

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Snigdhendu Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Collected On : 11/02/2023 11:35 AM Received On : 11/02/2023 11:37 AM Reported On : 11/02/2023 12:52 PM

Barcode : F12302110134 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>Post Prandial Blood Sugar (PPBS)</b> (Glucose Oxidase, Hydrogen Peroxidase)	<b>145 H</b>	mg/dL	Normal: ≤140 Pre-diabetes: 141-199 Diabetes: => 200

**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. Samarpita Mukherjee  
MBBS, MD Biochemistry  
Consultant

**Note**

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



**Narayana Multispeciality Hospital**

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Appointments

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

Emergencies

**9836-75-0808**

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Collected On : 11/02/2023 09:09 AM Received On : 11/02/2023 09:14 AM Reported On : 11/02/2023 11:44 AM

Barcode : F12302110084 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Enzymatic Method)	1.0	mg/dL	0.66-1.25
eGFR (Calculated By MDRD Formula)	86.1	mL/min/1.73m <sup>2</sup>	-
<b>Blood Urea Nitrogen (BUN)</b> (Urease, UV)	9.33	mg/dL	9.0-20.0
<b>Serum Sodium</b> (ISE Direct )	145	mmol/L	137.0-145.0
<b>Serum Potassium</b> (ISE Direct )	4.8	mmol/L	3.5-5.1
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase)	<b>229 H</b>	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic End Point)	154	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl <sub>2</sub> )	40	mg/dL	Low: <40.0 mg/dL High: >60.0 mg/dL
Non-HDL Cholesterol	189.0	-	-
LDL Cholesterol (End Point)	<b>157.78 H</b>	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	31	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	5.8	-	-
<b>LIVER FUNCTION TEST(LFT)</b>			
Bilirubin Total (Dyphylline, Diazonium Salt)	0.8	mg/dL	0.2-1.3

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Conjugated Bilirubin (Direct) (Direct Measure)	0.2	mg/dL	0.0-0.3
Unconjugated Bilirubin (Indirect) (Direct Measure)	0.6	mg/dL	0.3-1.3
Total Protein (Biuret, No Serum Blank, End Point)	8.1	g/dL	6.3-8.2
Serum Albumin (Bromcresol Green (BCG))	4.6	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.5	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.31	-	1.0-2.1
SGOT (AST) (Multiple-point Rate)	30	U/L	17.0-59.0
SGPT (ALT) (Uv With P5p)	<b>51 H</b>	U/L	<50.0
Alkaline Phosphatase (ALP) (PMPP, AMP Buffer)	113	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (G-glutamyl-p-nitroanilide)	25	U/L	15.0-73.0

**THYROID PROFILE (T3, T4, TSH)**

Tri Iodo Thyronine (T3) (CLIA)	1.18	ng/mL	0.97-1.69
Thyroxine (T4) (CLIA)	8.20	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (CLIA)	0.8183	µIU/mL	0.4-4.049

--End of Report--



Dr. Samarпита Mukherjee  
MBBS, MD Biochemistry  
Consultant

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Collected On : 11/02/2023 09:09 AM Received On : 11/02/2023 09:14 AM Reported On : 11/02/2023 10:35 AM

Barcode : F22302110065 Specimen : Whole Blood - ESR Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

**HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	<b>30 H</b>	mm/1hr	0.0-10.0

--End of Report--



Dr. Prithwijit Ghosh  
MBBS, MD, Pathology  
Consultant Pathologist

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Final Report

Patient Name : Mr Snigdhendu Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Collected On : 11/02/2023 09:09 AM Received On : 11/02/2023 09:14 AM Reported On : 11/02/2023 10:59 AM

Barcode : F22302110064 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

HAEMATOLOGY LAB

Test	Result	Unit	Biological Reference Interval
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BLOOD GROUP & RH TYPING

Blood Group (Slide Technique And Tube Technique)	"B"	-	-
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RH Typing (Slide Technique And Tube Technique)	Positive	-	-
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COMPLETE BLOOD COUNT (CBC)

Haemoglobin (Hb%) (Cyanide-free Hemoglobin Method)	14.2	-	-
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Red Blood Cell Count (Impedance Variation)	5.02	millions/ $\mu$ L	4.5-5.5
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PCV (Packed Cell Volume) / Hematocrit (Impedance)	42.9	%	40.0-50.0
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MCV (Mean Corpuscular Volume) (Calculated)	85	fL	83.0-101.0
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MCH (Mean Corpuscular Haemoglobin) (Calculated)	28.4	pg	27.0-32.0
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MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.2	g/dL	31.5-34.5
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Red Cell Distribution Width (RDW) (Impedance)	15.4 H	%	11.6-14.0
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Platelet Count (Impedance Variation/Microscopy)	170	Thousand / $\mu$ L	150.0-410.0
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Total Leucocyte Count(WBC) (Impedance Variation)	7.4	$\times 10^3$ cells/ $\mu$ l	4.0-10.0
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DIFFERENTIAL COUNT (DC)

