DIAGNOSTICS		Ne	
Patient Name : MR. AMIT TIWARI		Optional ID :	-
Age / Gender : 41 Years / Male		Collection Tim	e : 06/04/2024, 08:59 a.m.
Mobile No. : 8777728844	Receiving Time : 06/04/2024, 1		e : 06/04/2024, 11:17 a.m.
Patient ID : 81712		Reporting Tim	e : 06/04/2024, 01:10 p.m.
Bill ID : 84602	Sample ID : 1924023885		24023885
Referral : SELF		Sample Type :	Serum
Test Description	Value(s)	Unit(s)	Reference Range
Bun / Creatrnine Ratio			
BUN/Creatinine ratio Method : Calculation	11.34	12 -	20
	END OF REPOR	T	

Checked by Pintu Manna

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Supratik ອ້າຍກາວ Dr.Supratik Biswas MBBS, MD Consultant Biochemist Regn.No.: 64600 (WBMC)



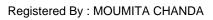
Reported By : -

DIAGNOSTICS		Ne	
Patient Name : MR. AMIT TIWARI		Optional ID :	-
Age / Gender : 41 Years / Male		Collection Tin	ne : 06/04/2024, 08:59 Al
Mobile No. : 8777728844		Receiving Tim	ne : 06/04/2024, 11:17 AM
Patient ID: 81712		Reporting Tim	ne : 06/04/2024, 12:23 PM
Bill ID : 84602	Sample ID : 1924023885 Sample Type : Serum		924023885
Referral : SELF			: Serum
Source : ALLIANCE & PROJECT			
est Description	Value(s)	Unit(s)	Reference Range
Prostate Specific Antigen (PSA), Serum PSA (PROSTATE SPECIFIC ANTIGEN) Method : Electrochemiluminescence Immunoassay (ECLIA) Remark	0.49	ng/mL	< 2.0



Supratik Binns Dr. Supratik Biswas MBBS, MD, Consultant Biochemist









Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF



Optional ID : -Collection Time : 06/04/2024, 08:51 a.m. Receiving Time : 06/04/2024, 10:27 a.m. Reporting Time : 06/04/2024, 03:53 p.m. Sample ID : 1924023885 Sample Type : USG

USG Whole Abdomen

LIVER

Is normal in size (measures 13.2 cm), outline and **moderate diffuse increase in echogenicity.** No focal lesion is seen. Intrahepatic biliary radicles are not dilated. Portal vein measures 1.0 cm in calibre.

GALL BLADDER

Is seen normal in size, shape, outline, position & wall thickness. No intraluminal calculus or any mass lesion is seen. No pericholecystic fluid collection is seen.

CBD

Is not dilated and measures 0.25 cm.

PANCREAS

Is normal in size, shape, outline and echotexture. No definite focal lesion is evident. Pancreatic duct is not dilated. No tenderness is seen over the region.

SPLEEN

Is normal in shape, size, position and echotexture. No focal lesion is seen. No abnormal vessels are seen at the splenic hilum. Spleen measures 10.9 cm. in length.

KIDNEYS

Both kidneys appear normal in size, shape, position and echotexture. Cortico-medullary differentiation is normal. Central echocomplexes of both kidneys appear normal. No focal lesion is seen. A small calcification measuring 0.24 cm is seen in mid pole of right kidney. Another small calcifications are seen in left kidney, some measuring 0.20 cm & 0.15 cm at upper pole to mid pole. No evidence of hydronephrosis is seen in either kidneys.

Right kidney measures 9.5 cm. Left kidney measures 9.9 cm.

URETERS

Ureters are not dilated.



Reported By : APURBA DUTTA



Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF



Optional ID : -Collection Time : 06/04/2024, 08:51 a.m. Receiving Time : 06/04/2024, 10:27 a.m. Reporting Time : 06/04/2024, 03:53 p.m. Sample ID : 1924023885 Sample Type : USG

URINARY BLADDER

Urinary bladder appears optimally distended. It appears smooth in outline. No mass lesion or any calculus is seen within the urinary bladder.

