2.4 – 4.2	cm
LV Ejection fraction	65 %	55 – 65	%

LV shows:

Normal size cardiac chambers.

No RWMA.

Grade I diastolic dysfunction. E/E' - 8

Good LV systolic function with LVEF – 65 %

Normal RV systolic function.

All valve morphology normal.

IAS & IVS intact.

No PDA/COA.

Trivial TR (19 mmHg).

No PE / PAH.

IVC normal in size, collapsing well.



Reported By : APURBA DUTTA

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:51 AM

Receiving Time : 29/03/2024, 11:45 AM

Reporting Time : 29/03/2024, 02:04 PM

Sample ID : 1924021759

Sample Type : 2D Echo

CONCLUSION:

Normal size cardiac chambers.

Good biventricular systolic function.


Grade I diastolic dysfunction.

Trivial TR.

No PE / PAH.

****END OF REPORT****

Checked by
Mousumi Das Sharma


Dr. Abhinav Tibdewal
MD, DM (Cardiologist)
Regn. No.: WBMC 85811



Reported By : APURBA DUTTA

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Optional ID : -

Collection Time : 29/03/2024, 09:51 a.m.

Receiving Time : 29/03/2024, 12:08 p.m.

Reporting Time : 29/03/2024, 06:01 p.m.

Sample ID : 1924021759

Sample Type : USG

USG Whole Abdomen

LIVER

Is enlarged in size (measures 16.4 cm) and shows mild diffuse increase in echogenicity. No focal lesion is seen. Intrahepatic biliary radicles are not seen dilated. Hepatic & Portal venous systems appear normal. Portal vein measures 0.71 cm. in calibre.

GALL BLADDER

Is seen normal in size, shape, outline, position & wall thickness. **A small polyp measuring 0.37 cm is seen in gall bladder lumen.** No intraluminal calculus is seen. No pericholecystic fluid collection is seen.

CBD

Is not seen dilated and measures 0.42 cm.

PANCREAS

Is normal in size, shape, outline and echotexture. No definite focal lesion is evident. Pancreatic duct is not seen dilated. No tenderness is seen over the region.

SPLEEN

Is normal in shape, size, position and echotexture. No focal lesion is seen. No abnormal vessels are seen at the splenic hilum. Spleen measures 9.6 cm. in length.

KIDNEYS

Both kidneys appear normal in size, shape, position and echotexture. Cortico-medullary differentiation is normal. Central echocomplexes of both kidneys appear normal. No focal lesion is seen. No evidence of hydronephrosis or calculus is seen in either kidneys.

Right kidney measures 11.2 cm.

Left kidney measures 12.4 cm.

URETERS

Ureters are not seen dilated.

URINARY BLADDER





Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Optional ID : -

Collection Time : 29/03/2024, 09:51 a.m.

Receiving Time : 29/03/2024, 12:08 p.m.

Reporting Time : 29/03/2024, 06:01 p.m.

Sample ID : 1924021759

Sample Type : USG

Urinary bladder appears optimally distended. It appears smooth in outline. No mass lesion or any calculus is seen within the urinary bladder.

UTERUS

Uterus is anteverted in position, regular in outline and **mildly bulky in size**. Myometrial echotexture is homogeneous & normal. No focal lesion is seen. Endometrial echo measures 0.83 cm. Cervix is normal in size & echotexture.

Uterus measures 9.3 x 5.8 x 5.0 cm.

ADNEXA

Both ovaries are normal in size & echotexture. **A simple cyst measuring 2.6 x 1.8 cm is seen in left ovary.**

Right ovary measures 2.9 x 1.4 cm.

Left ovary measures 3.2 x 2.8 cm.

No evidence of free fluid in P.O.D.

Retroperitoneum- No abdominal lymphadenopathy is seen.

No evidence of Ascites is seen.

IMPRESSION :

1. **Hepatomegaly with grade I fatty liver.**
2. **Small gall bladder polyp.**
3. **Mildly bulky uterus.**
4. **Simple cyst in left ovary.**

Please correlate with clinical findings.

