



LABORATORY INVESTIGATION REPORT

Patient Name	: Mr. SURESH RABIDAS	Age/Sex	: 58 Year(s) / Male
UHID	: NPHK2412966	Order Date	: 26/09/2024 09:36
Episode	: OP	Mobile No	: 9875582621
Ref. Doctor	: S091	DOB	: 01/01/1965
Address	: PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063	Facility	: NARAYAN MEMORIAL HOSPITAL

Nematology

Sample No.	: 27624023	Collection Date	: 26/09/2024 09:36	Accession No.	: 26/09/2024 09:47	Report Date	: 26/09/2024 11:28
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BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP : 'O'
 Method - Agglutination Forward & Reverse
RH TYPE : POSITIVE

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (Hb)	13.5	gm/dl	13 - 17
Method - CyanmethH Method (Cm-Method)			
RBC COUNT	4.7	x10 ⁶ /ul	4.5 - 5.5
Method - Electrical Impedance Method			
TOTAL WBC COUNT	6.3	10 ³ /cmm	4 - 10
Method - Electrical Impedance Method			
PLATELET COUNT	200	10 ³ /cmm	150 - 410
Method - Electrical Impedance Method			
PCV	43	%	40 - 50
Method - RBC pulse ht. detection method			
MCV	91	fL	83 - 101
Method - Calculated			
MCH	29	pg	27 - 32
Method - Calculated			
MCHC	32	gm/dl	31.5 - 34.5
Method - Calculated			
ESR	15 ± (H)	%	0 - 12
Method - Modified Westergren Method			

DIFFERENTIAL COUNT

NEUTROPHILS	70	%	40 - 80
Method - Microscopy			
LYMPHOCYTES	21	%	20 - 40
Method - Microscopy			
MONOCYTES	06	%	2 - 10
Method - Microscopy			
EOSINOPHILS	03	%	1 - 6
Method - Microscopy			



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UHID : NMHK.2418966	Order Date : 28/09/2024 09:36
Episode : OP	Mobile No : 9875582621
Ref. Doctor : NMH	DOB : 01/01/1965
Address : PANERARA , THAKURPUKUR ,Kolkata,West Bengal 700063	Facility : NARAYAN MEMORIAL HOSPITAL

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)

Checked By

Dr. Ritwika Dabral
MBBS, MD (Pathology)
(Consultant Pathologist)

RegNo: WBMC 92599





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Episode	1 OP	Mobile No	1 9875582621
Ref. Doctor	1 NMH	DOB	1 01/01/1965
Address	1 PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063	Facility	1 NARAYAN MEMORIAL HOSPITAL

Biochemistry

TEST	RESULT	UNIT	REFERENCE RANGE
Tested On	28/09/2024		
Collection Date	28/09/2024		
Analysis Date	28/09/2024		
Report Date	28/09/2024		

SERUM CREATININE

SAMPLE : SERUM			
SERUM CREATININE	0.7	mg/dl	0.7 - 1.2
<i>Method - Jaffe-Genz Compensated</i>			

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM			
TOTAL BILIRUBIN	0.6	mg/dl	0 - 1.1
<i>Method - Diazo Method</i>			
DIRECT BILIRUBIN	0.2	mg/dl	0 - 0.2
<i>Method - Diazo Method</i>			
INDIRECT BILIRUBIN	0.4	mg/dl	0.2 - 0.9
<i>Method - Calculated</i>			
SGPT (ALT)	18	U/L	10 - 50
<i>Method - JCC Without Pyridoxal Phosphate</i>			
SGOT (AST)	21	U/L	0 - 40
<i>Method - JCC Without Pyridoxal Phosphate</i>			
ALKALINE PHOSPHATASE	119	U/L	40 - 129
<i>Method - JCC</i>			
TOTAL PROTEIN	7.9	g/dl	6.6 - 8.7
<i>Method - Biuret</i>			
ALBUMIN	4.7	g/dl	3.5 - 5.2
<i>Method - Bromocresol Green</i>			
GLOBULIN	3.2	g/dl	2 - 3.5
<i>Method - Calculated</i>			
ALBUMIN:GLOBULIN	1.5	-	1.1 - 2.5
<i>Method - Calculated</i>			
GGT	27	U/L	8 - 61
<i>Method - Enzymatic colorimetric assay</i>			

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



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Ref. Doctor	: NPH	DOB	: 01/01/1965
Address	: PANERARA , THAKURPUKUR ,Kolkata,West Bengal ,700063	Facility	: NARAYANA MEMORIAL HOSPITAL