PROSTATE

Prostate is seen normal in size, outline and echotexture. No definite focal parenchymal lesion is seen. Prostatic capsule is intact. Prostate measures 2.9 x 2.9 x 2.2 cm and volume 10.3 cc.

IMPRESSION :

Moderate hepatic steatosis. Bilateral renal microcalcification as described.

Advice : Further investigation and follow up.

END OF REPORT



Checked by Jhumpa Halder



Reported By : APURBA DUTTA



Neuberg S Pulse

Patient Name : MR. AMIT TIWAR Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF Source : ALLIANCE & PROJECT

Optional ID: -

Collection Time : 06/04/2024, 08:51 AM Receiving Time : 06/04/2024, 02:14 PM Reporting Time : 06/04/2024, 05:54 PM Sample ID : 1924023885 Sample Type : 2D Echo

Echocardiography/TMT

M Mode Data : Parameter	Test Value	Normal Range (Adults)	Unit
Aortic Root Diameter	2.6	2.0 - 4.0	cm
Left atrial diameter	2.8	2.0 - 4.0	cm
RV internal diameter	2.2	2.2 – 3.0	cm
IV septal thickness (diastole)	0.8	0.60 – 1.1	cm
LV Internal diameter (diastole)	3.8	3.50 – 5.4	cm
Post. Wall thickness (diastole)	0.8	0.60 – 1.1	cm
Internal diameter (systole)	2.5	2.4 – 4.2	cm
LV Ejection fraction	65%	55 – 65	%

LV shows:

- Normal size cardiac chambers.
- No RWMA.
- Grade I diastolic dysfunction. E/E' 8
- Good LV systolic function with LVEF 65%
- Normal RV systolic function.
- All valve morphology normal.
- IAS & IVS intact.
- No PDA/COA.
- Trivial MR & TR (20 mmHg).
- No PE / PAH.
- IVC normal in size, collapsing well.





Patient Name : MR. AMIT TIWARI Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF Source : ALLIANCE & PROJECT



Optional ID : -

Collection Time : 06/04/2024, 08:51 AM Receiving Time : 06/04/2024, 02:14 PM Reporting Time : 06/04/2024, 05:54 PM Sample ID : 1924023885 Sample Type : 2D Echo

<u>CONCLUSION</u>:-Normal size cardiac chambers. Good biventricular systolic function. Grade I diastolic dysfunction. Trivial MR & TR. No PE / PAH.

END OF REPORT

Abhinay Tibdewal MD, DM (Cardiologist) Regn. No.: WBMC 85811

Checked by Mousumi Das Sharma





Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF Source : ALLIANCE & PROJECT



Optional ID : -Collection Time : 06/04/2024, 08:51 AM Receiving Time : 06/04/2024, 02:14 PM Reporting Time : 06/04/2024, 04:00 PM Sample ID : 1924023885 Sample Type : Ecg

<u>ECG</u>

Kindly collect the graphical ECG report from reception

END OF REPORT

Checked by Mousumi Das Sharma Active Dr. Abhinay Tibdewal MD, DM (Cardiologist) Regn. No.: WBMC 85811



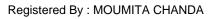
DIAGNOSTICS		Ne						
Patient Name : MR. AMIT TIWARI		Optional ID: -						
Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF		Collection Time : 06/04/2024, 08:59 AM Receiving Time : 06/04/2024, 11:17 AM Reporting Time : 06/04/2024, 12:27 PM Sample ID : 1924023885 Sample Type : Serum						
					Source : ALLIANCE & PROJECT			
					Test Description	Value(s)	Unit(s)	Reference Range
					Liver Function Test			
					TOTAL BILIRUBIN Method : DPD	0.75	mg/dL	<1.2
	0.19	mg/dl	< 0.2					
CONJUGATED BILIRUBIN Method : DPD								
	0.56	mg/dL						