****END OF REPORT****


Dr. Mukesh Kumar Gupta
DMRD, ENB (Radio-Diagnosis)
WBMC - 68415

Checked by
Jhumpa Halder



Reported By : Prasenjit Sarkar

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 12:13 PM

Receiving Time : 29/03/2024, 01:05 PM

Reporting Time : 29/03/2024, 03:13 PM

Sample ID : 1924021759

Sample Type : Urine

Test Description	Value(s)	Unit(s)	Reference Range
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Urine Routine

PHYSICAL EXAMINATION

Volume	40 ml
Colour	Pale Straw
Appearance	Slightly hazy
Deposit	Present
Specific Gravity	1.010

CHEMICAL EXAMINATION

Reaction	Acidic (PH: 6.0)
Protein	Absent
Sugar	Absent
Ketones Bodies	Absent
Urobilinogen	Normal
Blood	Absent

MICROSCOPIC EXAMINATION

Pus Cells	2 - 4 /hpf
R.B.C	Not found
Epithelial Cells	10 - 12 /hpf
Casts	Not found
Crystals	Not found

METHOD : SEDIMENTATION AND MICROSCOPE

Terms and conditions:

Test results released pertain to the specimen/sample submitted.

The tests results are dependent on the quality of the sample received by the Laboratory.

The test results are released with the presumption that the specimen/sample belongs to the patient as mentioned on the bill/ vials/TRF/booking ID Laboratory investigations test results are only a tool to facilitate in arriving at a diagnosis and should always be clinically correlated by the Referring Physician.

Repeat samples/specimens are accepted on request of Referring Physician within 7 days of reporting.

Due to some unforeseen circumstances reports may be delayed. Inconvenience is regretted.

Test result may show inter laboratory variations.

The test results are not valid for medico legal purposes.



Reported By : -

Registered By : Sumita Das




Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 12:13 PM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 03:13 PM
Sample ID : 1924021759
Sample Type : Urine

Test Description	Value(s)	Unit(s)	Reference Range
------------------	----------	---------	-----------------

****END OF REPORT****

Checked by
Gouranga Bera


 Dr. Nabanita Banerjee
 MBBS (Cal), DNB (I), MIAPM
 Pathologist



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:45 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
------------------	----------	---------	-----------------

Blood Group & RH Typing

BLOOD GROUP	"B"		
RH TYPING	POSITIVE		

FORWARD & REVERSE BLOOD GROUPING,
GEL CARD BY BIO-RAD



****END OF REPORT****

Checked by
Sharmistha Das

Meenakshi
Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631



Reported By : -

Registered By : Sumita Das



Patient Name :	SHILPA JHAWAR	Patient ID :	79630
Modality :	DX	Sex :	F
Age :	35Yrs	Study :	CHEST PA
Reff. Dr. :	SELF	Study Date :	29-03-2024

X-RAY CHEST PA VIEW

FINDINGS :

Bilateral bronchovascular markings are prominent.

Bilateral costophrenic angles are unremarkable.

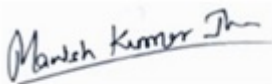
Bilateral hila are unremarkable.

Domes of diaphragm are normal in morphology and contour.

Cardiac size is within normal limits.

Bony thoracic cage appears normal.

