

Narayan Memorial Hospital

(A Unit of Narayan Health Services Pvt. Ltd.)

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1ZS



DIAGNOSTICS REPORT

Patient Name	: Mrs. SHELLY DUTTA	Order Date	: 25/09/2024 09:26
Age/Sex	: 50 Year(s)/Female	Report Date	: 25/09/2024 12:43
UHID	: NMHK.2418734		
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL
Address	: 5A, MARLIN VASUNDHARA, BEHALA, Kolkata, West Bengal, 700061	Mobile	: 9372269277

USG REPORT OF WHOLE ABDOMEN (SCREENING)

LIVER : Liver is normal in size. **Parenchymal echogenicity is mildly raised.** Intrahepatic biliary radicles are not dilated. No focal mass lesion is seen.

PORTA :

PV : Normal.

CBD : Normal.

GALL BLADDER : Operated.

PANCREAS : Pancreas is normal in size and parenchymal echogenicity. Pancreatic duct is not dilated.

SPLEEN : Spleen is not enlarged and parenchyma shows normal homogeneous pattern. Spleen measures : 11 cm.

KIDNEYS : Both kidneys are normal in size, shape, outline, position and parenchymal echogenicity. Corticomedullary differentiation maintained. No evidence of any calculus/ mass / hydronephrosis is seen. Right kidney measures : 8.7 cm & Left kidney measures : 8.9 cm.

URINARY BLADDER : Urinary bladder is normal in contour, outline and distension. No vesical lesion is seen.

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UTERUS : Operated.

OVARIES : Not visualised.

PERITONEUM : :No free fluid is noted.

RETROPERITONEUM : IVC and aorta appear normal. No lymphadenopathy is seen.

IMPRESSION :

- Mild fatty changes in liver.
- Post cholecystectomy status.
- Post hysterectomy status.
- No other abnormality seen.

Dr. MADHUSHREE RAY NASKAR
MBBS, DMRD

Consultant Radiologist
RegNo: 57032

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LABORATORY INVESTIGATION REPORT

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UHID : NMHK.2418734	Order Date : 25/09/2024 09:26
Episode : OP	
Ref. Doctor : NMH	Mobile No : 9372269277
	DOB : 26/11/1973
Address : SA, MARLIN VASUNDHARA, BEHALA, Kolkata, West Bengal, 700061	Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No. : 07H0195625	Collection Date : 25/09/24 09:36	Ack Date : 25/09/2024 10:38	Report Date : 25/09/24 11:35

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP ' B '
 Method - Agglutination forward & Reverse
 RH TYPE NEGATIVE

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB) Method - Colorimetric method (Cyn Meth)	12.4	gm/dl	12 - 15
RBC COUNT Method - Electrical Impedance Method	4.5	$\times 10^6/\text{ul}$	3.8 - 4.8
TOTAL WBC COUNT Method - Electrical Impedance Method	5.3	$10^3/\text{cmm}$	4 - 10
PLATELET COUNT Method - Electrical Impedance Method	200	$10^3/\text{cmm}$	150 - 410
PCV Method - RBC pulse ht. detection method	39	%	36 - 46
MCV Method - calculated	86	fl	83 - 101
MCH Method - Calculated	27	pg	27 - 32
MCHC Method - Calculated	32	gm/dl	31.5 - 34.5
ESR Method - Modified Westergren Method	10	%	0 - 12
DIFFERENTIAL COUNT Method - Microscopy			
NEUTROPHILS Method - Microscopy	65	%	40 - 80
LYMPHOCYTES Method - Microscopy	25	%	20 - 40
MONOCYTES Method - Microscopy	05	%	2 - 10
EOSINOPHILS Method - Microscopy	05	%	1 - 6





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BASOPHILS 00 % 0 - 2
Method - Microscopy

PERIPHERAL BLOOD SMEAR

RBC Normocytic normochromic.
WBC Within normal limits.
PLATELET Adequate.