Method : Calculation			
SGPT	34	U/L	< 50
Method : IFCC (without pyridoxal phosphate activation)			
SGOT	21	U/L	< 50
Method : IFCC (without pyridoxal phosphate activation)			
ALKALINE PHOSPHATASE	52	U/L	30 - 120
Method : IFCC AMP Buffer			
TOTAL PROTEIN	7.25	g/dL	6.6 - 8.3
Method : Biuret			
ALBUMIN	4.43	g/dL	Adults: 3.5 - 5.2
Method : Bromocresol Green			Newborn (1–4 days): 2.8 - 4.4
GLOBULIN	2.82	g/dL	1.80 - 3.60
Method : Calculation			
A/G RATIO	1.57		1.2 - 2
Method : Calculation			
GAMMA-GLUTAMYL TRANSFERASE	40	U/L	< 55
Method : IFCC			

END OF REPORT

Checked by Priya Manna Dr. Nabanita Banerjee MBBS (Cal), DNB (I), MIAPM Pathologist







DIAGNOSTICS		Ne	
Patient Name : MR. AMIT TIWARI		Optional ID :	-
Age / Gender : 41 Years / Male		Collection Tin	ne : 06/04/2024, 08:59 AM
Mobile No. : 8777728844		Receiving Time : 06/04/2024, 11:17 AM	
Patient ID : 81712		Reporting Time : 06/04/2024, 12:12 PM Sample ID : 1924023885 Sample Type : Serum	
Bill ID : 84602			
Referral : SELF			
Source : ALLIANCE & PROJECT			
Fest Description	Value(s)	Unit(s)	Reference Range
Creatinine, Serum			
CREATININE	0.97	mg/dl	< 1.2
Method : Modified Jaffe kinetic.			
	**END OF REPORT	Γ **	

Checked by Barun Jana Copyratik Binnos Dr. Supratik Biswas MBBS, MD, Consultant Biochemist





DIAGNOSTICS		Ne						
Patient Name : MR. AMIT TIWARI Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF Source : ALLIANCE & PROJECT		Optional ID : - Collection Time : 06/04/2024, 08:59 AM Receiving Time : 06/04/2024, 11:17 AM Reporting Time : 06/04/2024, 12:29 PM Sample ID : 1924023885 Sample Type : Serum						
					Test Description	Value(s)	Unit(s)	Reference Range
					Total Protoing, Conum			
					Total Proteins, Serum			
						7.25	g/dl	6.6 - 8.3
		Total Proteins, Serum TOTAL PROTEIN Method : Biuret	7.25	-	6.6 - 8.3			
TOTAL PROTEIN Method : Biuret ALBUMIN	7.25 4.43	g/dl g/dl	6.6 - 8.3 Adults: 3.5 - 5.2					
TOTAL PROTEIN Method : Biuret		-						
TOTAL PROTEIN Method : Biuret ALBUMIN		-	Adults: 3.5 - 5.2					
TOTAL PROTEIN Method : Biuret ALBUMIN Method : Bromocresol green	4.43	g/dl	Adults: 3.5 - 5.2 Newborn(0-4days): 2.8 - 4.					
TOTAL PROTEIN Method : Biuret ALBUMIN Method : Bromocresol green GLOBULIN	4.43	g/dl g/dl	Adults: 3.5 - 5.2 Newborn(0-4days): 2.8 - 4					

END OF REPORT

Checked by Priya Manna Dr. Nabanita Banerjee MBBS (Cal), DNB (I), MIAPM Pathologist