"Recommended clinical correlation with other investigation;



Dr. Manish Kumar Jha

MBBS, MD (Radio-diagnosis)

Registration No. 77237 (WBMC)



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:58 AM

Receiving Time : 29/03/2024, 01:05 PM

Reporting Time : 29/03/2024, 02:10 PM

Sample ID : 1924021759

Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Total Proteins, Serum</u>			
TOTAL PROTEIN Method : Biuret	7.23	g/dl	6.6 - 8.3
ALBUMIN Method : Bromocresol green	4.14	g/dl	Adults: 3.5 - 5.2 Newborn(0-4days): 2.8 - 4.4
GLOBULIN Method : Calculation	3.09	g/dl	1.8 - 3.6
A/G RATIO Method : Calculation	1.34	1.2 - 2.0	
<u>Bun / Creatrine Ratio</u>			
BUN/Creatinine ratio Method : Calculation	10.85	12 - 20	
<u>Liver Function Test</u>			
TOTAL BILIRUBIN Method : DPD	0.91	mg/dL	<1.2
CONJUGATED BILIRUBIN Method : DPD	0.48	mg/dl	< 0.2
UNCONJUGATED BILIRUBIN Method : Calculation	0.43	mg/dL	
SGPT Method : IFCC (without pyridoxal phosphate activation)	13	U/L	< 35
SGOT Method : IFCC (without pyridoxal phosphate activation)	20	U/L	< 35
ALKALINE PHOSPHATASE Method : IFCC AMP Buffer	70	U/L	30 - 120
TOTAL PROTEIN Method : Biuret	7.23	g/dL	6.6 - 8.3
ALBUMIN Method : Bromocresol Green	4.14	g/dL	Adults: 3.5 - 5.2 Newborn (1-4 days): 2.8 - 4.4
GLOBULIN Method : Calculation	3.09	g/dL	1.80 - 3.60
A/G RATIO Method : Calculation	1.34	1.2 - 2	
GAMMA-GLUTAMYL TRANSFERASE Method : IFCC	26	U/L	< 38



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 02:10 PM
Sample ID : 1924021759
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
<u>Lipid Profile</u>			
TRIGLYCERIDES Method : Enzymatic Colorimetric Assay using GPO-POD	59	mg/dL	Normal : < 150 Borderline High : 150 - 199 High : 200 - 499 Very High : >= 500
CHOLESTEROL Method : Enzymatic Colorimetric Assay using CHOD-POD	127	mg/dl	Desirable : < 200 Borderline High : 200 - 240 High Risk : > 240
HDL CHOLESTEROL Method : Enzymatic Immunoinhibition	53	mg/dl	Low HDL : <40 High HDL : >= 60
LDL CHOLESTEROL Method : Enzymatic Selective Protection	64	mg/dl	Optimal : < 100 Above Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : > 190
VLDL / CHOLESTEROL REMNANTS Method : Calculation	10	mg/dl	< 30
NON HDL CHOLESTEROL Method : Calculation	74	mg/dl	<130
TOTAL CHOLESTEROL / HDL CHOLESTEROL RATIO	2.40	Ratio	
LDL CHOLESTEROL / HDL CHOLESTEROL RATIO	1.21	Ratio	

Remark :

* National Cholesterol Education Programme Adult Treatment Panel III Guidelines (US)

****END OF REPORT****

Checked by
Pintu Manna

Supratik Biswas
Dr. Supratik Biswas
 MBBS, MD
 Consultant Biochemist
 Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:51 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 01/04/2024, 01:11 PM
Sample ID : 1924021759
Sample Type : Fluid/Cervical/Vaginal/Vault

Test Description	Value(s)	Unit(s)	Reference Range
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Pap Smear

C Y T O L O G Y R E P O R T

Brief History :
 Routine check

Specimen Type :
 Cervical smear

Specimen Identified :
 Yes

Specimen Adequacy :
 Specimen adequate with presence of endocervical cells.

Descriptive Interpretation :
 Smears show mixed population of superficial cells and intermediate cells.

Organisms :
 Haemophilus vaginalis & Yeast cells of Candida.

Epithelial abnormalities :
 Many of the cells show nucleomegaly. Smears are negative for malignancy.