BLOOD UREA NITROGEN 9.5 mg/dl 6 - 20
 Method - Calculated

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL 180 mg/dl Desirable <200
 Method - CHOC-NP Borderline 200 - 239
 High >=240

HDL CHOLESTEROL 52 mg/dl 40 - 60
 Method - Homogenous Enzymatic Colorimetric

LDL CHOLESTEROL 103 mg/dl Optimal < 100
 Method - Homogenous Enzymatic Colorimetric Borderline 130 - 159
 High >160

VLDL 25.2 mg/dl 0 - 30
 Method - CALCULATED

CHOLESTEROL-HDL RATIO 3.46

LDL-HDL RATIO 1.98

TROGLYCERIDES 126 mg/dl Desirable <150
 Method - Enzymatic Colorimetric Borderline 150 - 200
 High >200

URIC ACID

SAMPLE : SERUM

URIC ACID 6.9 mg/dl 3.4 - 7
 Method - Enzymatic Colorimetric

BUN / CREATINE RATIO

SAMPLE : SERUM

BUN / CREATINE RATIO 13.7

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

HBA1C 5.6 %
 Method - High Performance Liquid Chromatography (HPLC)
 using BIORAD-D10 Machine

Estimated average blood glucose (EAG) 114 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 % A1c 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 97 mg/dl 70 - 109
 Method - Hexokinase

End of Report

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

Checked By



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LABORATORY INVESTIGATION REPORT

Patient Name	1 Mr. SURESH RABDAS	Age/Sex	1 59 Year(s) / Male
UHID	1 1096K241896	Order Date	1 23/09/2024 09:36
Episode	1 OP	Mobile No	1 9875082621
Ref. Doctor	1 NPH	DOB	1 01/01/1965
Address	1 PANDEYA, THAKURPUNJRI, Kolkata, West Bengal, 700063	Facility	1 NARAYAN MEMORIAL HOSPITAL

Immunoassays- Tumour Markers

Report No. : 1096K241896 Collection Date : 23/09/2024 09:36 Recd Date : 23/09/2024 11:41 Report Date : 23/09/2024

PROSTATE SPECIFIC ANTIGEN (PSA)

PROSTATE SPECIFIC ANTIGEN (PSA) 1.16 ng/ml <3.5

Interpretation: Prostate-specific antigen (PSA) is a glycoprotein that is produced by the prostate gland, the lining of the urethra, and the bulbourethral gland. PSA exists in serum mainly in two forms, complexed to alpha-1 -and -2-macroglobulin (PSA-ACT complex) and unbound (free PSA). Increases in prostatic glandular size and tissue damage caused by benign prostatic hypertrophy, prostatitis, or prostate cancer may increase circulating PSA levels. Transient increase in PSA can also be seen following per rectal digital or sonological examinations

End of Report

Dr. S. Chatterjee
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UHID	: NPHK.2418966	Order Date	: 26/09/2024 09:36
Episode	: OP	Mobile No	: 9875582623
Ref. Doctor	: NPH	DOB	: 01/01/1985
Address	: PANERABA, TYAKURPLUKA, Kolkata, West Bengal, 700063	Facility	: NARAYAN MEMORIAL HOSPITAL

Immunology

TEST NAME	RESULT	UNIT	REFERENCE RANGE
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THYROID FUNCTION TEST

SAMPLE SERUM

T3	1.18	ng/ml	0.80 - 2.00
Method - ECLIA			
T4	9.27	ug/dL	5.10 - 14.10
Method - ECLIA			
TSH	9.77	uIU/ml	Adult Male - 0.27-5.90 Adult Female - 0.27-5.90 Newborns - <25 Up to 12 years - 0.3-5
Method - ECLIA			

Interpretation:

- 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 (triglycerides < 1500 mg/dL), biotin (< 102 nmol/L or < 25 ng/mL), IgG < 2 g/dL and IgM < 0.3 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-thyroxine, 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 (triglycerides < 1800 mg/dL) and biotin (< 123 nmol or < 30 ng/mL).