TM DIAGNOSTICS		Ne					
Patient Name : MR. AMIT TIWARI		Optional ID :	-				
Age / Gender : 41 Years / Male		Collection Tin	n e : 06/04/2024, 08:59 Al				
Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602 Referral : SELF		Receiving Time : 06/04/2024, 11:17 AM Reporting Time : 06/04/2024, 12:29 PM Sample ID : 1924023885 Sample Type : Serum					
				Source : ALLIANCE & PROJECT			
				Test Description	Value(s)	Unit(s)	Reference Range
				<u>Urea Nitrogen (Bun)</u>			
Urea	23	mg/dl	Adult : 17 - 43				
Method : GLDH Kinetic assay			Newborn: 8.4 - 25.8				
UREA NITROGEN (BUN)	10.75	mg/dl	6 - 20				

END OF REPORT

Checked by Priya Manna Dr. Nabanita Banerjee MBBS (Cal), DNB (I), MIAPM Pathologist



Reported By : -

DIAGNOSTICS		Neub			
Patient Name : MR. AMIT TIWARI	Patient Name : MR. AMIT TIWARI		Optional ID: -		
Age / Gender : 41 Years / Male Mobile No. : 8777728844		Collection Time : 06/04/2024, 08:59 AM			
		Receiving Time : 06	6/04/2024, 11:17 AN		
Patient ID: 81712		Reporting Time : 06	6/04/2024, 01:08 PN		
Bill ID : 84602		Sample ID : 192402			
Referral : SELF		Sample Type : Edta			
Source : ALLIANCE & PROJECT					
Test Description	Value(s)	Unit(s) Re	ference Range		
Complete Blood Count					
HAEMOGLOBIN	14.8	gm/dl	13 - 17		
TOTAL LEUCOCYTE COUNT	8,100	/cumm	4000 - 11000		
НСТ	43.7	Vol%	40 - 50		
RBC	4.68	millions/cumm	4.2 - 5.5		
MCV	93.4	Femtolitre(fl)	80 - 100		
МСН	31.6	Picograms(pg)	27 - 31		
МСНС	33.9	gm/dl	32 - 36		
PLATELET COUNT	2,21,000	/cumm	150000 - 450000		
DIFFERENTIAL COUNT					
Neutrophils	52	%	40 - 75		
Lymphocytes	40	%	20 - 40		
Monocytes	02	%	2 - 8		
Eosinophils	06	%	1 - 6		
	00	%	0 - 1		
Basophils	00	,.	•		

Note XN 1000, SYSMEX METHOD : FLOWCYTOMETRY ESR : AUTOMATED VESCUBE - 30 TOUCH Platelets adequate.

END OF REPORT

Checked by Bappa Karmakar المحصطة Dr. Meenakshi Mohan MD (Pathology) Consultant Pathologist Regn. No. : WBMC 54631





DIAGNOSTICS		Ne		
Patient Name : MR. AMIT TIWARI		Optional ID :	-	
Age / Gender : 41 Years / Male		Collection Tin	ne : 06/04/2024, 08:59 Al	
Mobile No. : 8777728844		Receiving Time : 06/04/2024, 11:1		
Patient ID: 81712		Reporting Tin	ne : 06/04/2024, 12:12 Pl	
Bill ID : 84602		Sample ID : 1924023885		
Referral : SELF		Sample Type	Sample Type : Serum	
Source : ALLIANCE & PROJECT				
Test Description	Value(s)	Unit(s)	Reference Range	
Uric Acid, Serum				
JRIC ACID	5.00	mg/dL	3.5 - 7.2	
Method : Uricase PAP				
	**END OF REPOR	-		

Checked by Barun Jana Consultant Biochemist





Test Description	Value(s)	Unit(s) Reference Range						
Source : ALLIANCE & PROJECT								
Referral : SELF		Sample Type : Serum						
Patient Name : MR. AMIT TIWARI Age / Gender : 41 Years / Male Mobile No. : 8777728844 Patient ID : 81712 Bill ID : 84602		Optional ID : - Collection Time : 06/04/2024, 08:59 AM Receiving Time : 06/04/2024, 11:17 AM Reporting Time : 06/04/2024, 12:22 PM Sample ID : 1924023885						
				DIAGNOSTICS				

