

Final Report

Patient Name: Mr DHIRAJ MAHATO MRN: 17600000103371 Gender/Age: MALE, 54y (10/03/1969)

Collected On: 25/03/2023 08:44 AM Received On: 25/03/2023 08:50 AM Reported On: 25/03/2023 06:25 PM

Barcode: F12303250076 Specimen: Whole Blood Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC)	5.5	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	111.15	-	-

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. Samarpita Mukherjee MBBS, MD Biochemistry CONSULTANT

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



Page 1 of 1

Narayana Multispeciality Hospital

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

Hospital Address: 78, Jessore Road (South), Kolkata 700127, West Bengal Email: info.brs.kolkata@narayanahealth.org | www.narayanahealth.org

Appointments

1800-309-0309 (Toll Free)

Emergencies

Patient Name	DHIRAJ MAHATO	Requested By	Dr. Swarup Paul
MRN	17600000103371	Procedure DateTime	2023-03-25 10:49:43
Age/Sex	54Y/Male	Hospital	NH-BARASAT

ULTRASONOGRAPHY OF WHOLE ABDOMEN

<u>LIVER</u>: Liver is mildly enlarged in size (14.6 cm) but has normal shape and outline. There is mild diffuse homogeneous increase of hepatic parenchymal echogenicity. No focal SOL seen. IHBRs are not dilated.

CBD: It is not dilated, measuring – 3.7 mm at porta, visualized proximal lumen is clear. Distal CBD is obscured by bowel gas shadow.

PV: It appears normal, measuring - 8.6 mm at porta.

GALL BLADDER: It is optimally distended. No evidence of intraluminal calculus or sludge is seen. Gall bladder wall is normal in thickness.

No pericholecystic collection or frank mass formation is seen.

SPLEEN: It is enlarged in size (12.6 cm), normal in shape, outline & echotexture. No focal lesion seen.

<u>PANCREAS</u>: It is normal in size and echotexture. No focal lesion is seen. No calcification is seen. Main pancreatic duct is not dilated.

ADRENAL GLANDS: They are not enlarged.

KIDNEYS: Both kidneys are normal in size, shape, position and axis.

Cortical echo is normal. Cortico-medullary differentiation is maintained.

No calculus or hydronephrosis is seen. Perirenal fascial planes are intact.

Measures : Right kidney - 10.1 cm. Left kidney - 10.2 cm.

URETERS: They are not visualized as they are not dilated.

Aorta - Normal. IVC - Normal

URINARY BLADDER: It is well distended. Wall is normal. No intraluminal pathology seen.

PROSTATE GLAND: It is normal in size, shape, outline & echotexture. Capsule is intact. Margin is regular.

Median lobe is not enlarged.

Prostate measures: (3.1 x 2.4 x 4.2) cm Volume: 16.8 cc

Both seminal vesicles appear normal.

RIF/ LIF: Appendix is not visualized. No mass lesion or lymphadenopathy seen at RIF/ LIF.

No ascites seen.

No pleural effusion seen.

IMPRESSION:

- Mild hepatomegaly.
- Mild fatty liver.

Advise : Clinical correlation & further relevant investigation suggested.

Groutan Dar

Dr. Goutam Das MD (Radiodiagnosis)

1321

Patient Name	DHIRAJ MAHATO	Requested By	Dr. Swarup Paul
MRN	17600000103371	Procedure DateTime	2023-03-25 09:54:58
Age/Sex	54Y/Male	Hospital	NH-BARASAT

X-RAY - CHEST (PA)

Non specific pneumonitis seen at both paracardiac regions.

Trachea is in situ

CP angles are clear.

Cardiac shadow is normal.

Suggested clinical correlation and further investigations

Dr. Subrata Sanyal

(Department of Radiology)



Final Report

Patient Name: Mr DHIRAJ MAHATO	MRN: 17600000103371	Gender/	'Age : MALE ,	, 54y (10/03/1	969)
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Collected On: 25/03/2023 08:44 AM Received On: 25/03/2023 08:50 AM Reported On: 25/03/2023 01:53 PM

