Patient Name : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

 Collected On : 03/04/2023 08:35 AM Received On : 03/04/2023 08:52 AM Reported On : 03/04/2023 10:58 AM

 Barcode : 802304030214 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

.

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

	CLINICAL CHEI	MISTRY	
Test	Result	Unit	Biological Reference Interval
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.46	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.06	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.4	-	-
Total Protein (Biuret Method)	7.10	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.00	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.1	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.29	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal- 5-phosphate))	30	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	22	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	76	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	12	U/L	12.0-43.0

Patient Name : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

Alphosh

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

	CLINICAL CHE	MISTRY	
Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.73	mg/dL	0.52-1.04
eGFR	81.9	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	10.58	-	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	141	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)	130	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	85	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	43	mg/dL	40.0-60.0
Non-HDL Cholesterol	87.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	53.5	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190

Patient Name : Ms AMEETA LAV VAIDYA	MRN : 17510000593374	Gender/Age : FE	EMALE , 58y (26/11/1964)
VLDL Cholesterol (Calculated)	17.0	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	3.1	-	-

--End of Report-

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

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
 (Lipid Profile, -> Auto Authorized)
 (Blood Urea Nitrogen (Bun), -> Auto Authorized)
 (Serum Sodium, -> Auto Authorized)
 (Serum Potassium, -> Auto Authorized)
 (CR -> Auto Authorized)



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





 Patient Name : Ms AMEETA LAV VAIDYA
 MRN : 17510000593374
 Gender/Age : FEMALE , 58y (26/11/1964)

 Collected On : 03/04/2023 08:35 AM
 Received On : 03/04/2023 08:52 AM
 Reported On : 03/04/2023 10:58 AM

 ${\tt Barcode: 802304030214} \quad {\tt Specimen: Serum} \quad {\tt Consultant: EXTERNAL(EXTERNAL)}$

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

	CLINICAL CHE	MISTRY	
Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri lodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.10	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.36	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	5.822 H	ulU/ml	Non Pregnant: 0.4001-4.049 1st Trimester: 0.1298-3.10 2nd Trimester: 0.2749-2.652 3rd Trimester: 0.3127-2.947

--End of Report-

Alphosh

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

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



Patient Name : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

Collected On: 03/04/2023 08:35 AM Received On: 03/04/2023 08:54 AM Reported On: 03/04/2023 10:07 AM

Barcode : 802304030217 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

	CLINICAL CHEMISTRY		
Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.4	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	108.29	-	-

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-

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 : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

Collected On: 03/04/2023 01:52 PM Received On: 03/04/2023 02:25 PM Reported On: 03/04/2023 03:11 PM

Barcode : 802304030710 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

	CLINICAL CHEMISTRY		
Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose	103	mg/dL	Normal: 70-139 Pre-diabetes: 140-199
Oxidase, Peroxidase)			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)

Alposh

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





Patient Name : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

Collected On: 03/04/2023 08:35 AM Received On: 03/04/2023 08:52 AM Reported On: 03/04/2023 09:40 AM

Barcode : 802304030216 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

Test	CLINICAL CHEMISTRY			
	Result	Unit	Biological Reference Interval	
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	89	mg/dL	Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019	

--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. (Fasting Blood Sugar (FBS) -> Auto Authorized)

Syhosh

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





Patient Name : Ms AMEETA LAV VAIDYAMRN : 17510000593374Gender/Age : FEMALE , 58y (26/11/1964)Collected On : 03/04/2023 08:35 AMReceived On : 03/04/2023 08:57 AMReported On : 03/04/2023 10:51 AMBarcode : BR2304030018Specimen : Whole BloodConsultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

IMMUNOHAEMATOLOGY			
Test	Result	Unit	
BLOOD GROUP & RH TYPING			
Blood Group (Column Agglutination Technology)	0	-	
RH Typing (Column Agglutination Technology)	Positive	-	

--End of Report-

all

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.





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 Patient Name : Ms AMEETA LAV VAIDYA
 MRN : 17510000593374
 Gender/Age : FEMALE , 58y (26/11/1964)

 Collected On : 03/04/2023 08:35 AM
 Received On : 03/04/2023 08:55 AM
 Reported On : 03/04/2023 10:44 AM

Barcode : 812304030185 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

 $\label{eq:sample adequacy: Satisfactory $$Visit No: OP-003$ Patient Mobile No: 9433368411$$

	HAEMATOLO	OGY LAB	
Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR)	15.0 H	mm/1hr	0.0-12.0
(Modified Westergren Method)			

--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 : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

 Collected On : 03/04/2023 08:35 AM Received On : 03/04/2023 08:56 AM Reported On : 03/04/2023 09:44 AM

Barcode : 812304030186 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

Test	HAEMATOLO		
Test COMPLETE BLOOD COUNT (CBC)	Result	Unit	Biological Reference Interval
Haemoglobin (Hb%) (Photometric Measurement)	11.8 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	3.86	millions/ µL	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	35.8 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	92.8	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	30.5	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.8	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	13.5	%	11.6-14.0
Platelet Count (Electrical Impedance)	197	10 ³ /μL	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	9.0	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	6.1	10 ³ /µL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	65.4	%	40.0-75.0
Lymphocytes (VCSn Technology)	18.2 L	%	20.0-40.0
Monocytes (VCSn Technology)	6.3	%	2.0-10.0
Eosinophils (VCSn Technology)	9.7 H	%	1.0-6.0

Patient Name: Ms AMEETA LAV VAIDYA MRN: 1	7510000593374	Gender/Age : FEMALE , 58	3y (26/11/1964)
Basophils (VCSn Technology)	0.4	%	0.0-2.0
NRBC (VCSn Technology)	0.1	/100 WBC	-
Absolute Neutrophil Count (Calculated)	3.99	10 ³ /μL	1.8-7.8
Absolute Lympocyte Count (Calculated)	1.12	10 ³ /μL	1.0-4.8
Absolute Monocyte Count (Calculated)	0.39	10 ³ /µL	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.6 H	10 ³ /µL	0.0-0.45
Absolute Basophil Count (Calculated)	0.03	10 ³ /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.