End of Report

Dr. MAINAK CHAKRABORTY
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

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Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0195625	Collection Date : 25/09/24 09:36	Ack Date : 25/09/2024 11:10	Report Date : 25/09/24 13:51

SERUM CREATININE

SAMPLE : SERUM

SERUM CREATININE 0.6 mg/dl 0.5 - 0.9
 Method - Jaffe Gen2 Compensated

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

TOTAL BILIRUBIN 0.6 mg/dl 0 - 1.1
 Method - Diazo Method
 DIRECT BILIRUBIN 0.3 ▲ (H) mg/dl 0 - 0.2
 Method - Diazo Method
 INDIRECT BILIRUBIN 0.3 mg/dl 0.2 - 0.9
 Method - Calculated
 SGPT (ALT) 16 U/L 10 - 35
 Method - IFCC Without Pyridoxal Phosphate
 SGOT (AST) 18 U/L 0 - 32
 Method - IFCC Without Pyridoxal Phosphate
 ALKALINE PHOSPHATASE 98 U/L 35 - 104
 Method - IFCC
 TOTAL PROTEIN 7.8 g/dl 6.6 - 8.7
 Method - Biuret
 ALBUMIN 4.8 gm/dl 3.5 - 5.2
 Method - Bromocresol Green
 GLOBULIN 3.0 g/dl 2 - 3.5
 Method - Calculated
 ALBUMIN:GLOBULIN 1.6 - 1.1 - 2.5
 Method - Calculated
 GGT 11 U/L 5 - 36
 Method - Enzymatic colorimetric assay

N.B.
 NORMAL RANGE : TOTAL PROTEIN
 Umbilical Cord - 4.8-8.0
 Premature - 3.6-6.0

BLOOD UREA NITROGEN





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BLOOD UREA NITROGEN	11.2	mg/dl	6 - 20
<i>Method - Calculated</i>			
LIPID PROFILE			
SAMPLE : SERUM			
TOTAL CHOLESTEROL	137	mg/dl	Desirable <200 Borderline 200 - 239 High >=240
<i>Method - CHOD-PAP</i>			
HDL CHOLESTEROL	67 ▲ (H)	mg/dl	40 - 60
<i>Method - Homogenous Enzymatic Colorimetric</i>			
LDL CHOLESTEROL	50	mg/dl	Optimal < 100 Borderline 130 - 159 High>160
<i>Method - Homogenous Enzymatic Colorimetric</i>			
VLDL	23.8	mg/dl	0 - 30
<i>Method - CALCULATED</i>			
CHOLESTEROL-HDL RATIO	2.04	-	
LDL-HDL RATIO	0.75	-	
TRIGLYCERIDES	119	mg/dl	Desirable <150 Borderline 150 - 200 High >200
<i>Method - Enzymatic Colorimetric</i>			

URIC ACID

SAMPLE : SERUM

URIC ACID	6.5 ▲ (H)	mg/dl	2.4 - 5.7
<i>Method - Enzymatic Colorimetric</i>			

BUN / CREATINE RATIO

SAMPLE : SERUM

BUN / CREATINE RATIO	18.6		
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GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

HBA1C	5.9	%	
<i>Method - High Performance Liquid Chromatography (HPLC) using BIORAD-D10 Machine</i>			
Estimated average blood glucose (EAG)	123	mg/dl	

REFERENCE RANGE

Hemoglobin A1c (%)	Degree of Glucose Control
< 6	Non Diabetic Level



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6-7	Near Normal Glycemia
< 7	Goal
7-8	Good Control
>8	Action Suggested

INTERPRETATION

- 1) Human hemoglobin inside erythrocytes undergoes a non enzymatic chemical reaction with glucose. The rate & extent of this reaction are thought to be dependent on the average blood glucose.
 - 2) The ratio of HbA1c to the total HbA concentration has been suggested as a reliable measure of the degree of metabolic control in diabetic patients.
 - 3) Lipemic and Icteric samples do not interfere with the measurement of the percent HbA1c.
 - 4) Hemoglobin F (Hb F) has the potential to interfere with the measurement of HbA1c generating falsely elevated % Alc values average blood glucose.
- N.B. All reference ranges are age and sex matched. Reference limits mentioned herein are in accordance with the literature along with the kit whi may change with the change in chemistry or the kit.
- N.B.: 1. The above result relates only to the items tested and only to the time of testing. 2. The above report cannot be reproduced in part or whole without the written permission of the chief pathologist.