Impression :
Cervical smear ----- ASC-US with Candidiasis

****END OF REPORT****

Checked by
 Payel Mitra

Dr. Nabanita Banerjee
 MBBS (Cal), DNB (I), MIAPM
 Pathologist



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:45 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
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Blood Group & RH Typing

BLOOD GROUP	"B"		
RH TYPING	POSITIVE		

FORWARD & REVERSE BLOOD GROUPING,
GEL CARD BY BIO-RAD



****END OF REPORT****

Checked by
Sharmistha Das

Meenakshi
Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:58 AM

Receiving Time : 29/03/2024, 01:05 PM

Reporting Time : 29/03/2024, 01:54 PM

Sample ID : 1924021759F

Sample Type : Fluoride - F

Test Description	Value(s)	Unit(s)	Reference Range
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T3,T4 & TSH

T3 Method : Chemiluminescent Microparticle Immunoassay (CMIA)	1.57	ng/mL	1 - 30 days: 1 - 7.4 1m - 11m: 1.05 - 2.45 1yr - 5yrs: 1.05 - 2.69 6yrs - 10yrs: 0.94 - 2.41 11yrs - 15yrs: 0.82 - 2.13 16yrs- 20yrs: 0.8 - 2.1 Adult: 0.58 - 1.59
T4 Method : Chemiluminescent Microparticle Immunoassay (CMIA)	9.46	µg/dL	1d - 6d : 11.8 - 22.6 7d - 14d : 9.9 - 16.6 15d - 4m : 7.2 - 14.4 4m - 12m : 7.8 - 16.5 1yr - 5yr : 7.2 - 15.0 5yr - 10yr : 6.4 - 13.6 > 10yr : 4.87 - 11.72 Adult : 4.87 - 11.72
TSH Method : Chemiluminescent Microparticle Immunoassay (CMIA)	4.53	µIU/ml	0.35 - 4.94

Interpretation :

T3
Triiodothyronine (3,5,3' triiodothyronine or T3) is the thyroid hormone principally responsible for the regulation of metabolism of the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by enzymatic 5' deiodination of T4 (thyroxine). A reduction in the conversion of T4 to T3 results in a decrease in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non thyroidal illness (NTI), and is referred to as "low T3 syndrome". The determination of T3 is utilized in the diagnosis of T3 hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

T4
The hormone thyroxine (T4) is the main product secreted by the thyroid gland and is an integral component of the hypothalamus anterior pituitary thyroid regulating system. The major part (> 99 %) of total thyroxine in serum is present in proteinbound form. As the concentrations of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken into account in the assessment of the thyroid hormone concentration in serum. If this is ignored, changes in the binding proteins (e.g. due to estrogen containing preparations, during pregnancy or in the presence of a nephrotic syndrome etc.) can lead to erroneous assessments of the thyroid metabolic state. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 01:54 PM
Sample ID : 1924021759F
Sample Type : Fluoride - F

Test Description	Value(s)	Unit(s)	Reference Range
------------------	----------	---------	-----------------

detection of primary and secondary hypothyroidism, and the monitoring of TSH suppression therapy.

TSH

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

Uric Acid, Serum

URIC ACID	4.08	mg/dL	2.6 - 6
Method : Uricase PAP			

Glucose Post Prandial Plasma

GLUCOSE POST PRANDIAL PLASMA	114	mg/dL	70 - 140
Method : Hexokinase			

Glucose Fasting Plasma

GLUCOSE FASTING PLASMA	86	mg/dL	74 - 109
Method : Hexokinase			

****END OF REPORT****

Checked by
Barun Jana

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD,
Consultant Biochemist



Reported By : -

Registered By : Sumita Das





Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:30 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
HbA1c HPLC			
HbA1c HPLC Method : High Performance Liquid Chromatography (HPLC)	5.5	%	Normal : < 5.7 Pre Diabetes : 5.7 - 6.4 Diabetes : >= 6.5
Estimated Average Glucose	111	mg/dL	70 - 116

NOTE :