End of Report

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



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INDIA
19AACCN1707E125

LABORATORY INVESTIGATION REPORT



Patient Name	1 Mr. SURESH RASTOIS	Age/Sex	1 59 Year(s) / Male
UHTD	1 NH/KK/2418966	Order Date	1 29/09/2024 09:16
Epi/Code	1 OP	Mobile No	1 987592621
Ref. Doctor	1 NMH	DOB	1 01/01/1965
Address	1 BANERJIA, THAKURPUKUR, Kolkata, West Bengal 700063	Facility	1 NARAYAN MEMORIAL HOSPITAL

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Address	: PANERARA, THAKURPURIKUR, Kolkata, West Bengal ,700063	Facility	: NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION

Sample No : 0740196056

Collection Date: 28/09/24 09:33

Collection Date: 28/09/24 09:33

Acc Date : 28/09/2024 13:39

Report Date : 28/09/24 16:50

Report Date : 28/09/24 16:50

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME : 50 ml
COLOUR : STRAW
APPEARANCE : SLIGHTLY HAZY
SPECIFIC GRAVITY : 1.015
REACTION(PH) : ACIDIC (PH - 6.0)

CHEMICAL EXAMINATION

SUGAR : ABSENT
ALBUMIN : PRESENT(TRACE)
BLOOD : ABSENT
KETONE : ABSENT
BILE SALT : ABSENT
BILE PIGMENTS : ABSENT

MICROSCOPIC EXAMINATION

PUS CELLS : 2-4/HPF
EPITHELIAL CELLS : 1-2 / HPF
RBC : OCCASIONAL
CAST : ABSENT
CRYSTAL : ABSENT
OTHERS : MICRO-ORGANISM PRESENT

Please correlate clinically.

URINE FOR SUGAR FASTING

SAMPLE : URINE
RESULT

ABSENT

OCCASIONAL

ABSENT

1-2 / HPF

<5/HPF

2-4/HPF

<20/HPF



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STOOL FOR R/E

SAMPLE : STOOL

PHYSICAL EXAMINATION

COLOUR,	BROWNISH
CONSISTENCY	SOFT
MUCUS	PRESENT
VISIBLE BLOOD	NOT FOUND
ADULT PARASITE	NOT FOUND

CHEMICAL EXAMINATION

REACTION

ACIDIC

MICROSCOPIC EXAMINATION

PUS CELLS	1-2/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.

End of Report

Mehak

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

Checked By

Ritika

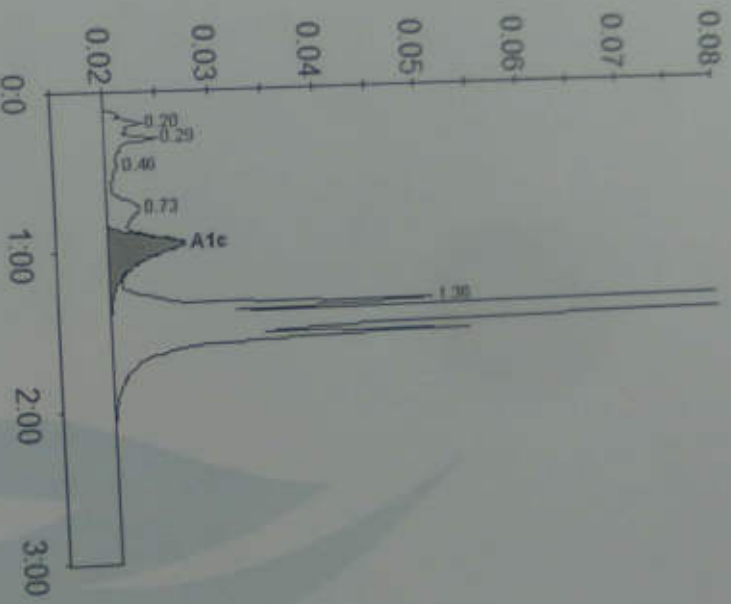
Dr. Ritwika Dabral
MBBS, MD (Pathology)
(Consultant Pathologist)
RegNo: WBNC 92599

S. Chatterjee

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



Sample ID: 28/09/2024 13:33
 Injection date: Method: HbA1c
 Injection #: 6 Rack position: 6
 Rack #: ---



Peak table - ID: 07H0196056A

Peak	R.time	Height	Area	Area %
Ala	0.20	3804	18132	1.0
Alb	0.29	5332	21708	1.1
F	0.46	1151	8193	0.4
LAlc/CHb-1	0.73	3119	30084	1.6
A1c	0.96	7187	78233	5.6
P3	1.36	31733	107866	5.7
A0	1.43	615160	1633637	86.1
Total Area:		1897853		

Concentration:	%	mmol/mol
A1c	5.6	38



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Patient Name	: Mr. SURESH RABIDAS	Order Date	: 28/09/2024 09:36
Age/Sex	: 59 Year(s)/Male	Report Date	: 30/09/2024 10:39
UHID	: NMHK_2418966		
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL
Address	: PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063	Mobile	: 9875582621

USG REPORT OF WHOLE ABDOMEN (SCREENING)

LIVER : Liver is normal in size and parenchymal echotexture. Intrahepatic biliary radicles are not dilated. No focal mass lesion is seen. **Multiple cysts are seen in right lobe. The largest one measures 6.0 cm x 4.3 cm approx. A small hyperechoic lesion measuring 0.8 cm approx is also noted in right lobe.**

PORTA :

PV : Normal. PV measures 0.9 cm.