Lipid Profile			
TRIGLYCERIDES Method : Enzymatic Colorimetric Assay using GPO-POD	161	mg/dL	Normal : < 150 Borderline High : 150 - 199 High : 200 - 499 Very High : >= 500
CHOLESTEROL Method : Enzymatic Colorimetric Assay using CHOD-POD	140	mg/dl	Desirable : < 200 Borderline High : 200 - 240 High Risk : > 240
HDL CHOLESTEROL Method : Enzymatic Immunoinhibition	36	mg/dl	Low HDL:<40 High HDL:>= 60
LDL CHOLESTEROL Method : Enzymatic Selective Protection	78	mg/dl	Optimal : < 100 Above Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : > 190
VLDL / CHOLESTEROL REMNANTS Method : Calculation	26	mg/dl	< 30
NON HDL CHOLESTEROL Method : Calculation	104	mg/dl	<130
TOTAL CHOLESTEROL / HDL CHOLESTEROL RATIO	3.89	Ratio	
LDL CHOLESTEROL / HDL CHOLESTEROL RATIO	2.17	Ratio	

Remark :

* National Cholesterol Education Programme Adult Treatment Panel III Guidelines (US)

END OF REPORT

Checked by Priya Manna Dr. Nabanita Banerjee MBBS (Cal), DNB (I), MIAPM Pathologist





Test Description	Value(s)	Unit(s) Reference Range
Source : ALLIANCE & PROJECT		
Referral : SELF		Sample Type : Serum
Bill ID : 84602		Sample ID : 1924023885
Patient ID: 81712		Reporting Time : 06/04/2024, 12:23 PM
Mobile No. : 8777728844		Receiving Time : 06/04/2024, 11:17 AM
Age / Gender : 41 Years / Male		Collection Time : 06/04/2024, 08:59 AM
Patient Name : MR. AMIT TIWARI		Optional ID: -
DIAGNOSTICS		

ГЗ	1.14	ng/mL	1 - 30 days: 1 - 7.4
Method : Chemiluminescent Microparticle Immunoassay (CMIA)			1m - 11m: 1.05 - 2.45
			1yr - 5yrs: 1.05 - 2.69
			6yrs - 10yrs: 0.94 - 2.41
			11yrs - 15yrs: 0.82 - 2.13
			16yrs- 20yrs: 0.8 - 2.1
			Adult: 0.58 - 1.59
4	7.19	µg/dL	1d - 6d : 11.8 - 22.6
Method : Chemiluminescent Microparticle Immunoassay (CMIA)			7d - 14d : 9.9 - 16.6
			15d - 4m : 7.2 - 14.4
			4m - 12m :7.8 - 16.5
			1yr - 5yr :7.2 - 15.0
			5yr - 10yr :6.4 - 13.6
			> 10yr : 4.87 - 11.72
			Adult : 4.87 - 11.72
rsh	2.26	µIU/ml	0.35 - 4.94

Method : Chemiluminescent Microparticle Immunoassay (CMIA)

Interpretation :

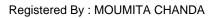
Т3

Triiodothyronine (3,5,3' triiodothyronine or T3) is the thyroid hormone principally responsible for the regulation of metabolism of the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by enzymatic 5' deiodination of T4 (thyroxine). A reduction in the conversion of T4 to T3 results in a decrease in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non thyroidal illness (NTI), and is referred to as "low T3 syndrome". The determination of T3 is utilized in the diagnosis of T3Thyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

Т4

The hormone thyroxine (T4) is the main product secreted by the thyroid gland and is an integral component of the hypothalamus anterior pituitary thyroid regulating system. The major part (> 99 %) of total thyroxine in serum is present in proteinbound form. As the concentrations of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken into account in the assessment of the thyroid hormone concentration in serum. If this is ignored, changes in the binding proteins (e.g. due to estrogen containing preparations, during pregnancy or in the presence of a nephrotic syndrome etc.) can lead to erroneous assessments of the thyroid metabolic state. The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the