Neutrophils (Impedance Variation And Absorbency /Microscopy)	64.7	%	40.0-80.0
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Lymphocytes (Impedance Variation And Absorbency /Microscopy)	27.0	%	20.0-40.0
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Patient Name : Mr Snigdhendu Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)			
Monocytes (Impedance Variation And Absorbency /Microscopy)	4.4	%	2.0-10.0
Eosinophils (Impedance Variation And Absorbency /Microscopy)	3.8	%	1.0-6.0
Basophils (Impedance Variation And Absorbency /Microscopy)	<b>0.1 L</b>	%	1.0-2.0
Absolute Neutrophil Count	4.79	-	-
Absolute Lymphocyte Count	2	-	-
Absolute Monocyte Count	0.33	-	-
Absolute Eosinophil Count	0.28	-	-
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. Prithwijiit Ghosh  
MBBS, MD, Pathology  
Consultant Pathologist

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Patient Name : Mr Snigdhendu Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Collected On : 11/02/2023 09:09 AM Received On : 11/02/2023 06:29 PM Reported On : 11/02/2023 08:07 PM

Barcode : F32302110007 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
<b>Urine For Sugar</b>	Absent	-	-

**URINE ROUTINE & MICROSCOPY**

**PHYSICAL EXAMINATION**

Volume (Visible)	40	ml	-
Colour (Visible)	Pale Yellow	-	-
Appearance (Visible)	Clear	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (Dual Wavelength Reflectance )	5.5	-	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

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Patient Name : Mr Snigdhendru Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Blood Urine (Dual Wavelength Reflectance) Absent - -

Nitrite (Dual Wavelength Reflectance) Absent - -

**MICROSCOPIC EXAMINATION**

Pus Cells (Microscopy) 1-2/hpf - 1 - 2

RBC (Microscopy) Not Seen - 1-2/hpf

Epithelial Cells (Microscopy) 1-2/hpf - 2-3

Crystals (Microscopy) Not Seen - -

Casts (Microscopy) Not Seen - -

--End of Report--



Dr. Sudhanya Biswas  
MBBS, MD, Pathology  
Consultant

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<b>Patient Name</b>	Snigdhendu Pramanik	<b>Requested By</b>	Dr. Swarup Paul
<b>MRN</b>	17600000233342	<b>Procedure DateTime</b>	2023-02-11 16:20:55
<b>Age/Sex</b>	33Y 3M/Male	<b>Hospital</b>	NH-BARASAT

**X-RAY - CHEST (PA)**

Lung fields appear normal.

Trachea is in situ

CP angles are clear.

Cardiac shadow is normal.

**Suggested clinical correlation and further investigations**



**Dr. Subrata Sanyal**  
(Department of Radiology)

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Snigdhendu Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Collected On : 11/02/2023 09:09 AM Received On : 11/02/2023 09:14 AM Reported On : 11/02/2023 08:10 PM

Barcode : F12302110086 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC)	<b>5.9 H</b>	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	122.63	-	-

**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. Samarпита Mukherjee  
MBBS, MD Biochemistry  
Consultant

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**9836-75-0808**

<b>Patient Name</b>	Snigdhendu Pramanik	<b>Requested By</b>	Dr. Swarup Paul
<b>MRN</b>	17600000233342	<b>Procedure DateTime</b>	2023-02-11 12:06:56
<b>Age/Sex</b>	33Y 3M/Male	<b>Hospital</b>	NH-BARASAT

### **ULTRASONOGRAPHY OF WHOLE ABDOMEN**

**LIVER** : Liver is moderately enlarged in size ( 18.1 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 – 2.2 mm at porta, visualized proximal lumen is clear. Distal CBD is obscured by bowel gas shadow.

**PV** : It appears normal, measuring – 10.9 mm at porta.

**GALL BLADDER** : It is partially contracted. Visualized lumen is clear.

**SPLEEN** : It is normal in size ( 10.9 cm), shape, outline & echotexture. No focal lesion seen.

**PANCREAS** : 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.

**There is a small (2.0 cm x 1.6 cm) well-defined echogenic partly exophytic SOL noted at lower pole of left kidney.** No significantly increased vascularity is seen.

No calculus or hydronephrosis is seen.

Perirenal fascial planes are intact.

Measures : Right kidney – 10.8 cm. Left kidney – 10.3 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.

**Post void : 55 cc (significant).**

**PROSTATE GLAND** : It is normal in size, shape, outline & echotexture. Capsule is intact. Margin is regular. Median lobe is not enlarged.

Prostate measures : (2.6 x 2.1 x 3.7 ) cm Volume : 10.3 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 :**

- **Moderate hepatomegaly with mild fatty liver.**
- **Partially contracted gall bladder.**
- **Small left renal SOL as described - likely angiomyolipoma.**
- **Significant post-void residual urine volume.**

Advise : Clinical correlation & further relevant investigation suggested.

