Patient Name: MR. BIPLAB KUMAR DAS
UHID/MR No.: FSIN.0000016635
Visit Date: 11.03.2023
Sample collected on: 11.03.2023
Ref Doctor: SELF

Age/Gender: 44 Years/ Male
OP Visit No.: FSINOPV19761
Reported on: 11.03.2023
Specimen: BLOOD

DEPARTMENT OF SEROLOGICAL EXAMINATION

TEST NAME	RESULT
Blood Group (A, B & O) & Rh factor	
BLOOD GROUP	"B"
RH TYPE	POSITIVE (+Ve)

Results are to be correlate clinically.

*** End of the report***

Lab Technician / Technologist
Ranit Bhattacharjee

DR. KRISTI CHATTERJEE
MBBS, MD (PATHOLOGY)
CONSULTANT PATHOLOGIST

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DEPARTMENT OF HAEMATOLOGY

TEST NAME	RESULT	BIOLOGICAL REFERENCE	UNIT
COMPLETE BLOOD COUNT			
HEMOGLOBIN Method: Cyanmethemoglobin	14.6	Female 11.5-14.5 Male 12.5-16.5	gm%
RBC COUNT Method: Electronic Impedance	4.9	Female 3.8-4.8 Male 4.5-5.5	mill/Cumm
HEMATOCRIT (PCV)	47.0	Female 36-46 Male 42-52	%
MCV Method: Calculated	95.9	83-101 fl	fl
MCH Method: Calculated	29.8	27-32 pg	pg
MCHC Method: Calculated	31.0	31.5-34.5	%
PLATELET COUNT Method: Electronic Impedance	2.10	1.5-4.5 lakhs/cu mm	Lakhs/cumm
TOTAL WBC COUNT (TC) Method: Electronic Impedance	6,300	4,000-11,000	/cumm
DIFFERENTIAL COUNT (DC) Method: Microscopy			
NEUTROPHIL	60	40-70	%
LYMPHOCYTE	35	20-45	%
MONOCYTE	02	2-8	%
EOSINOPHIL	03	1-4	%
BASOPHIL	00	<1-2	%
ESR Method: westergreen	15	Male: 12 Female: 19	mm/hr

Note: RBC are normocytic with normochromic.

INSTRUMENT USED:

SYSMEX (XP 100)

***Please correlate with clinical conditions.**

End of the report

Lab Technician / Technologist
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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
GLUCOSE- (FASTING) Method: (GOD-POD)	82.0	70.0- 110.0	mg/dl
GLUCOSE- (POST PRANDIAL) Method: (GOD-POD)	105.0	80.0- 140.0	mg/dl

End of the report
Results are to be correlate clinically

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Sample collected on: 11.03.2023	**Specimen: BLOOD**
Ref Doctor: SELF	

DEPARTMENT OF SPECIAL BIOCHEMISTRY

REPORT PREPARED ON PATHOLOGY

Test Name	Value	Unit	Normal Range
Glycosylated Haemoglobin (HbA1c), HPLC	4.2	%	Excellent Control: <4 Good Control: 4-6 Fair Control : >6-7 Action Suggested: >7-8 Poor Control : >8
Methodology: HPLC *Instrument Used: Bio-Rad D-10*			
Estimated Average Glucose (EAG)	119.0	mg/dl	Excellent Control: 90-120 Good Control: 120-150 Fair Control: > 150-180 Action Suggested: 181-210 Panic Value: >211

Comment

1. For patients with Hb variant diseases there may be lowering of HbA1c due to low HBA synthesis.
2. EAG is value calculated from HbA1c & indicates average glucose level over past three months.

Factors that interfere with HbA1c Measurement: Genetic variants (e.g. Hbs trait, HbC trait), elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements. The effects very depending on the specific Hb variant or derivative and the specific HbA1c method.

Factors that affect interpretation of HbA1c Results: Any condition that shortens erythrocyte survival or decreases mean erythrocyte age (e.g. recovery from acute blood loss, hemolytic anemia) will falsely lower HbA1c test results regardless of the assay method used.

********** End Of Report**********

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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIPID PROFILE			
Triglyceride Method: GPO-POD	178.0	<200	mg/dl
Cholesterol Method: CHO - POD	196.0	Desirable blood cholesterol :< 220 Borderline High: 170.0-199.0 High: > 199.0 mg/dl	mg/dl mg/dl
HDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	45.0	30-80mg/dl	mg/dl
LDL CHOLESTEROL [DIRECT] Method: PVS and PEGME Coupled	115.4	<130.0 mg/dl	mg/dl
VLDL CHOLESTEROL	**35.6**	20-35 mg/dl	mg/dl
CHOLESTEROL: HDL RATIO	4.3		
LDL: HDL RATIO	2.5		

End of the report
Results are to be correlate clinically

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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
LIVER FUNCTION TEST (PACKAGE)			
BILIRUBIN- TOTAL Method: Daizo	0.79	1.1 Adult	mg/dl
BILIRUBIN- DIRECT Method: Daizo with DPD	0.19	Adult & Children: <0.25	mg/dl
BILIRUBIN- INDIRECT Method: calculated	0.60	0.1-1.0	mg/dl
TOTAL- PROTIEN Method: Photometric UV test	6.75	Adult: 6.6-8.8	gms/dl
ALBUMIN Method: BCG	4.05	3.5-5.2	gms/dl
GLOBULIN Method: calculated	2.73	1.8-3.0	gms/dl
A:G Ratio	1.48:1		
SGOT/AST Method: IFCC WITHOUT P5P	42.7	up to 45	U/L
SGPT/ALT Method: IFCC WITHOUT P5P	**54.1**	up to 40	U/L
ALKA-PHOS Method: PNPP- AMP BUFFER	113.8	Adult: 20-220 Child: 104-380	U/L
GGT [Gamma Glutamyl Transferase]	26.7	7-32	U/L