1. Glucose combines with haemoglobin(Hb) continuously and nearly irreversibly during life span of RBC(120 days); thus glycosylated Hb is proportional to mean plasma glucose level during the previous 2-3 months. Therefore A1c assay is a useful mean of evaluation of success of long term diabetic control by monitoring diabetic patient~s compliance with therapeutic regimen used and long-term blood glucose level control. Added advantage is its ability to predict progression of diabetic complications.
2. Presence of Hb variant may interfere with accurate estimation of HbA1c. Please do Hb HPLC test to identify Haemoglobinopathy if any and also do Glycated albumin or Fructosamine tests to assess glycemc status if required.
3. Inappropriately low value may be seen in anemia due to iron deficiency or due to other causes, acute blood loss, recent blood transfusion, hemoglobinopathies, CLD, Hypertriglyceridemia, intake of Vitamin E & C, Aspirin, Co-trimoxazole etc.



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:30 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
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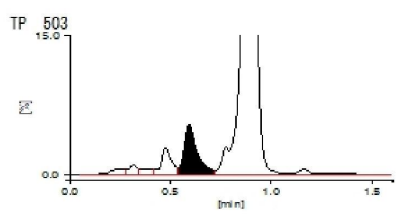
Chromatogram Report

TOSOH G8 VAR V05.29 490206 2024-03-29 16:29:33
 ID 1924021759
 Sample No. 03290039 SL 0001 - 01
 Patient ID
 Name
 Comment

CALIB			
Name	%	Time	Area
A1A	0.6	0.24	11.04
A1B	0.6	0.31	11.01
F	0.5	0.39	10.10
LA1C+	1.9	0.48	37.03
SA1C	5.5	0.59	88.19
AO	92.6	0.88	1844.39
H-V0			
H-V1			
H-V2			

Total Area 2001.76

HbA1c 5.5 % **IFCC 37 mmol/mol**
 HbA1 6.6 % HbF 0.5 %



****END OF REPORT****



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 04:30 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
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Checked by
Nisha Malakar

Supratik Biswas
 Dr. Supratik Biswas
 MBBS, MD
 Consultant Biochemist
 Regn.No.: 64600 (WBMC)



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Optional ID : -

Collection Time : 29/03/2024, 09:51 a.m.

Receiving Time : 29/03/2024, 12:08 p.m.

Reporting Time : 29/03/2024, 06:01 p.m.

Sample ID : 1924021759

Sample Type : USG

USG Whole Abdomen

LIVER

Is enlarged in size (measures 16.4 cm) and shows mild diffuse increase in echogenicity. No focal lesion is seen. Intrahepatic biliary radicles are not seen dilated. Hepatic & Portal venous systems appear normal. Portal vein measures 0.71 cm. in calibre.

GALL BLADDER

Is seen normal in size, shape, outline, position & wall thickness. **A small polyp measuring 0.37 cm is seen in gall bladder lumen.** No intraluminal calculus is seen. No pericholecystic fluid collection is seen.

CBD

Is not seen dilated and measures 0.42 cm.

PANCREAS

Is normal in size, shape, outline and echotexture. No definite focal lesion is evident. Pancreatic duct is not seen dilated. No tenderness is seen over the region.

SPLEEN

Is normal in shape, size, position and echotexture. No focal lesion is seen. No abnormal vessels are seen at the splenic hilum. Spleen measures 9.6 cm. in length.

KIDNEYS

Both kidneys appear normal in size, shape, position and echotexture. Cortico-medullary differentiation is normal. Central echocomplexes of both kidneys appear normal. No focal lesion is seen. No evidence of hydronephrosis or calculus is seen in either kidneys.

Right kidney measures 11.2 cm.

Left kidney measures 12.4 cm.

URETERS

Ureters are not seen dilated.

URINARY BLADDER



Reported By : Prasenjit Sarkar

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

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Optional ID : -

Collection Time : 29/03/2024, 09:51 a.m.

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Reporting Time : 29/03/2024, 06:01 p.m.

Sample ID : 1924021759

Sample Type : USG

Urinary bladder appears optimally distended. It appears smooth in outline. No mass lesion or any calculus is seen within the urinary bladder.