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING **112 ▲ (H)** mg/dl 70 - 109
Method - Hexokinase

BLOOD SUGAR(PP)

SAMPLE : PLASMA

BLOOD SUGAR PP **153 ▲ (H)** mg/dl 70 - 140
Method - Hexokinase

End of Report

Dr.S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

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Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0195625	Collection Date : 25/09/24 09:36	Ack Date : 25/09/2024 16:19	Report Date : 25/09/24 16:53

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	40	ml	
COLOUR	STRAW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.010		1.010 - 1.030
REACTION(pH)	ACIDIC (pH-6.5)		

CHEMICAL EXAMINATION

SUGAR	ABSENT		ABSENT
ALBUMIN.	ABSENT		
BLOOD	ABSENT		
KETONE	ABSENT		
BILE SALT	ABSENT		
BILE PIGMENTS	ABSENT		

MICROSCOPIC EXAMINATION

PUS CELLS	2-4/HPF		<5/HPF
EPITHELIAL CELLS	4-6/HPF		<20/HPF
RBC	ABSENT		
CAST	ABSENT		ABSENT
CRYSTAL	ABSENT		

Please correlate clinically.

STOOL FOR R/E

SAMPLE : STOOL

PHYSICAL EXAMINATION

COLOUR.	BROWNISH
CONSISTENCY	SOFT





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MUCUS : PRESENT
 VISIBLE BLOOD : ABSENT
 ADULT PARASITE : ABSENT
CHEMICAL EXAMINATION
 REACTION : ACIDIC
MICROSCOPIC EXAMINATION
 PUS CELLS : 2-3/HPF
 VEG CELL : PRESENT
 RBC : ABSENT
 OVA : NOT FOUND
 PARASITES : NOT FOUND
 CYSTS : NOT FOUND
 BACTERIAL FLORA : PRESENT
 FAT GLOBULES : ABSENT
 STARCH GRANULES : PRESENT

Please correlate clinically.

URINE FOR SUGAR FASTING

SAMPLE : URINE
 RESULT : ABSENT

URINE FOR SUGAR PP

SAMPLE : URINE
 RESULT : ABSENT

End of Report

Dr. S. Chatterjee
 MD, MBBS, FAAC
 (CONSULTANT BIOCHEMIST)

Checked By

Dr. MAINAK CHAKRABORTY
 MBBS, MD(PATH)
 (CONSULTANT PATHOLOGIST)



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LABORATORY INVESTIGATION REPORT

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Address : 5A, MARLIN VASUNDHARA , BEHALA ,Kolkata,West Bengal ,700061 **DOB** : 26/11/1973
Facility : NARAYAN MEMORIAL HOSPITAL

Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0195625	Collection Date : 25/09/24 09:36	Ack Date : 25/09/2024 11:10	Report Date : 25/09/24 13:51

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	0.89	ng/ml	0.80 - 2.00
Method - ECLIA			
T4	9.14	ug/dL	5.10 - 14.10
Method - ECLIA			
TSH	2.68	uIU/ml	Adult Male - 0.27-5.50 Adult Female - 0.27-5.50 Newborns - <25 Upto 12 years - 0.3-5
Method - ECLIA			

Interpretations:

- For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
- The assay is unaffected by icterus (Bilirubin < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (Intralipid < 1500 mg/dL), biotin (<102 nmol/L or < 25 ng/ml), IgG < 2 g/dL and IgM < 0.5 g/dL).
- There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
- TSH values may be transiently altered because of non thyroidal illness like several infections, liver disease, renal and heart failure, several burns, trauma and surgery etc. Drugs that decrease TSH values e.g. L-dopa, Glucocorticoid drugs that increase TSH values e.g. Iodine, Lithium, Amiodarone.
- The assay is unaffected by icterus (bilirubin < 633 µmol/L or < 37 mg/dl), hemolysis (Hb < 1.4 mmol/L or < 2.3 g/dl), lipemia (triglycerides < 28.5 mmol/L or 2500 mg/dl) and biotin (< 409 nmol or < 100 ng/ml).
- The assay is unaffected by icterus (bilirubin < 599 µmol/L or < 35 mg/dl), hemolysis (Hb < 1.2 mmol/L or < 2.0 g/dl), lipemia (Intralipid < 1800 mg/dl) and biotin (< 123 nmol or < 30 ng/ml).