***Please correlate with clinical conditions.**

*****End of the report*****

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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNITS
BLOOD UREA NITROGEN (BUN) Method: Calculated	16.48	8 - 20	mg/ dl
CREATININE *Methodology: Jaffe Reaction* *Instrument Used: FULLY AUTOMATED ANALYZER EM-200*	0.96	Male: 0.7-1.4 Female: 0.6-1.2 Newborn: 0.3-1.0 Infant: 0.2-0.4 Child: 0.3-0.7 Adolescent: 0.5-1.0	mg/dl
BUN: CREATININE RATIO Method: Calculated	17.16		
URIC ACID Method: Uricase	5.64	Female: 2.6 - 6.0 Male: 3.4 - 7.0	mg/dl

End of the report
Results are to be correlate clinically

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DEPARTMENT OF LABORATORY MEDICINE

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVALS	UNIT
TSH: THYROID STIMULATING HORMONE-SERUM Method: CLIA	1.96	0.35-5.50	µIU/ml
TOTAL T3: TRI IODOTHYRONINE – SERUM Method: CLIA	1.29	0.87 – 1.78	ng/dl
TOTAL T4: THYROXINE – SERUM Method: CLIA	9.75	8.09 – 14.03	µg/Dl

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

Results are to be correlate clinically .

End of the report

Lab Technician / Technologist
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Specimen: BLOOD

DEPARTMENT OF LABORATORY MEDICINE

REPORT PREPARED ON PATHOLOGY

TEST NAME	VALUE	UNITS	RANGE
PSA (prostate-Specific Antigen) (TOTAL)	2.34	ng/ml	<4.0ng/ml. :Negative 4.0 – 10.0ng/ml. :Borderline
Methodology:CLIA			>10.0ng/ml. : Elevated

**Interpretation : PSA is a product of prostatic epithelium and is normally secreted in the semen. It has been wide lyusedin the diagnosis and management of prostaticcancer. A universal cutoff value of 4ng/ml is generally being used. However this simplified approach has led to delayed diagnosis, as well as overdiagnosis in many acases. Several refinements in the interpretation of the PSA value have been proposed.

Serum PSA density Reflects the PSA produced per gram of the prostate tissue. It is calculated by dividing the total serum PSA by the estimated gland volume (by transrectal ultrasound) . Upper normal value for PSA density is 0.15

Age Specific reference ranges :

Age group	Upper reference range
40 -49 Yrs	2.5 ng/ml
50 -59 Yrs	3.5 ng/ml
60 -69 Yrs	4.5 ng/ml
70–79 Yrs	6.5 ng/ml

Serum PSA Velocity Men with prostatic cancer demonstrate an increased rate of rise in PSA level as compared to men having other conditions. The rate of change that best distinguishes between men with and without prostatic cancer is 0.75ng/ml per year. For this to be valid at least three PSA measurements should be done over a period of 1.5 yrs to 2.0 years.

Free PSA estimation PSA exists in two forms, a major fraction bound to alpha 1 chymotrypsin and a minor free fraction. The percentage of Free PSA (free PSA/total PSAX100) is very useful in discriminating the reconditions from prostate cancer when the total PSA level is in the "grey zone" of 4 – 10 ng/ml. Depending on the free PSA % the probability of prostate cancer can be determined as follows

%free PSA	probability of CA prostate
0 -10%	55%
10-15%	28%
15 – 20%	25%
>20%	10%

INSTRUMENT USED:
FULLU AUTOMATED CLIA – TOSOH AIA – 360

****End Of Report****

Lab Technician / Technologist
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Specimen: URINE

CLINICAL PATHOLOGY

URINE FOR ROUTINE EXAMINATION

Test Name	Result	Unit	Method
PHYSICAL EXAMINATION			
QUANTITY	30	ml	Container Measurement
COLOUR	Pale yellow		Naked Eye Observation
APPEARANCE	Slightly hazy		Naked Eye Observation
REACTION	Acidic		Multiple Reagent Strip
SPECIFIC GRAVITY	1.015		Multiple Reagent Strip
CHEMICAL EXAMINATION			
BLOOD	Nil		Multiple Reagent Strip
ALBUMIN	Nil		Multiple Reagent Strip / Heat & Acetic Acid
BILE PIGMENT	Nil		Fuchet's Test
BILE SALT	Nil		Hey's Sulphur Test
KETONE BODIES	Nil		Multiple Reagent Strip / Rothera Test
SUGAR	Nil		Multiple Reagent Strip / Benedict
MICROSCOPIC EXAMINATION			
PUS CELL	3-4	/HPF	Light Microscopy
RBC	Not found	/HPF	Light Microscopy
EPITHELIAL CELL	1-2	/HPF	Light Microscopy
MICRO ORGANISM	Present (+)		
Others	Not found		

Note : Any Abnormal Chemical Analysis Rechecked By Respective Manual Method

*** End of Report***

Lab Technician / Technologist
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