

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:31 AM Reported On : 08/04/2023 10:20 AM

Barcode : 802304080292 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
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SERUM CREATININE

Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.73	mg/dL	0.52-1.04
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eGFR	89.3	mL/min/1.73m ²	-
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Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	7.12	-	7.0-17.0
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Serum Sodium (Direct ISE - Potentiometric)	137	mmol/L	137.0-145.0
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Serum Potassium (Direct ISE - Potentiometric)	4.1	mmol/L	3.5-5.1
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LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)

Cholesterol Total (Colorimetric - Cholesterol Oxidase)	198	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
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Triglycerides (Enzymatic Endpoint Colorimetric)	91	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
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HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	36 L	mg/dL	40.0-60.0
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Non-HDL Cholesterol	162.0	-	-
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LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	121.36 H	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
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VLDL Cholesterol (Calculated)	18.2	mg/dL	0.0-40.0
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Cholesterol /HDL Ratio	5.5	-	-
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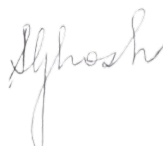
LIVER FUNCTION TEST(LFT)

Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)			
Bilirubin Total (Colorimetric -Diazo Method)	0.35	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.14	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.21	-	-
Total Protein (Biuret Method)	7.10	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	3.90	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.2	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.22	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	16	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	15	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	81	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	15	U/L	12.0-43.0

--End of Report--



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



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

Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Note

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



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Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:31 AM Reported On : 08/04/2023 10:44 AM

Barcode : 802304080292 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.08	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	8.03	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	3.727	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--

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Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:28 AM Reported On : 08/04/2023 09:42 AM

Barcode : 812304080230 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	12.2	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.35	millions/ μ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	37.4	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	85.9	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.1	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	32.6	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	14.4 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	218	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	10.6	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	5.8	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	59.5	%	40.0-75.0
Lymphocytes (VCSn Technology)	29.8	%	20.0-40.0
Monocytes (VCSn Technology)	7.3	%	2.0-10.0
Eosinophils (VCSn Technology)	3.1	%	1.0-6.0

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Basophils (VCSn Technology)	0.3	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	3.46	$10^3/\mu\text{L}$	1.8-7.8
Absolute Lymphocyte Count (Calculated)	1.73	$10^3/\mu\text{L}$	1.0-4.8
Absolute Monocyte Count (Calculated)	0.43	$10^3/\mu\text{L}$	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.18	$10^3/\mu\text{L}$	0.0-0.45
Absolute Basophil Count (Calculated)	0.02	$10^3/\mu\text{L}$	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

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- Kindly correlate clinically.



MC - 2803



DEPARTMENT OF LABORATORY MEDICINE

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Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:31 AM Reported On : 08/04/2023 10:06 AM

Barcode : 802304080295 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	85	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 : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 12:45 PM Reported On : 08/04/2023 02:32 PM

Barcode : 822304080029 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL PATHOLOGY

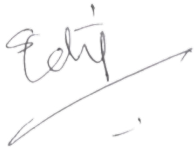
Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume	30	ml	-
Colour	Straw	-	-
Appearance	Cloudy	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Mixed PH Indicator)	6.0	-	4.8-7.5
Sp. Gravity (Dual Wavelength Reflectance)	1.002	-	1.002-1.030
Protein (Protein 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)	Present +++	-	Negative
Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen)	Trace	-	-
Nitrite (Modified Griess Reaction)	Negative	-	Negative

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MICROSCOPIC EXAMINATION

Pus Cells	30-35	/hpf	1-2
RBC	0-2	/hpf	0 - 3
Epithelial Cells	4-8	/hpf	2-3
Crystals	NIL	-	-
Casts	NIL	-	-

--End of Report--



Dr. Shanaz Latif

MD, Pathology

Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:28 AM Reported On : 08/04/2023 11:37 AM

Barcode : 802304080294 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	4.8	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	91.06	-	-

Interpretation:

- 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.
- 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.
- 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 : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 02:31 PM Received On : 08/04/2023 02:59 PM Reported On : 08/04/2023 03:39 PM

Barcode : 802304080664 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	82	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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(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



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Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:29 AM Reported On : 08/04/2023 10:41 AM

Barcode : 812304080229 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	45.0 H	mm/1hr	0.0-12.0

--End of Report--

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

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 06:41 PM Reported On : 10/04/2023 12:45 PM

Barcode : 872304080003 Specimen : Fluid & Swab Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CYTOLOGY

CERVICAL SMEAR FOR CYTOLOGY

LAB NO	GC- 325/23
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 clusters of endocervical cell are also seen. Monilia and T. vaginalis are absent. Dysplastic and malignant cells are absent. Heavy infiltrate of inflammatory cells are seen in the smears.
IMPRESSION	Negative for intraepithelial lesion or malignancy Reactive cellular change associated with severe inflammation
NOTE	Advised repeat smears after treatment of inflammation.

--End of Report--



Dr. Sanjib Kumar Pattari

MD, Pathology

Consultant Pathology MBBS, MD. Reg No : 53635 (WBMC)

Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

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Patient Name : Mrs Arunima Biswas MRN : 17510000718285 Gender/Age : FEMALE , 38y (27/07/1984)

Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 09:28 AM Reported On : 08/04/2023 10:11 AM

Barcode : BR2304080031 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

IMMUNOHAEMATOLOGY

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

--End of Report--

Dr. Amal Kumar Saha
MBBS, D.PED, ECFMG
Blood Bank Officer

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Collected On : 08/04/2023 09:09 AM Received On : 08/04/2023 12:45 PM Reported On : 08/04/2023 02:23 PM

Barcode : 802304080293 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9903190683

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Urine For Sugar	NEGATIVE	mg	ATEST

--End of Report-

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

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ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Mrs Arunima Biswas
GENDER/AGE : Female, 38 Years
LOCATION : -

PATIENT MRN : 17510000718285
PROCEDURE DATE : 08/04/2023 01:35 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: 68%. NORMAL DIASTOLIC FLOW PATTERN.
RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION

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.

MRS ARUNIMA BISWAS (17510000718285)

DR. RANJIT MUKHERJEE
ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC

MITHU MONDAL
TECHNICIAN

08/04/2023 01:35 PM

PREPARED BY	: NAFISHA KHATUN(333472)	PREPARED ON	: 08/04/2023 02:04 PM
GENERATED BY	: MADHUPARNA DASGUPTA(333433)	GENERATED ON	: 11/04/2023 12:07 PM

Patient Name	Arunima Biswas	Requested By	EXTERNAL
MRN	17510000718285	Procedure DateTime	2023-04-08 10:06:39
Age/Sex	38Y 8M/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: 2023-04-08 13:01:26