Barcode: F22303250068 Specimen: Whole Blood Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
BLOOD GROUP & RH TYPING			
Blood Group (Slide Technique And Tube Technique)	"A"	-	-
RH Typing (Slide Technique And Tube Technique)	Positive	-	-
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Cyanide-free Hemoglobin Method)	15.6	-	-
Red Blood Cell Count (Impedance Variation)	4.98	millions/ μL	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Impedance)	47.2	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Calculated)	95	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	31.4	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.1	g/dL	31.5-34.5
Red Cell Distribution Width (RDW) (Impedance)	13.7	%	11.6-14.0
Platelet Count (Impedence Variation/Microscopy)	150	Thousand / μL	150.0-410.0
Total Leucocyte Count(WBC) (Impedance Variation)	11.2 H	x10 ³ cells/μl	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (Impedance Variation And Absorbency /Microscopy)	66.4	%	40.0-80.0
Lymphocytes (Impedance Variation And Absorbency /Microscopy)	25.5	%	20.0-40.0

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Morovono	Multispeciality	Hoopito
ivaravana	wininspeciality	nosuna

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Appointments **1800-309-0309** (Toll Free)

Emergencies **9836-75-0808**



Patient Name: Mr DHIRAJ MAHATO MRN: 176000	00103371	Gender/Age : MALE	, 54y (10/03/1969)	
Monocytes (Impedance Variation And Absorbency /Microscopy)	6.1	%	2.0-10.0	
Eosinophils (Impedance Variation And Absorbency /Microscopy)	1.9	%	1.0-6.0	
Basophils (Impedance Variation And Absorbency /Microscopy)	0.1 L	%	1.0-2.0	
Absolute Neutrophil Count	7.44	-	-	
Absolute Lympocyte Count	2.86	-	-	
Absolute Monocyte Count	0.68	-	-	
Absolute Eosinophil Count	0.21	-	-	
Absolute Basophil Count	0.01	-	-	

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. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

Note

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Collected On: 25/03/2023 08:44 AM Received On: 25/03/2023 08:50 AM Reported On: 25/03/2023 11:54 AM

Barcode: F92303250001 Specimen: Serum Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

IMMUNOLOGY

Test Result Unit **Biological Reference Interval** ng/mL 0.0 - 3.5

0.257 Prostate Specific Antigen (PSA) (Enhanced

Chemiluminescence Immunoassay (CLIA))

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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ADULT TRANS-THORACIC ECHO REPORT



PATIENT NAME : Mr DHIRAJ MAHATO PATIENT MRN : 17600000103371

GENDER/AGE : Male, 54 Years PROCEDURE DATE : 25/03/2023 01:58 PM

REQUESTED BY: Dr. Swarup Paul

MPRESSION
 NORMAL SIZED LEFT VENTRICULAR CAVITY

NO RWMA

GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 65 %

NORMAL DIASTOLIC INFLOW PATTERN

GOOD RIGHT VENTRICULAR SYSTOLIC FUNCTION

NO PULMONARY HYPERTENSION

FINDINGS

LOCATION

CHAMBERS

LEFT ATRIUM : NORMAL RIGHT ATRIUM : NORMAL

LEFT VENTRICLE : NORMAL SIZED LEFT VENTRICULAR CAVITY. NO RWMA. GOOD LEFT VENTRICULAR

SYSTOLIC FUNCTION WITH LVEF 65 %. NORMAL DIASTOLIC INFLOW PATTERN.

RIGHT VENTRICLE : NORMAL IN SIZE. GOOD RV SYSTOLIC FUNCTION, TAPSE 22 MM

VALVES

MITRAL : MORPHOLOGICALLY NORMAL

AORTIC : MORPHOLOGICALLY NORMAL, AV VMAX 167 CM/SEC, PEAK PG - 11 MMHG

TRICUSPID : MORPHOLOGICALLY NORMAL, TRIVIAL TR, TRPG 15 MMHG

PULMONARY : MORPHOLOGICALLY NORMAL

SEPTAE

IAS : INTACT IVS : INTACT

ARTERIES AND VEINS

AORTA : NORMAL

PA : NORMAL , NO PULMONARY HYPERTENSION

IVC : IVC 11 MM WITH NORMAL RESPIRATORY VARIATION

PERICARDIUM : NORMAL

INTRACARDIAC MASS : NO INTRACARDIAC MASS OR THROMBUS SEEN IN TTE.

