

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:58 AM Reported On : 09/09/2023 12:08 PM

Barcode : BR2309090031 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

IMMUNOHAEMATOLOGY

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

--End of Report--



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 Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:31 AM Reported On : 09/09/2023 11:30 AM

Barcode : 802309090371 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)


Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.57	mg/dL	0.52-1.04
eGFR	120.1	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	8.15	mg/dL	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	136 L	mmol/L	137.0-145.0
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	170	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	95	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	60	mg/dL	40.0-60.0
Non-HDL Cholesterol	110.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	85.4	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	19.0	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	2.9	-	-
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.88	mg/dL	0.2-1.3



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Conjugated Bilirubin (Direct) (Calculated)	0.22	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.66	-	-
Total Protein (Biuret Method)	7.80	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.70	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.1	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.52	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	24	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	21	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	74	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	13	U/L	12.0-43.0



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

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Serum Potassium (Direct ISE - Potentiometric)	4.4	mmol/L	3.5-5.1

--End of Report--

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)



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



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

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(Serum Potassium -> Auto Authorized)



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Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:31 AM Reported On : 09/09/2023 10:38 AM

Barcode : 802309090371 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.16	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	7.37	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.743	uIU/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--



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



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

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Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:29 AM Reported On : 09/09/2023 11:15 AM

Barcode : 812309090290 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	10	mm/1hr	0.0-12.0

--End of Report--



Dr. Moumita Panja
DNB, Pathology
Consultant Pathologist

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Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:29 AM Reported On : 09/09/2023 10:08 AM

Barcode : 802309090373 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

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-



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

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)
Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 06:55 PM Reported On : 11/09/2023 01:06 PM
Barcode : 872309090001 Specimen : Fluid & Swab Consultant : EXTERNAL(EXTERNAL)
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

CYTOLOGY

CERVICAL SMEAR FOR CYTOLOGY

LAB NO	GC- 890/23
SPECIMEN TYPE	Cervical smear
MICROSCOPIC EXAMINATION	The 2014 Bethesda system Smear's studied are satisfactory for evaluation and show mainly superficial squamous cells, intermediate squamous cell and parabasal cells. Few metaplastic cells seen. Monilia and T. vaginalis are absent. Dysplastic and malignant cells are absent. No infiltrate of inflammatory cells are seen in the smears.
IMPRESSION	Negative for intraepithelial lesion or malignancy

--End of Report--



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

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ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Ms Mousumi Bakuli
GENDER/AGE : Female, 36 Years
LOCATION : -

PATIENT MRN : 17510001215200
PROCEDURE DATE : 09/09/2023 03:02 PM
REQUESTED BY : EXTERNAL



IMPRESSION

- NO SIGNIFICANT ECHOCARDIOGRAPHIC ABNORMALITY DETECTED.

FINDINGS

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
RIGHT ATRIUM : NORMAL SIZED
LEFT VENTRICLE : NORMAL SIZED CAVITY. NO REGIONAL WALL MOTION ABNORMALITY. GOOD SYSTOLIC FUNCTION WITH EJECTION FRACTION: 65%. NORMAL DIASTOLIC FLOW PATTERN.
RIGHT VENTRICLE : NORMAL

VALVES

MITRAL : NORMAL
AORTIC : NORMAL
TRICUSPID : NORMAL
PULMONARY : NORMAL

SEPTAE

IAS : INTACT
IVS : INTACT

ARTERIES AND VEINS

AORTA : NORMAL, LEFT AORTIC ARCH
PA : NORMAL SIZE
IVC : NORMAL SIZE & COLLAPSIBILITY
SVC & CS : NORMAL
PULMONARY VEINS : NORMAL

PERICARDIUM : NORMAL PERICARDIAL THICKNESS. NO EFFUSION

INTRACARDIAC MASS : NO TUMOUR, THROMBUS OR VEGETATION SEEN

OTHERS : NIL.

Arnab Paul

MS MOUSUMI BAKULI (17510001215200)

DR. ARNAB PAUL
ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC.
REG NO : 57819 WBMC

MAMONI SHEE
TECHNICIAN

09/09/2023 03:02 PM

PREPARED BY : SHAWLI MITRA(307739)
GENERATED BY : PAROMITA SARKAR(329190)

PREPARED ON : 09/09/2023 03:41 PM
GENERATED ON : 09/09/2023 04:29 PM

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 01:59 PM Received On : 09/09/2023 02:08 PM Reported On : 09/09/2023 03:10 PM

Barcode : 802309090733 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	92	mg/dL	Normal: 70-139 Pre-diabetes: 140-199 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



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

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- Kindly correlate clinically.
(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



Patient Name	Mousumi Bakuli	Requested By	EXTERNAL
MRN	17510001215200	Procedure DateTime	2023-09-09 14:24:28
Age/Sex	36Y 1M/Female	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

It is normal in size and echogenicity. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

PORTAL VEIN:

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus.