Test Description	Value(s)	Unit(s) Reference Range
Source : ALLIANCE & PROJECT		
Referral : SELF		Sample Type : Serum
Bill ID : 84602		Sample ID : 1924023885
Patient ID : 81712		Reporting Time : 06/04/2024, 12:23 PM
Mobile No. : 8777728844		Receiving Time : 06/04/2024, 11:17 AM
Age / Gender : 41 Years / Male		Collection Time : 06/04/2024, 08:59 AM
Patient Name : MR. AMIT TIWARI		Optional ID : -
DIAGNOSTICS		Neuberg S Pulse

detection of primary and secondary hypothyroidism, and the monitoring of TSH suppression therapy.

TSH

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones. The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

END OF REPORT

Checked by Barun Jana Consultant Biochemist





DIAGNOSTICS		Ne		
Patient Name : MR. AMIT TIWARI		Optional ID :	-	
Age / Gender : 41 Years / Male Mobile No. : 8777728844		Collection Time : 06/04/2024, 08:59 AM Receiving Time : 06/04/2024, 11:17 AM		
Bill ID : 84602		Sample ID : 19	924023885	
Referral : SELF		Sample Type	: Edta Blood	
Source : ALLIANCE & PROJECT				
Test Description	Value(s)	Unit(s)	Reference Range	
HbA1c HPLC				
HbA1c HPLC	6.9	%	Normal : < 5.7	
Method : High Performance Liquid Chromatography (HPLC)			Pre Diabetes : 5.7 - 6.4	
			Diabetes : >= 6.5	
Estimated Average Glucose	151	mg/dL	70 - 116	

NOTE :

1. Glucose combines with haemoglobin(Hb) continuously and nearly irreversibly during life span of RBC(120 days); thus glycosylated Hb is proportional to mean plasma glucose level during the previous 2-3 months. Therefore A1c assay is a useful mean of evaluation of success of long term diabetic control by monitoring diabetic patient~s compliance with therapeutic regimen used and long-term blood glucose level control. Added advantage is its ability to predict progression of diabetic complications.

2. Presence of Hb variant may interfere with accurate estimation of HbA1c. Please do Hb HPLC test to identify Haemoglobinapathy if any and also do Glycated albumin or Fructosamine tests to assess glycemic status if required.

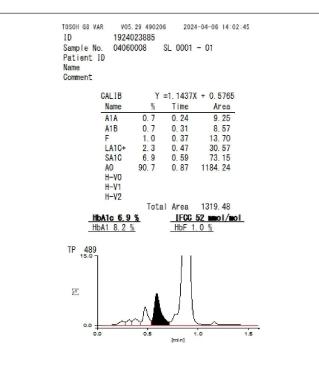
3. Inappropriately low value may be seen in anemia due to iron deficiency or due to other causes, acute blood loss, recent blood transfusion, hemoglobinopathies, CLD, Hypertriglyceridemia, intake of Vitamin E & C, Aspirin, Co-trimoxazole etc.



Reported By : -

Source : ALLIANCE & PROJECT	
Referral : SELF	Sample Type : Edta Blood
Bill ID : 84602	Sample ID : 1924023885
Patient ID: 81712	Reporting Time : 06/04/2024, 02:04 PM
Mobile No. : 8777728844	Receiving Time : 06/04/2024, 11:17 AM
Age / Gender : 41 Years / Male	Collection Time : 06/04/2024, 08:59 AM
Patient Name : MR. AMIT TIWARI	Optional ID : -
DIAGNOSTICS	Neuberg S Puls