Page 1 of 2

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Appointments

1800-309-0309 (Toll Free)

Emergencies





ASSOCIATE CONSULTANT

25/03/2023 01:58 PM

 PREPARED BY
 : SURAJIT BISWAS(353011)
 PREPARED ON
 : 25/03/2023 02:00 PM

 GENERATED BY
 : ANKANA GHOSH(357843)
 GENERATED ON
 : 30/03/2023 09:50 AM



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Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

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Test	Result	Unit	Biological Reference Interval
BLOOD GROUP & RH TYPING			
Blood Group (Slide Technique And Tube Technique)	"A"	-	-
RH Typing (Slide Technique And Tube Technique)	Positive	-	-
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Cyanide-free Hemoglobin Method)	15.6	-	-
Red Blood Cell Count (Impedance Variation)	4.98	millions/ μL	4.5-5.5
PCV (Packed Cell Volume) / Hematocrit (Impedance)	47.2	%	40.0-50.0
MCV (Mean Corpuscular Volume) (Calculated)	95	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	31.4	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.1	g/dL	31.5-34.5
Red Cell Distribution Width (RDW) (Impedance)	13.7	%	11.6-14.0
Platelet Count (Impedence Variation/Microscopy)	150	Thousand / μL	150.0-410.0
Total Leucocyte Count(WBC) (Impedance Variation)	11.2 H	x10 ³ cells/μl	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (Impedance Variation And Absorbency /Microscopy)	66.4	%	40.0-80.0
Lymphocytes (Impedance Variation And Absorbency /Microscopy)	25.5	%	20.0-40.0

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Eosinophils (Impedance Variation And Absorbency /Microscopy)	1.9	%	1.0-6.0	
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Emergencies



Diabetes: => 200

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name: Mr DHIRAJ MAHATO MRN: 17600000103371 Gender/Age: MALE, 54y (10/03/1969)

Collected On: 25/03/2023 01:02 PM Received On: 25/03/2023 01:03 PM Reported On: 25/03/2023 02:08 PM

Barcode: F12303250135 Specimen: Plasma Consultant: Dr. Swarup Paul (CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

BIOCHEMISTRY

Test Result Unit Biological Reference Interval

Post Prandial Blood Sugar (PPBS) (Glucose241 Hmg/dLNormal: ≤140
Pre-diabetes: 141-199

Oxidase, Hydrogen Peroxidase)

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-

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Collected On: 25/03/2023 08:44 AM Received On: 25/03/2023 08:50 AM Reported On: 25/03/2023 12:29 PM

Barcode: F12303250074 Specimen: Serum Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Enzymatic Method)	0.8	mg/dL	0.66-1.25
eGFR	100.8	mL/min/1.73m ²	-
Serum Sodium (ISE Direct)	139	mmol/L	137.0-145.0
Serum Potassium (ISE Direct)	4.4	mmol/L	3.5-5.1
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase)	172	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic End Point)	175	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl2)	37 L	mg/dL	Low: <40.0 mg/dL High: >60.0 mg/dL
Non-HDL Cholesterol	135.0	-	-
LDL Cholesterol (End Point)	99.24	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	35	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	4.7	-	-
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Dyphylline, Diazonium Salt)	0.8	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Direct Measure)	0.3	mg/dL	0.0-0.3

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Patient Name: Mr DHIRAJ MAHATO MRN: 176000	00103371 Ge	ender/Age : MALE , 54y (10/	03/1969)
Unconjugated Bilirubin (Indirect) (Direct Measure)	0.5	mg/dL	0.3-1.3
Total Protein (Biuret, No Serum Blank, End Point)	8.0	g/dL	6.3-8.2
Serum Albumin (Bromcresol Green (BCG))	4.8	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.2	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.5	-	1.0-2.1
SGOT (AST) (Multiple-point Rate)	31	U/L	17.0-59.0
SGPT (ALT) (Uv With P5p)	36	U/L	<50.0
Alkaline Phosphatase (ALP) (PMPP, AMP Buffer)	95	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (G-glutamyl-p-nitroanilide)	34	U/L	15.0-73.0
THYROID PROFILE (T3, T4, TSH)			
Tri Iodo Thyronine (T3) (CLIA)	1.45	ng/mL	0.97-1.69
Thyroxine (T4) (CLIA)	10.1	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (CLIA)	3.530	μIU/mL	0.4-4.049

-- End of Report-

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Barcode: F12303250074 Specimen: Serum Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

BIOCHEMISTRY

Test Result Unit **Biological Reference Interval**

mg/dL 9.0-20.0 Blood Urea Nitrogen (BUN) (Urease, UV) 7 L

-- End of Report-

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Barcode: F12303250075 Specimen: Plasma Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

BIOCHEMISTRY

Test Result Unit **Biological Reference Interval**

Fasting Blood Sugar (FBS) (Glucose Oxidase, 123 H

Hydrogen Peroxidase)

mg/dL Normal: 70-109 Pre-diabetes: 110-125

Diabetes: => 126

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Patient Name: Mr DHIRAJ MAHATO MRN: 17600000103371 Gender/Age: MALE, 54y (10/03/1969)

