

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Rita Dutta MRN : 17510001218910 Gender/Age : FEMALE , 44y (27/08/1979)

Collected On : 23/09/2023 10:21 AM Received On : 23/09/2023 10:55 AM Reported On : 23/09/2023 11:54 AM

Barcode : BR2309230040 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

IMMUNOHAEMATOLOGY

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	A	-
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.



ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Ms Rita Dutta
GENDER/AGE : Female, 44 Years
LOCATION : -

PATIENT MRN : 17510001218910
PROCEDURE DATE : 23/09/2023 02:51 PM
REQUESTED BY : EXTERNAL



IMPRESSION

- GOOD LV SYSTOLIC FUNCTION WITH GRADE I DIASTOLIC DYSFUNCTION.

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%. GRADE I DIASTOLIC DYSFUNCTION.
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 : CHINK OF PERICARDIAL EFFUSION SEEN ALL AROUND THE HEART.

INTRACARDIAC MASS : NO TUMOUR, THROMBUS OR VEGETATION SEEN

OTHERS : NIL.

MS RITA DUTTA (17510001218910)

DR. PRASUN HALDER
ASSOCIATE CONSULTANT ECHOCARDIOGRAPHY MBBS, PGDCC

RUPA ANTONY
TECHNICIAN

23/09/2023 02:51 PM

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

PREPARED ON : 23/09/2023 03:35 PM
GENERATED ON : 23/09/2023 04:13 PM

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Collected On : 23/09/2023 10:21 AM Received On : 23/09/2023 10:53 AM Reported On : 23/09/2023 11:52 AM

Barcode : 802309230438 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.80	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Calculated)	0.29	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint)	0.51	-	-
Total Protein (Biuret Method)	8.10	g/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.70	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.4	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.38	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	41 H	U/L	14.0-36.0
SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	42 H	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	171 H	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	31	U/L	12.0-43.0



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

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.61	mg/dL	0.52-1.04
eGFR	106.6	mL/min/1.73m ²	-
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease)	8.39	mg/dL	7.0-17.0
Serum Sodium (Direct ISE - Potentiometric)	137	mmol/L	137.0-145.0
Serum Potassium (Direct ISE - Potentiometric)	4.2	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	209 H	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic Endpoint Colorimetric)	288 H	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	32 L	mg/dL	40.0-60.0
Non-HDL Cholesterol	177.0	-	-
LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD)	128.7 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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Rabindranath Tagore International Institute of Cardiac Sciences

(A unit of Narayana Hrudayalaya Limited)
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GISTIN/UIIN : 19AABCN1685J1Z5



Appointments
180 0309 0309 (Toll free)

Emergencies
99033 35544

Patient Name : Ms Rita Dutta MRN : 17510001218910 Gender/Age : FEMALE , 44y (27/08/1979)

VLDL Cholesterol (Calculated)	57.6 H	mg/dL	0.0-40.0
Cholesterol /HDL Ratio	6.6	-	-

--End of Report--



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 PhD, Biochemistry
 Biochemist M.Sc , Ph. D



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

Note

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 - 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)



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Barcode : 802309230438 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA))	1.51	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA))	11.7 H	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA))	4.971 H	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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Collected On : 23/09/2023 10:21 AM Received On : 23/09/2023 10:54 AM Reported On : 23/09/2023 11:40 AM

Barcode : 812309230305 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	10.4 L	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	3.94	millions/ μ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	33.3 L	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived From RBC Histogram)	84.4	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	26.4 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.2 L	%	31.5-34.5
Red Cell Distribution Width (RDW) (Calculated)	14.8 H	%	11.6-14.0
Platelet Count (Electrical Impedance)	188	$10^3/\mu$ L	150.0-400.0
Mean Platelet Volume (MPV) (Derived)	10.7	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	7.5	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCSn Technology)	63.5	%	40.0-75.0
Lymphocytes (VCSn Technology)	29.3	%	20.0-40.0
Monocytes (VCSn Technology)	5.0	%	2.0-10.0
Eosinophils (VCSn Technology)	1.7	%	1.0-6.0