Chromatogram Report



06-04-2024 14:02:45 TOSOH

NEUBERG PULSE DIAGNOSTIC CENTRE 75,SARAT BOSE RD, KOL - 26 1/1

END OF REPORT



Reported By : -

Test Description	Value(s)	Unit(s) Reference Range
Source : ALLIANCE & PROJECT		
Referral : SELF	s	Sample Type : Edta Blood
Bill ID : 84602	s	Sample ID : 1924023885
Patient ID: 81712	F	Reporting Time : 06/04/2024, 02:04 PM
Mobile No. : 8777728844	F	Receiving Time : 06/04/2024, 11:17 AM
Age / Gender : 41 Years / Male	C	Collection Time : 06/04/2024, 08:59 AM
Patient Name : MR. AMIT TIWARI	c	Optional ID: -
DIAGNOSTICS		

Checked By Rahul Mondal ົມອາຊາໄຊ ອີໂກກາວ Dr.Supratik Biswas MBBS, MD Consultant Biochemist Regn.No.: 64600 (WBMC)



Reported By : -

Test Description	Value(s)	Unit(s) Reference Range
Source : ALLIANCE & PROJECT		
Referral : SELF		Sample Type : Urine
Bill ID : 84602		Sample ID : 1924023885
Patient ID: 81712		Reporting Time: 06/04/2024, 01:36 PM
Mobile No. : 8777728844		Receiving Time: 06/04/2024, 11:17 AM
Age / Gender : 41 Years / Male		Collection Time: 06/04/2024, 09:13 AM
Patient Name : MR. AMIT TIWARI		Optional ID : -
DIAGNOSTICS		Neuberg S Puls

Urine Fasting Sugar

URINE FOR SUGAR Result

Absent

END OF REPORT

Checked by Anupriya Roychowdhury المراسط Dr. Meenakshi Mohan MD (Pathology) Consultant Pathologist Regn. No. : WBMC 54631



Reported By : -

DIAGNOSTICS		Ne	
Patient Name : MR. AMIT TIWARI		Optional ID :	-
Age / Gender : 41 Years / Male		Collection Tin	ne : 06/04/2024, 02:10 PM
Mobile No. : 8777728844	Receiving Time : 06/04/2024, 04:32 PM Reporting Time : 06/04/2024, 06:11 PM Sample ID : 1924023885P		
Patient ID : 81712 Bill ID : 84602			
Source : ALLIANCE & PROJECT			
Fest Description	Value(s)	Unit(s)	Reference Range
Glucose Post Prandial Plasma			
GLUCOSE POST PRANDIAL PLASMA Method : Hexokinase	275	mg/dL	70 - 140
	**END OF REPORT*	*	
	Supratik	Binnas	





DIAGNOSTICS		Ne	
Patient Name : MR. AMIT TIWARI		Optional ID : -	
Age / Gender : 41 Years / Male		Collection Tin	n e : 06/04/2024, 08:59 AM
Mobile No. : 8777728844		Receiving Tim	ne : 06/04/2024, 11:15 AN
Patient ID: 81712		Reporting Tim	ne : 06/04/2024, 12:09 PN
Bill ID : 84602		Sample ID : 1924023885F Sample Type : Fluoride - F	
Referral : SELF			
Source : ALLIANCE & PROJECT			
Test Description	Value(s)	Unit(s)	Reference Range
Glucose Fasting Plasma			
GLUCOSE FASTING PLASMA Method : Hexokinase	117	mg/dL	74 - 109
	**END OF REPOR	[**	

Checked by Barun Jana Supratik Binnos Dr. Supratik Biswas MBBS, MD, Consultant Biochemist





TM DIAGNOSTICS		Ne	
Patient Name : MR. AMIT TIWARI		Optional ID :	-
Age / Gender : 41 Years / Male		Collection Tin	ne : 06/04/2024, 08:59 AM
Mobile No. : 8777728844		Receiving Tim	ne : 06/04/2024, 11:17 AM
Patient ID: 81712		Reporting Tim	ne : 06/04/2024, 01:47 PM
Bill ID : 84602		Sample ID : 19	924023885
Referral : SELF		Sample Type	: Edta Blood
Source : ALLIANCE & PROJECT			
Test Description	Value(s)	Unit(s)	Reference Range
Blood Group & RH Typing			
BLOOD GROUP	"AB"		
RH TYPING	POSITIVE		