UTERUS

Uterus is anteverted in position, regular in outline and **mildly bulky in size**. Myometrial echotexture is homogeneous & normal. No focal lesion is seen. Endometrial echo measures 0.83 cm. Cervix is normal in size & echotexture.

Uterus measures 9.3 x 5.8 x 5.0 cm.

ADNEXA

Both ovaries are normal in size & echotexture. **A simple cyst measuring 2.6 x 1.8 cm is seen in left ovary.**

Right ovary measures 2.9 x 1.4 cm.

Left ovary measures 3.2 x 2.8 cm.

No evidence of free fluid in P.O.D.

Retroperitoneum- No abdominal lymphadenopathy is seen.


No evidence of Ascites is seen.

IMPRESSION :

1. **Hepatomegaly with grade I fatty liver.**
2. **Small gall bladder polyp.**
3. **Mildly bulky uterus.**
4. **Simple cyst in left ovary.**

Please correlate with clinical findings.

****END OF REPORT****


 Dr. Mukesh Kumar Gupta
 DMRD, ENB (Radio-Diagnosis)
 WBMC - 68415

Checked by
Jhumpa Halder



Reported By : Prasenjit Sarkar

Registered By : Sumita Das




Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:51 AM
Receiving Time : 29/03/2024, 11:45 AM
Reporting Time : 29/03/2024, 02:04 PM
Sample ID : 1924021759
Sample Type : 2D Echo

ECG

Kindly collect the graphical ECG report from reception

Checked by
Mousumi Das Sharma


Dr. Abhinay Tibdewal
MD, DM (Cardiologist)
Regn. No.: WBMC 85811

Echocardiography/TMT

M Mode Data : Parameter	Test Value	Normal Range (Adults)	Unit
Aortic Root Diameter	2.7	2.0 – 4.0	cm
Left atrial diameter	3.0	2.0 – 4.0	cm
RV internal diameter	2.2	2.2 – 3.0	cm
IV septal thickness (diastole)	1.0	0.60 – 1.1	cm
LV Internal diameter (diastole)	4.8	3.50 – 5.4	cm
Post. Wall thickness (diastole)	1.0	0.60 – 1.1	cm
Internal diameter (systole)	3.0	2.4 – 4.2	cm
LV Ejection fraction	65 %	55 – 65	%

LV shows:
Normal size cardiac chambers.
No RWMA.
Grade I diastolic dysfunction. E/E' - 8
Good LV systolic function with LVEF – 65 %
Normal RV systolic function.
All valve morphology normal.
IAS & IVS intact.
No PDA/COA.



Reported By : APURBA DUTTA

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR

Age / Gender : 35 Years / Female

Mobile No. : -

Patient ID : 79630

Bill ID : 82465

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 29/03/2024, 09:51 AM

Receiving Time : 29/03/2024, 11:45 AM

Reporting Time : 29/03/2024, 02:04 PM

Sample ID : 1924021759

Sample Type : 2D Echo

Trivial TR (19 mmHg).

No PE / PAH.

IVC normal in size, collapsing well.

CONCLUSION:

Normal size cardiac chambers.

Good biventricular systolic function.


Grade I diastolic dysfunction.

Trivial TR.

No PE / PAH.

****END OF REPORT****

Checked by
Mousumi Das Sharma


Dr. Abhinav Tibdewal
MD, DM (Cardiologist)
Regn. No.: WBMC 85811



Reported By : APURBA DUTTA

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 12:13 PM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 03:13 PM
Sample ID : 1924021759
Sample Type : Urine

Test Description	Value(s)	Unit(s)	Reference Range
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Urine Fasting Sugar

URINE FOR SUGAR

Result **Absent**

Urine Routine

PHYSICAL EXAMINATION

Volume 40 ml
 Colour Pale Straw
 Appearance Slightly hazy
 Deposit Present
 Specific Gravity 1.010