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Basophils (VCSn Technology)	0.5	%	0.0-2.0
NRBC (VCSn Technology)	0.1	/100 WBC	-
Absolute Neutrophil Count (Calculated)	4.77	$10^3/\mu\text{L}$	1.8-7.8
Absolute Lymphocyte Count (Calculated)	2.2	$10^3/\mu\text{L}$	1.0-4.8
Absolute Monocyte Count (Calculated)	0.38	$10^3/\mu\text{L}$	0.0-0.8
Absolute Eosinophil Count (Calculated)	0.13	$10^3/\mu\text{L}$	0.0-0.45
Absolute Basophil Count (Calculated)	0.04	$10^3/\mu\text{L}$	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. Sanjib Kumar Pattari
MD, Pathology
Consultant Pathology MBBS, MD. Reg No : 53635 (WBMC)

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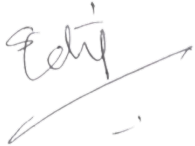
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Collected On : 23/09/2023 10:21 AM Received On : 23/09/2023 10:55 AM Reported On : 23/09/2023 12:54 PM
Barcode : 812309230304 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method)	48 H	mm/1hr	0.0-12.0

--End of Report--



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

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Collected On : 23/09/2023 10:21 AM Received On : 23/09/2023 10:53 AM Reported On : 23/09/2023 11:38 AM

Barcode : 802309230439 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase)	119 H	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)



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Patient Name : Ms Rita Dutta MRN : 17510001218910 Gender/Age : FEMALE , 44y (27/08/1979)
Collected On : 23/09/2023 10:21 AM Received On : 23/09/2023 10:54 AM Reported On : 23/09/2023 11:11 AM
Barcode : 802309230440 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.7 H	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	116.89	-	-

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 : Ms Rita Dutta MRN : 17510001218910 Gender/Age : FEMALE , 44y (27/08/1979)

Collected On : 23/09/2023 02:31 PM Received On : 23/09/2023 02:40 PM Reported On : 23/09/2023 03:17 PM

Barcode : 802309230664 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9331631863

CLINICAL CHEMISTRY

Test	Result	Unit	Biological Reference Interval
Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase)	108	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)



Patient Name	Rita Dutta	Requested By	EXTERNAL
MRN	17510001218910	Procedure DateTime	2023-09-23 14:24:18
Age/Sex	44Y/Female	Hospital	NH-RTIICS

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

Enlarged in size and moderately increased in echogenicity. No focal SOL seen. Intrahepatic biliary radicles not dilated.

PORTAL VEIN:

Portal vein is normal in calibre at porta. There is no intraluminal thrombus.

GALL BLADDER:

Optimally distended. No calculus or sludge seen within it. Wall not thickened.

CBD:

Common duct not dilated at porta. No intraluminal calculus seen.

SPLEEN:

Mildly enlarged in size measuring 13.7 cm and normal in echogenicity. No focal SOL seen.

PANCREAS:

Normal in size and echogenicity. Duct not dilated. No calcification or focal SOL seen.

KIDNEYS:

Both kidneys are normal in size, position and echogenicity. Corticomedullary differentiation maintained.

No hydronephrosis, calculus or mass seen.

Right kidney and left kidney measures 10.4 cm and 10.3cm respectively.

URINARY BLADDER:

Normal in capacity. Wall not thickened. No intraluminal calculus or mass seen.

Post void residual urine insignificant.

UTERUS:

Normal in size measuring 7.7 x 2.8 x 4.1 cm with normal echopattern. No focal SOL is seen. Endometrial echoline central in position, not thickened (2 mm). Cervix appears normal.

OVARIES:

Both ovaries normal in size, shape and echotexture. Follicles seen in left ovary

Right and left ovaries measures 1.5 x 1.5 cm and 2.5 x2.0 cm respectively.

POD:

No free fluid seen in POD.

ADNEXAE:

Both adnexae clear.

IMPRESSION:

- Fatty liver (grade-II) and hepatomegaly.
- Hepato-splenomegaly.

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.

Assist By:KDS

A handwritten signature in black ink, appearing to be 'S. B.', with a horizontal line underneath and three dots to the right.

Dr. Suranjana Bhattacharjee

Consultant Sonologist