

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989)

Collected On : 24/06/2023 02:46 PM Received On : 24/06/2023 03:42 PM Reported On : 24/06/2023 05:29 PM

Barcode : F12306240139 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

BIOCHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|--|--------|-------|---|
| Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Hydrogen Peroxidase) | 109. | 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. Samarпита Mukherjee
MBBS, MD Biochemistry
CONSULTANT

Note

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



Narayana Multispeciality Hospital

(A unit of Narayana Hrudayalaya Limited) CIN: L85110KA2000PLC027497

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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
9836-75-0808

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989)

Collected On : 24/06/2023 10:20 AM Received On : 24/06/2023 10:52 AM Reported On : 24/06/2023 11:56 AM

Barcode : F12306240094 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

BIOCHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|--|-------------|---------------------------|---|
| SERUM CREATININE | | | |
| Serum Creatinine (Enzymatic Method) | 0.6 | mg/dL | 0.52-1.04 |
| eGFR | 114.5 | mL/min/1.73m ² | - |
| Serum Sodium (ISE Direct) | 140 | mmol/L | 137.0-145.0 |
| Serum Potassium (ISE Direct) | 4.7 | mmol/L | 3.5-5.1 |
| LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL) | | | |
| Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase) | 110 | mg/dL | Desirable: < 200 Borderline High: 200-239 High: > 240 |
| Triglycerides (Enzymatic End Point) | 26 | mg/dL | Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500 |
| HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl ₂) | 62 H | mg/dL | Low: <40.0 mg/dL High: >60.0 mg/dL |
| Non-HDL Cholesterol | 48.0 | - | - |
| LDL Cholesterol (End Point) | 31.40 | mg/dL | Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190 |
| VLDL Cholesterol (Calculated) | 5 | mg/dL | 0.0-40.0 |
| Cholesterol /HDL Ratio (Calculated) | 1.8 | - | - |
| LIVER FUNCTION TEST(LFT) | | | |
| Bilirubin Total (Dyphylline, Diazonium Salt) | 0.9 | mg/dL | 0.2-1.3 |
| Conjugated Bilirubin (Direct) (Direct Measure) | 0.3 | mg/dL | 0.0-0.3 |

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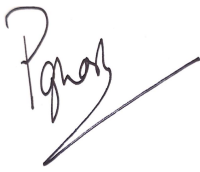
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| | | | |
|---|---------------|--------|------------|
| Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989) | | | |
| Unconjugated Bilirubin (Indirect) (Direct Measure) | 0.6 | mg/dL | 0.3-1.3 |
| Total Protein (Biuret, No Serum Blank, End Point) | 7.7 | g/dL | 6.3-8.2 |
| Serum Albumin (Bromcresol Green (BCG)) | 4.1 | gm/dL | 3.5-5.0 |
| Serum Globulin (Calculated) | 3.6 H | g/dL | 2.0-3.5 |
| Albumin To Globulin (A/G)Ratio (Calculated) | 1.14 | - | 1.0-2.1 |
| SGOT (AST) (Multiple-point Rate) | 21 | U/L | 14.0-36.0 |
| SGPT (ALT) (Uv With P5p) | 18 | U/L | <35.0 |
| Alkaline Phosphatase (ALP) (PMPP, AMP Buffer) | 57 | IU/L | 38.0-126.0 |
| Gamma Glutamyl Transferase (GGT) (G-glutamyl-p-nitroanilide) | 13 | U/L | 12.0-43.0 |
| THYROID PROFILE (T3, T4, TSH) | | | |
| Tri Iodo Thyronine (T3) (CLIA) | 1.26 | ng/mL | 0.97-1.69 |
| Thyroxine (T4) (CLIA) | 11.3 H | µg/dl | 5.53-11.0 |
| TSH (Thyroid Stimulating Hormone) (CLIA) | 1.951 | µIU/mL | 0.4-4.049 |

--End of Report--



Dr. Prithwijit Ghosh
MBBS, MD, Pathology
Consultant Pathologist

Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989)

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Barcode : F12306240094 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

BIOCHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|---|--------|-------|-------------------------------|
| Blood Urea Nitrogen (BUN) (Urease, UV) | 7.93 | mg/dL | 7.0-17.0 |

--End of Report--

Dr. Prithwijiit Ghosh
MBBS, MD, Pathology
Consultant Pathologist

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| | | | |
|---------------------|----------------|---------------------------|---------------------|
| Patient Name | Krishna Das | Requested By | Dr. Swarup Paul |
| MRN | 17600000241328 | Procedure DateTime | 2023-06-24 11:48:57 |
| Age/Sex | 34Y 4M/Female | Hospital | NH-BARASAT |

ULTRASONOGRAPHY OF WHOLE ABDOMEN

LIVER : It is normal in size (12.0 cm), shape and outline. It shows normal homogeneous echotexture. No focal SOL seen. IHBRs are not dilated.