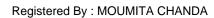
FORWARD & REVERSE BLOOD GROUPING, GEL CARD BY BIO-RAD



END OF REPORT

Checked by Rakibul Sk للمسلط Dr. Meenakshi Mohan MD (Pathology) Consultant Pathologist Regn. No. : WBMC 54631







DIAGNOSTICS		Ne		
Patient Name : MR. AMIT TIWARI Age / Gender : 41 Years / Male Mobile No. : 8777728844		Optional ID :	-	
		Collection Time : 06/04/2024, 09:13 AM Receiving Time : 06/04/2024, 11:17 AM		
Bill ID : 84602		Sample ID : 19		
Referral : SELF		Sample Type		
Source : ALLIANCE & PROJECT				
Fest Description	Value(s)	Unit(s)	Reference Range	
<u>Urine Routine</u> PHYSICAL EXAMINATION				
/olume	45 ml			
Colour	Straw			
Appearance	Slightly hazy			
Deposit	Present			
Specific Gravity	1.020			
CHEMICAL EXAMINATION				
Reaction	Acidic (PH: 5.0)			
Protein	Absent			
Sugar	Absent			
Ketones Bodies	Absent			
Jrobilinogen	Normal			
Blood	Absent			
MICROSCOPIC EXAMINATION				
Pus Cells	2 - 3 /hpf			
R.B.C	Not found			
	6 - 8 /hpf			
Epithelial Cells	-			
Epithelial Cells Casts	Not found			

Terms and conditions:

Test results released pertain to the specimen/sample submitted.

The tests results are dependent on the quality of the sample received by the Laboratory.

The test results are released with the presumption that the specimen/sample belongs to the patient as mentioned on the bill/ vials/TRF/booking ID Laboratory investigations test results are only a tool to facilitate in arriving at a diagnosis and should always be clinically correlated by the Referring Physician.

Repeat samples/specimens are accepted on request of Referring Physician within 7 days of reporting.

Due to some unforeseen circumstances reports may be delayed. Inconvenience is regretted.

Test result may show inter laboratory variations.

The test results are not valid for medico legal purposes.



Reported By : -

Test Description	Value(s) Unit(s) Reference Range
Source : ALLIANCE & PROJECT	
Referral : SELF	Sample Type : Urine
Bill ID : 84602	Sample ID : 1924023885
Patient ID: 81712	Reporting Time : 06/04/2024, 01:27 PM
Mobile No. : 8777728844	Receiving Time : 06/04/2024, 11:17 AM
Age / Gender : 41 Years / Male	Collection Time : 06/04/2024, 09:13 AM
Patient Name : MR. AMIT TIWARI	Optional ID : -
DIAGNOSTICS	

Checked by Anupriya Roychowdhury Macueladi

Dr. Meenakshi Mohan MD (Pathology) Consultant Pathologist Regn. No. : WBMC 54631



Reported By : -

Patient Name :	MR AMIT TIWARI	Patient ID :	ID81712
Modality :	DX	Sex :	MALE
Age :	41 YRS	Study :	CHEST PA
Reff. Dr. :	DR. SELF	Study Date :	06-04-2024

X-RAY OF CHEST PA VIEW

Findings:

- No lung parenchymal lesion is seen.
- Both costo-phrenic angles are clear.
- Cardio thoracic ratio within normal limit.
- Both the hila are normal.
- Both domes of diaphragm are normal in shape and position.
- Trachea is at midline.

IMPRESSION: Skiagram does not reveal any abnormality.

Clinical correlation and other investigation suggested if clinically indicated.

stam Debanshe lanta

Dr. Preetam Debasish Panda MD (Radio diagnosis) Registration No. 12-46299