GALL BLADDER:

It is optimally distended. No calculus or sludge is seen within it. The wall is not thickened.

CBD:

The common duct is not dilated at porta. No intraluminal calculus is seen.

SPLEEN:

It is normal in size measuring 9.3 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

PANCREAS:

It is normal in size and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

KIDNEYS:

Both kidneys are normal in size, position and echogenicity. The corticomedullary differentiation is maintained. Mild pelvic fullness noted bilaterally. No calculus or mass is seen.

Right kidney and left kidney measures 9.8 cm and 11.1 cm respectively.

URINARY BLADDER:

It is normal in capacity. The wall is not thickened. No intraluminal calculus or mass is seen. Post void residual urine insignificant.

UTERUS:

Bulky in size measuring 9.4 x 4.6 x 5.9 cm . Fibroid (1.8 x 2.6 cm) noted involving anterior myometrium. The endometrial echoline is central in position. Endometrium is not thickened (and measures 0.52 cm). The cervix appears normal.

OVARIES:

The ovaries are normal in size, shape and echotexture.

The right and left ovaries measures 2.3 x 0.98 cm and 2.1 x 2.09 cm respectively.

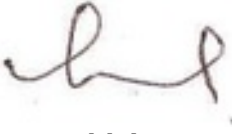
IMPRESSION:

- Bilateral renal mild pelvic fullness.
- Bulky uterus with fibroid.

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 pathological findings.

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



Dr. Ashish Kumar
Consultant Sonologist

* ***This is a digitally signed valid document.*** Reported Date/Time: 2023-09-09 14:48:58

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:28 AM Reported On : 09/09/2023 10:25 AM

Barcode : 812309090291 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	12.1	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.99 H	millions/ μ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	38.3	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	76.8 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	24.2 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	17.2 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	151	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	11.3	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	4.9	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	70.7	%	40.0-75.0
Lymphocytes (VCSn Technology)	20.2	%	20.0-40.0
Monocytes (VCSn Technology)	7.2	%	2.0-10.0
Eosinophils (VCSn Technology)	1.3	%	1.0-6.0

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)			
Basophils (VCSn Technology)	0.6	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	3.47	10 ³ /μL	1.8-7.8
Absolute Lymphocyte Count (Calculated)	0.99 L	10 ³ /μL	1.0-4.8
Absolute Monocyte Count (Calculated)	0.36	10 ³ /μL	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.07	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. Moumita Panja
DNB, Pathology
Consultant Pathologist

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Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 09:32 AM Reported On : 09/09/2023 10:04 AM

Barcode : 802309090372 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	97	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



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

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



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

Collected On : 09/09/2023 09:14 AM Received On : 09/09/2023 10:50 AM Reported On : 09/09/2023 11:30 AM

Barcode : 822309090022 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9769870889

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

Volume	45	ml	-
Colour	Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (Mixed PH Indicator)	5.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.016	-	1.002-1.030
Protein (Protein Error Of PH Indicator)	Trace	-	Nil
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

Page 1 of 2

Rabindranath Tagore International Institute of Cardiac Sciences

(A unit of Narayana Hrudayalaya Limited)

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E-mail: email.rtiics@narayanahealth.org | Web: www.narayanahealth.org

GISTIN/UIIN : 19AABCN1685J1Z5



Appointments
180 0309 0309 (Toll free)

Emergencies
99033 35544

Patient Name : Ms Mousumi Bakuli MRN : 17510001215200 Gender/Age : FEMALE , 36y (19/07/1987)

MICROSCOPIC EXAMINATION

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

--End of Report--



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

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Patient Name	Mousumi Bakuli	Requested By	
MRN	17510001215200	Procedure DateTime	2023-09-09 10:40:28
Age/Sex	36Y 1M/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.
- No significant lung parenchymal lesion is seen.
- The costo-phrenic angles are clear.
- Both the diaphragmatic domes appear normal.
- The visualized bones and soft tissue structures 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

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