CBD : Normal . CBD measures 0.2 cm.

GALL BLADDER : Gall bladder is normal in size, contour, outline and position. No calculus is seen. Wall thickness is normal.

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.

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 : 10.2 cm & Left kidney measures : 10.3 cm.

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DIAGNOSTICS REPORT

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Ref. Doctor	: NMH	Mobile	: 9875582621
Address	: PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063		

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

PROSTATE : Prostate is normal size, outline and echotexture appear normal. No focal lesion is seen. Prostate measures 3.3 cm x 3.7 cm x 2.7 cm. It weight approx 18 gm.

PERITONEUM : No free fluid is noted.

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

IMPRESSION :

- * Simple cysts in liver.
- * A small hemangioma in right lobe of liver.

Dr. MADHUSHREE RAY NASKAR
MBBS, DMRD

Consultant Radiologist
RegNo: 57032

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Narayan Memorial Hospital

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

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AACCN1707E1ZS




DIAGNOSTICS REPORT

Patient Name	: Mr. SURESH RABIDAS	Order Date	: 28/09/2024 09:36
Age/Sex	: 59 Year(s)/Male	Report Date	: 28/09/2024 16:33
UHID	: MMHK.2419966	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	: NMH	Mobile	: 9875582621
Address	: PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063		

REPORT OF ECHO SCREENING

No regional wall motion abnormality at rest.
Normal LV systolic function (LVEF = 65%).
Normal LV systolic function. (TAPSE = 1.7 cm).
Normal RV systolic function (E/e' = 9.57; E/A = 1.33).
Adequate diastolic compliance.
No pericardial effusion.
Mild TR. Estimated PASP = 33 mmHg.
IVC normal diameter & > 50 % respiratory compressibility.
No thrombus, mass / vegetation.


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

Reg.No: 56285

Narayan Memorial Hospital

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

CIN No. : U85110WB2005PTC104884

GSTIN No. : 19AAACCN1707E1ZS



DIAGNOSTICS REPORT

Patient Name	: Mr. SURESH RABIDAS	Order Date	: 28/09/2024 09:36
Age/Sex	: 59 Year(s)/Male	Report Date	: 28/09/2024 15:07
UHID	: NMHK.2418966	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	: NMH	Mobile	: 9875582621
Address	: PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063		

ELECTROCARDIOGRAM REPORT (ECG)

HR	: 65 bpm
Rhythm	: Sinus
P wave	: Normal
PR Interval	: 192 msec
QRS axis	: Normal
QRS duration	: 80 msec
QRS configuration	: Normal
T wave	: Non specific changes
ST segment	: Non specific changes
QTc	: 404 msec
QT	: 384 msec