*Goutam Das*

**Dr. Goutam Das**  
MD (Radiodiagnosis)

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Barcode : F12302110085 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Fasting Blood Sugar (FBS)</b> (Glucose Oxidase, Hydrogen Peroxidase)	<b>111 H</b>	mg/dL	Normal: 70-109 Pre-diabetes: 110-125 Diabetes: => 126

--End of Report--



Dr. Samarпита Mukherjee  
MBBS, MD Biochemistry  
Consultant

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**9836-75-0808**

# ADULT TRANS-THORACIC ECHO REPORT

**PATIENT NAME** : Mr Snigdhendu Pramanik  
**GENDER/AGE** : Male, 33 Years  
**LOCATION** : -

**PATIENT MRN** : 17600000233342  
**PROCEDURE DATE** : 11/02/2023 01:55 PM  
**REQUESTED BY** : Dr. Swarup Paul



## IMPRESSION

- CONCENTRIC LEFT VENTRICULAR HYPERTROPHY
- NO RWMA
- GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 65 %
- NORMAL DIASTOLIC INFLOW PATTERN
- GOOD RIGHT VENTRICULAR SYSTOLIC FUNCTION
- NO PULMONARY HYPERTENSION

## FINDINGS

### CHAMBERS

LEFT ATRIUM : NORMAL  
AP DIAMETER(MM): 34

RIGHT ATRIUM : NORMAL

LEFT VENTRICLE : CONCENTRIC LEFT VENTRICULAR HYPERTROPHY (IVSD / PWD 12/12 MM). NO RWMA.  
GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 65 %. NORMAL DIASTOLIC  
INFLOW PATTERN.

LVIDD(MM)	: 48	IVSD(MM)	: 12	EDV(ML)	:
LVIDS(MM)	: 26	LVPWD(MM)	: 12	ESV(ML)	:
E/A RATIO	:	E/E'(AVERAGE)	:	LVEF(%)	: 65

RIGHT VENTRICLE : NORMAL IN SIZE (21 MM). GOOD RV SYSTOLIC FUNCTION, TAPSE 25 MM

### VALVES

MITRAL : MORPHOLOGICALLY NORMAL, TRIVIAL MITRAL REGURGITATION

AORTIC : MORPHOLOGICALLY NORMAL

TRICUSPID : MORPHOLOGICALLY NORMAL

PULMONARY : MORPHOLOGICALLY NORMAL

### SEPTAE

IAS : INTACT

IVS : INTACT

### ARTERIES AND VEINS

AORTA : NORMAL  
SINUS(MM): 25

PA : NORMAL , NO PULMONARY HYPERTENSION

IVC : IVC 10 MM WITH NORMAL RESPIRATORY VARIATION

**PERICARDIUM** : NORMAL

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

**OTHERS**

: DOPPLER DATA MITRAL : E: VELOCITY: 75 CM/SEC, A : VELOCITY : 72 CM/SEC AORTIC :  
VMAX : 116 CM/SEC, PEAK PG : 5.4 MMHG TRICUSPID : VMAX : 54 CM/SEC, PEAK PG : 1.1  
MMHG PULMONARY : VMAX : 59 CM/SEC, PEAK PG : 1.4 MMHG



DR. SANYAL SOUGATA  
ASSOCIATE CONSULTANT

11/02/2023 01:55 PM

**PREPARED BY** : SURAJIT BISWAS(353011)  
**GENERATED BY** : ANKANA GHOSH(357843)

**PREPARED ON** : 11/02/2023 01:59 PM  
**GENERATED ON** : 28/02/2023 03:20 PM



**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Mr Snigdhendru Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Collected On : 11/02/2023 09:09 AM Received On : 11/02/2023 06:29 PM Reported On : 11/02/2023 08:07 PM

Barcode : F32302110007 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 7908454934

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
Urine For Sugar	Absent	-	-

**URINE ROUTINE & MICROSCOPY**

**PHYSICAL EXAMINATION**

Volume (Visible)	40	ml	-
Colour (Visible)	Pale Yellow	-	-
Appearance (Visible)	Clear	-	-

**CHEMICAL EXAMINATION**

pH(Reaction) (Dual Wavelength Reflectance )	5.5	-	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

**Narayana Multispeciality Hospital**

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Hospital Address: 78, Jessore Road (South), Kolkata 700127, West Bengal

Email: info.brs.kolkata@narayanahealth.org | [www.narayanahealth.org](http://www.narayanahealth.org)

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Appointments

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

Emergencies

**9836-75-0808**

Patient Name : Mr Snigdhendu Pramanik MRN : 17600000233342 Gender/Age : MALE , 33y (14/10/1989)

Blood Urine (Dual Wavelength Reflectance) Absent - -

Nitrite (Dual Wavelength Reflectance) Absent - -

#### MICROSCOPIC EXAMINATION

Pus Cells (Microscopy) 1-2/hpf - 1 - 2

RBC (Microscopy) Not Seen - 1-2/hpf

Epithelial Cells (Microscopy) 1-2/hpf - 2-3

Crystals (Microscopy) Not Seen - -

Casts (Microscopy) Not Seen - -

--End of Report--



Dr. Sudhanya Biswas  
MBBS, MD, Pathology  
Consultant

#### Note

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



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