CHEMICAL EXAMINATION

Reaction Acidic (PH: 6.0)
 Protein Absent
 Sugar Absent
 Ketones Bodies Absent
 Urobilinogen Normal
 Blood Absent

MICROSCOPIC EXAMINATION

Pus Cells 2 - 4 /hpf
 R.B.C Not found
 Epithelial Cells 10 - 12 /hpf
 Casts Not found
 Crystals Not found

METHOD : SEDIMENTATION AND MICROSCOPE

Terms and conditions:

Test results released pertain to the specimen/sample submitted.
 The tests results are dependent on the quality of the sample received by the Laboratory.
 The test results are released with the presumption that the specimen/sample belongs to the patient as mentioned on the bill/ vials/TRF/booking ID
 Laboratory investigations test results are only a tool to facilitate in arriving at a diagnosis and should always be clinically correlated by the Referring Physician.
 Repeat samples/specimens are accepted on request of Referring Physician within 7 days of reporting.



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
Bill ID : 82465
Referral : DR SELF
Source : ALLIANCE & PROJECT


Optional ID : -
Collection Time : 29/03/2024, 12:13 PM
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Test Description	Value(s)	Unit(s)	Reference Range
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Due to some unforeseen circumstances reports may be delayed. Inconvenience is regretted.
 Test result may show inter laboratory variations.
 The test results are not valid for medico legal purposes.

****END OF REPORT****

Checked by
Gouranga Bera


 Dr. Nabanita Banerjee
 MBBS (Cal), DNB (I), MIAPM
 Pathologist



Reported By : -

Registered By : Sumita Das



Patient Name : MS. SHILPA JHAWAR
Age / Gender : 35 Years / Female
Mobile No. : -
Patient ID : 79630
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Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 29/03/2024, 09:58 AM
Receiving Time : 29/03/2024, 01:05 PM
Reporting Time : 29/03/2024, 05:49 PM
Sample ID : 1924021759
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
Complete Blood Count			
HAEMOGLOBIN	10.2	gm/dl	11 - 14
TOTAL LEUCOCYTE COUNT	14,200	/cumm	4000 - 11000
HCT	34.2	Vol%	33 - 42
R B C	4.51	millions/cumm	3.8 - 4.8
M C V	75.8	Femtolitre(fl)	80 - 100
M C H	22.6	Picograms(pg)	27 - 31
M C H C	29.8	gm/dl	32 - 36
PLATELET COUNT	3,58,000	/cumm	150000 - 450000
DIFFERENTIAL COUNT			
Neutrophils	73	%	40 - 75
Lymphocytes	17	%	20 - 40
Monocytes	02	%	2 - 8
Eosinophils	08	%	1 - 6
Basophils	00	%	0 - 1
ESR	29	mm	2 - 17
Remarks	Predominantly Normocytic Normochromic. Neutrophilic leucocytosis seen with eosinophilia. Platelets adequate.		
Note	XN 1000, SYSMEX METHOD : FLOWCYTOMETRY ESR : AUTOMATED VESCUBE - 30 TOUCH		

****END OF REPORT****

Checked by
Tamal Sarkar

Meenakshi
Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631



Reported By : -

Registered By : Sumita Das



Patient Name :	SHILPA JHAWAR	Patient ID :	79630
Modality :	DX	Sex :	F
Age :	35Yrs	Study :	CHEST PA
Reff. Dr. :	SELF	Study Date :	29-03-2024

X-RAY CHEST PA VIEW

FINDINGS :

Bilateral bronchovascular markings are prominent.

Bilateral costophrenic angles are unremarkable.

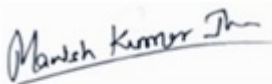
Bilateral hila are unremarkable.

Domes of diaphragm are normal in morphology and contour.

Cardiac size is within normal limits.

Bony thoracic cage appears normal.

"Recommended clinical correlation with other investigation;



Dr. Manish Kumar Jha

MBBS, MD (Radio-diagnosis)

Registration No. 77237 (WBMC)