End of Report

Dr. S. Chatterjee
 MD, MBBS, FAAC
 (CONSULTANT BIOCHEMIST)



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U/8510WB2005PTC104884
No. : 19, ACCN1707E1ZS
S.N. #DJ0A467747

DATE: 25/09/2024

TIME: 15:41

Software version: 4.30-2

Sample ID:

07H0195625A

Injection date

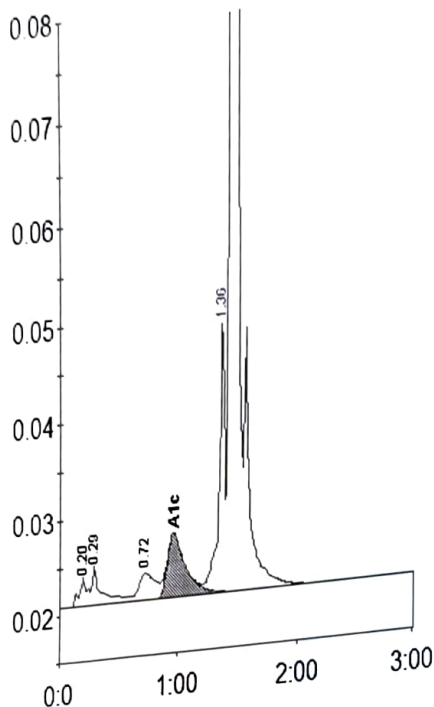
25/09/2024 15:13

Injection #: 8

Method: HbA1c

Rack #: ---

Rack position: 8



Peak table - ID: 07H0195625A

Peak	R.time	Height	Area	Area %
A1a	0.20	3047	14690	0.9
A1b	0.29	4163	23945	1.4
LA1c/CHb-1	0.72	2874	27942	1.7
A1c	0.96	6682	73057	5.9
P3	1.36	28561	92033	5.6
A0	1.43	543671	1426311	86.0
Total Area:		1657977		

Concentration:	%	mmol/mol
A1c	5.9	41

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X-RAY CHEST PA VIEW

Prominent bronchovascular markings are seen in both lung fields.

Hila are normal in size.

Cardiothoracic ratio appear normal.

Trachea and mediastinum are normal in position.

Costophrenic angles are clear.

Domes of diaphragm are normal in position and outlines are well delineated.

Bony thorax appears unremarkable.

Needs clinical correlation.

Dr. SUBRATA NAG
MBBS, DNB, Fellow
intervention/endovascular surgery

RegNo: 66718

Print Date Time : 26/09/2024 09:51:58

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ELECTROCARDIOGRAM REPORT (ECG)

HR : 66 bpm

Rhythm : Sinus

P wave : Normal

PR Interval : 152 msec

QRS axis : Normal (31 Degree)

QRS duration : 86 msec

QRS configuration : Normal

T wave : Non specific changes

ST segment : Non specific changes

QTc : 408 msec

QT : 388 msec

IMPRESSION

- Sinus rhythm.
 - Within normal limits.
- Clinical correlation please.