IMPRESSION

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

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

RegNo: 56285

Registration No : 28/09/2024 12:01
Print Date : 28/09/2024 12:01
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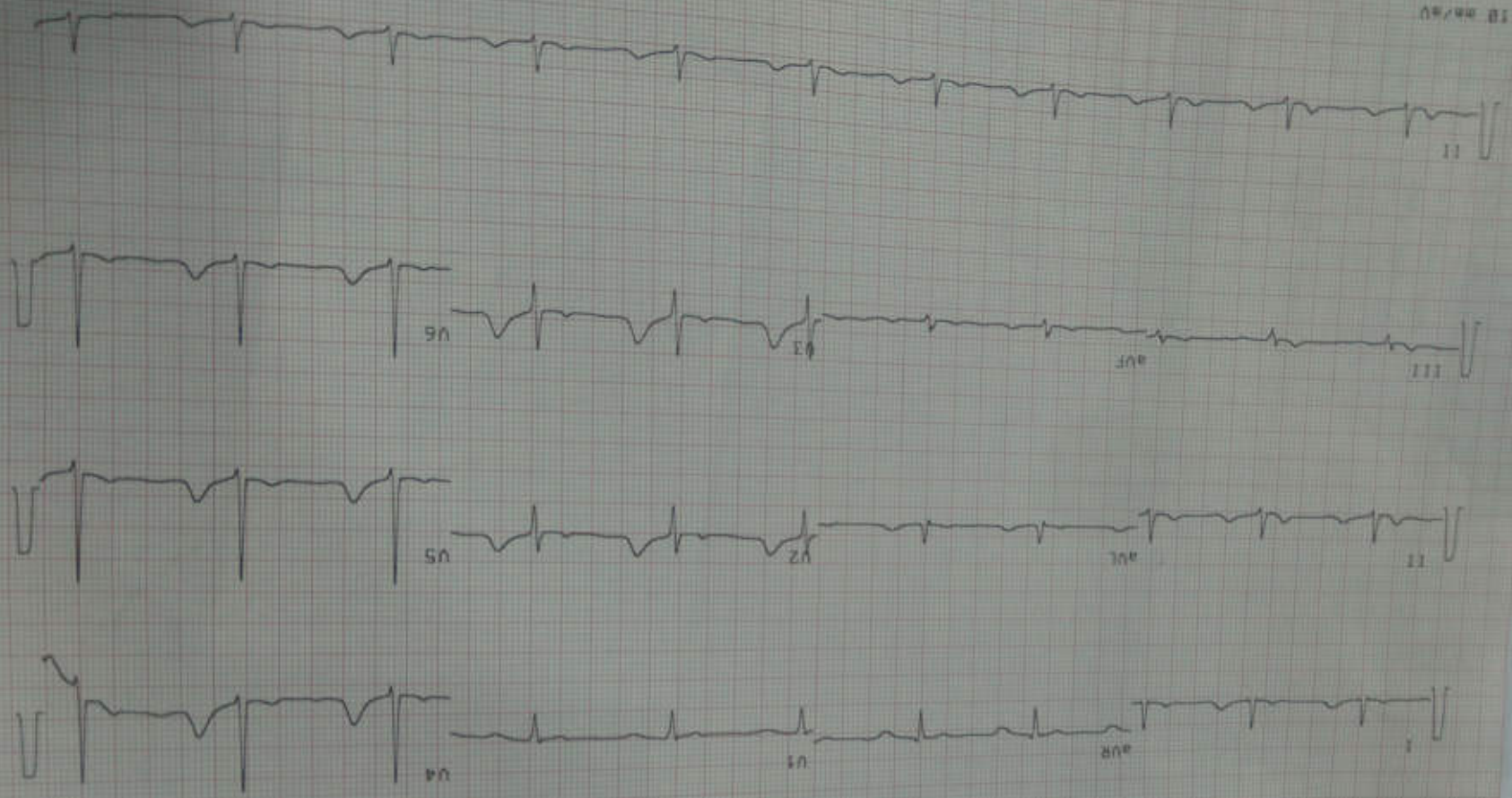
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25 mm/s

SCHILLER
R.85-25 Hz F50 SSF 585 28.89.2024 11:24:81

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18 mm/mV

HR 55/min
Rx:st
P 38 *
QRS 17 *
T 28 *Intervals:
RR 917 ms
P 118 ms
PR 192 ms
QRS 88 ms
QT 184 ms
QTc 484 ms (Bazett)
18 mm/mV

Sokol - 2.52 mV
R (V5) 1.95 mV
S (V1) -8.54 mV
P (II) 8.06 mV

UNCONFIRMED REPORT

SINUS RHYTHM
NORMAL ECG





DIAGNOSTICS REPORT

Patient Name	: Mr. SURESH RABIDAS	Order Date	: 28/09/2024 09:36
Age/Sex	: 59 Year(s)/Male	Report Date	: 28/09/2024 18:11
UHID	: NHK_2418966	Facility	: NARAYAN MEMORIAL HOSPITAL
Ref. Doctor	: NPH	Mobile	: 9875582621
Address	: PANERARA, THAKURPUKUR, Kolkata, West Bengal, 700063		

CHEST X-RAY REPORT OF PA VIEW

Lung fields are clear. No focal parenchymal opacity is seen.

No appreciable pleural thickening / calcification is noted.

Costo-phrenic angles are normal.

Cardiac shadow appears enlarged- 2D echocardiography suggested for further evaluation.

Bilateral hilar shadows are normal.

Both domes of diaphragm are normal.

No obvious bony abnormality is seen.

Trachea is central in position.

Dr. KANISHKA MUKHERJEE
MBBS, MD (Rad. Diag.)

RegNo: 74523

Print Date Time : 30/09/2024 14:47:40

Print By : SNEHA SARKAR

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