--End of Report-

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

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





 Patient Name : Ms AMEETA LAV VAIDYA
 MRN : 17510000593374
 Gender/Age : FEMALE , 58y (26/11/1964)

 Collected On : 03/04/2023 08:35 AM
 Received On : 03/04/2023 03:04 PM
 Reported On : 03/04/2023 03:43 PM

 Barcode : 822304030014
 Specimen : Urine
 Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-003 Patient Mobile No : 9433368411

	CLINICAL PATH	HOLOGY	
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	40	ml	-
Colour	Straw	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Mixed PH Indicator)	7.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.006	-	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
Urobilinogen (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)	Negative	-	Negative
Nitrite (Modified Griess Reaction)	Negative	-	Negative

Patient Name : Ms AMEETA LAV VAIDYA MRN : 17510000593374 Gender/Age : FEMALE , 58y (26/11/1964)

MICROSCOPIC EXA	MINATION

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

--End of Report-

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

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





ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME GENDER/AGE LOCATION	: Ms AMEETA LAV VAIDYA : Female, 58 Years : -	PATIENT MRN PROCEDURE DATE REQUESTED BY	: 17510000593374 : 03/04/2023 12:30 PM : EXTERNAL
IMPRESSION FINDINGS CHAMBERS LEFT ATRIUM RIGHT ATRIUM LEFT VENTRICLE	: NORMAL SIZED : NORMAL SIZED : NORMAL SIZED CAVITY. F	PARADOXICAL MOVEME STOLIC FUNCTION WIT	- DIASTOLIC FLOW PATTERN. ENT OF IVS. NO OTHER WALL MOTION H EJECTION FRACTION: 62%. NORMAL
RIGHT VENTRICLE VALVES MITRAL AORTIC TRICUSPID PULMONARY	 NORMAL SIZE AND THICK NORMAL. NORMAL. NORMAL. NORMAL. NORMAL. 	NESS WITH NORMAL F	UNCTION
SEPTAE IAS IVS ARTERIES AND VEI AORTA PA IVC SVC & CS PULMONARY VEINS	: NORMAL, LEFT AORTIC A : NORMAL SIZE : NORMAL SIZE & COLLAPS : NORMAL		
PERICARDIUM INTRACARDIAC MA OTHERS	: NORMAL PERICARDIAL TI		

Languta Das

DR. SANGEETA DAS CONSULTANT GENERAL MEDICINE MBBS

POMPA BISWAS TECHNICIAN

03/04/2023 12:30 PM

PREPARED BY	: NITA PAUL(308573)	PREPARED ON	: 03/04/2023 01:19 PM
GENERATED BY	: MADHUPARNA DASGUPTA(333433	GENERATED ON	: 07/04/2023 04:00 PM

Patient Name	AMEETA LAV VAIDYA	Requested By	EXTERNAL
MRN	17510000593374	Procedure DateTime	2023-04-03 13:11:53
Age/Sex	58Y 4M/Female	Hospital	NH-RTIICS

ULTRASONOGRAPHY OF BOTH BREASTS (SCREENING)

All four quadrants of each breast were scanned, followed by evaluation of the subareolar region and axillary tails.

Both breasts parenchyma display a uniform echogenicity and echotexture of the fibrofatty and glandular components, which are in normal proportion for this age and parity.

There is no evidence of any mass lesion or calcification seen.

The subcutaneous, subareolar and retro mammary soft tissue planes are normal.

Small cystic lesion (0.44×0.27 cm) with internal echoes noted in upper mid quadrant, right breast at 12 'O' clock position.

Few dilated ducts (0.22 - 0.24 cm) noted on both side with echo free lumen at the time of scan.

Both axillary tails normal.

There is no evidence of axillary lymphadenopathy.

IMPRESSION:

- Small cystic lesion right breast BI-RADS '3".
- USG feature of duct ectasia both breasts.

NB : Negative sonomammogram does not exclude breast cancer. All imganing results must be considered in the context of the clinical findings. In bulky breasts, an underlying lesion may be obscured.

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

Page 1 of 2

pathological findings.

All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.

Dr. Suranjana Bhattacharjee

Consultant Sonologist

* This is a digitally signed valid document. Reported Date/Time: 2023-04-03 14:28:41

Patient Name	AMEETA LAV VAIDYA	Requested By	EXTERNAL
MRN	17510000593374	Procedure DateTime	2023-04-03 09:28:23
Age/Sex	58Y 4M/Female	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.
- No significant lung parenchymal lesion is seen.
- 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.

Dr. Sarbari Chatterjee

Consultant Radiologist

* This is a digitally signed valid document. Reported Date/Time: 2023-04-03 12:44:45

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