Dr. Sudip Chakraborty
MBBS, DIP (Preventative Cardiology)
fellow Clinical

RegNo: 56285

Print Date: 25/09/2024 14:28:25

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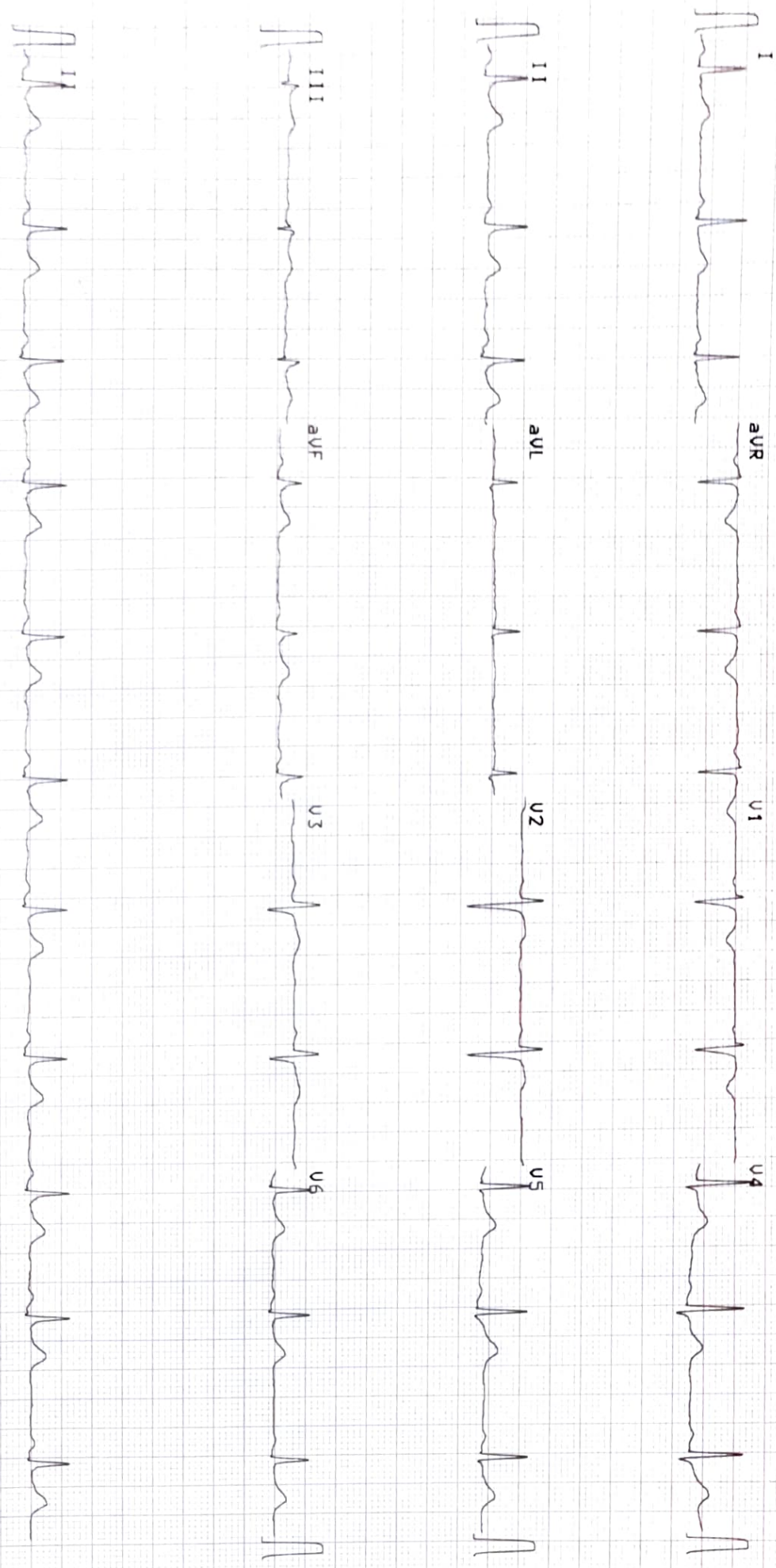
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OUTR
 3734
 Female
 years / kg

HR 66/min
 Axis: P 32°, QRS 31°, T 51°
 Intervals: RR 913 ms, P 110 ms, PR 152 ms, QRS 86 ms, QT 388 ms, QTc 408 ms (Bazett)
 10 mm/mV

SINUS RHYTHM
 NORMAL ECG

UNCONFIRMED REPORT



10 mm/mV
 25 mm/s
 SCHILLER
 0.05-25 Hz F50 SSF SBS
 25.09.2024 11:52:13
 NARAYAN MEMORIAL HOSPITAL, BEHALA
 Part No.2.157017M
 RT-102plus 1.25 Ct
 © 0123



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Address : 5A, MARLIN VASUNDHARA,
BEHALA, Kolkata, West Bengal,
700061

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Report Date : 25/09/2024 15:01

Facility : NARAYAN MEMORIAL
HOSPITAL
Mobile : 9372269277

REPORT OF ECHO SCREENING

No regional wall motion abnormality at rest.
Normal LV systolic function (LVEF = 65%).
Normal RV systolic function. (TAPSE = 1.9 cm).
Trivial MR.
Trivial PR.
Adequate diastolic compliance (E/e' = 8.73) (E/A - 1.35).
No pericardial effusion.
Mild TR. Estimated PASP -17 mmHg.
IVC normal diameter &> 50 % respiratory compressibility.
No thrombus, mass / vegetation.

Dr. Sudip Chakraborty
MBBS, DIP (Preventative Cardiology)
fellow Clinical

RegNo: 56285