Collected On: 25/03/2023 08:44 AM Received On: 25/03/2023 10:39 AM Reported On: 25/03/2023 01:23 PM

Barcode: F32303250007 Specimen: Stool Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
STOOL ROUTINE EXAMINATION			
PHYSICAL EXAMINATION			
Colour (Visible)	Yellowish	-	-
Consistency (Visible)	Semisolid	-	-
Mucus (Visible)	Present	-	-
Blood (Guaiac Method)	Absent	-	-
CHEMICAL EXAMINATION			
Stool For Occult Blood (Standard Guaiac Method)	Negative	-	-
Reaction (pH Indicator Method)	Acidic	-	-
Reducing Substances	Absent	-	-
MICROSCOPE EXAMINATION			
Ova (Microscopy)	Absent	-	-
Cyst Of Protozoa (Microscopy)	Absent	-	-
Trophozoite (Microscopy)	Absent	-	-
Red Blood Cells (Stool) (Microscopy)	Absent	-	-
Pus Cells (Microscopy)	2-3/hpf	-	1 - 2
Starch (Microscopy)	Absent	-	-
Epithelial Cells (Microscopy)	Not Seen	-	2-3

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Patient Name: Mr DHIRAJ MAHATO	MRN: 17600000103371	Gender/Age : MALE , 5	54y (10/03/1969)
Veg Cells (Microscopy)	Present	-	-
Fat (Microscopy)	Absent	-	-
Larvae	Absent	-	-

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Barcode: F22303250069 Specimen: Whole Blood - ESR Consultant: Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

HAEMATOLOGY LAB

Test Result Unit Biological Reference Interval

Erythrocyte Sedimentation Rate (ESR) 07 mm/1hr 0.0-12.0

(Westergren Method)

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Emergencies



Final Report

Patient Name: Mr DHIRAJ MAHATO MRN: 17600000103371 Gender/Age: MALE, 54y (10/03/1969)

Collected On: 25/03/2023 08:44 AM Received On: 25/03/2023 10:39 AM Reported On: 25/03/2023 11:58 AM

Barcode: F32303250006 Specimen: Urine Consultant: Dr. Swarup Paul (CRITICAL CARE MEDICINE)

Sample adequacy: Satisfactory Visit No: OP-002 Patient Mobile No: 8961553036

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Volume (Visible)	50	ml	-
Colour (Visible)	Pale Yellow	-	-
Appearance (Visible)	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (Dual Wavelength Reflectance)	6.0	-	5.0-8.0
Sp. Gravity (Dual Wavelength Reflectance)	1.010	-	1.002-1.030
Protein (Dual Wavelength Reflectance/Acetic Acid Tes (Heat Test))	Absent	-	-
Urine Glucose (Dual Wavelength Reflectance /Benedict's Test)	Absent	-	-
Ketone Bodies (Dual Wavelength Reflectance /Manual)	Absent	-	Negative
Bile Salts (Dual Wavelength Reflectance/Hay's Test)	Absent	-	Negative
Bile Pigment (Bilirubin) (Dual Wavelength Reflectance/Fouchet's Test)	Absent	-	Negative
Urobilinogen (Dual Wavelength Reflectance /Ehrlich's Method)	Normal	-	-
Urine Leucocyte Esterase (Dual Wavelength Reflectance)	Absent	-	Negative
Blood Urine (Dual Wavelength Reflectance)	Absent	-	-

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Narayana Multispeciality Hospital

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

Registered Office: 258/A, Bommasandra Industrial Area, Anekal Taluk, Bangalore 560099

Hospital Address: 78, Jessore Road (South), Kolkata 700127, West Bengal Email: info.brs.kolkata@narayanahealth.org | www.narayanahealth.org

Appointments

1800-309-0309 (Toll Free)

Emergencies



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Nitrite (Dual Wavelength Reflectance)	Absent	-	-	
MICROSCOPIC EXAMINATION				
Pus Cells (Microscopy)	2-3/hpf	-	1 - 2	
RBC (Microscopy)	Not See	n -	1-2/hpf	
Epithelial Cells (Microscopy)	1-2/hpf	-	2-3	
Crystals (Microscopy)	Not See	n -	-	
Casts (Microscopy)	Absent	-	-	
Others (Microscopy)	Nil	-	-	

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





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CLINICAL PATHOLOGY

Test Result Unit

NEGATIVE Urine For Sugar

-- End of Report-

Dr. Prithwijit Ghosh MBBS, MD, Pathology Consultant Pathologist

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