CBD : It is not dilated, measuring – 2.7 mm at porta, visualized proximal lumen is clear. Distal CBD is obscured by bowel gas shadow.

PV : It appears normal, measuring – 7.7 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 normal in size (7.9 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.

No calculus or hydronephrosis is seen.

Perirenal fascial planes are intact.

Measures : Right kidney – 9.7 cm. Left kidney – 9.8 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.

UTERUS : It is **bulky in size (8.5 cm x 4.2 cm x 6.7 cm, volume = 126.6 cc)** anteverted. Myometrial echopattern is within normal limits. No focal SOL is seen. Endometrial echoes are central (4.0 mm) and shows normal echogenicity. Endomyometrial junction appears normal.

The cervix appears normal. Internal os is closed at present.

OVARIES : Both ovaries are normal in shape, size, position & echotexture .

Measures : Right Ovary – 3.7 cm x 2.3 cm ,Left Ovary – 2.2 cm x 1.5 cm.

No adnexal lesion is seen.

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

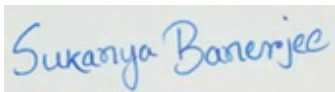
No ascites seen.

No pleural effusion seen.

IMPRESSION :

- **Mild bulky uterus.**

Advise : Clinical correlation & further relevant investigation (**TVS**) suggested.

A rectangular box containing a handwritten signature in blue ink that reads "Sukanya Banerjee".

Dr. Sukanya Banerjee
MD (Radiodiagnosis)

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Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989)

Collected On : 24/06/2023 10:20 AM Received On : 24/06/2023 02:06 PM Reported On : 24/06/2023 02:40 PM

Barcode : F32306240016 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

CLINICAL PATHOLOGY

| Test | Result | Unit | Biological Reference Interval |
|------|--------|------|-------------------------------|
|------|--------|------|-------------------------------|

URINE ROUTINE & MICROSCOPY

PHYSICAL EXAMINATION

| | | | |
|----------------------|-------------|----|---|
| Volume (Visible) | 40 | 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 | - | - |

Page 1 of 2

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Nitrite (Dual Wavelength Reflectance) Absent - -

MICROSCOPIC EXAMINATION

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

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

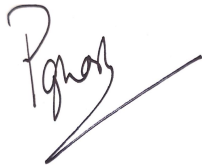
Epithelial Cells (Microscopy) 4-6/hpf - 2-3

Crystals (Microscopy) Not Seen - -

Casts (Microscopy) **Absent** - -

Others (Microscopy) Nil - -

--End of Report--



Dr. Prithwjit Ghosh
 MBBS, MD, Pathology
 Consultant Pathologist

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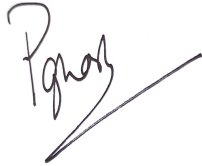
Barcode : F32306240016 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

CLINICAL PATHOLOGY

| Test | Result | Unit |
|-----------------|----------|------|
| Urine For Sugar | Negative | - |

--End of Report--



Dr. Prithwijit Ghosh
MBBS, MD, Pathology
Consultant Pathologist

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Patient Name : Ms Krishna Das MRN : 1760000241328 Gender/Age : FEMALE , 34y (06/02/1989)

Collected On : 24/06/2023 10:20 AM Received On : 24/06/2023 10:52 AM Reported On : 24/06/2023 11:59 AM

Barcode : F22306240065 Specimen : Whole Blood - ESR Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

HAEMATOLOGY LAB

| Test | Result | Unit | Biological Reference Interval |
|--|-------------|--------|-------------------------------|
| Erythrocyte Sedimentation Rate (ESR) (Westergren Method) | 38 H | mm/1hr | 0.0-20.0 |

--End of Report--

Dr. Prithwijit Ghosh
MBBS, MD, Pathology
Consultant Pathologist

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MC-5371



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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989)

Collected On : 24/06/2023 03:59 PM Received On : 24/06/2023 04:00 PM Reported On : 26/06/2023 05:54 PM

Barcode : F82306240003 Specimen : Fluid & Swab Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

CYTOLOGY

CERVICAL SMEAR FOR CYTOLOGY

LAB No. C/30/23

SPECIMEN DETAILS Conventional PAP smears.

MICROSCOPIC EXAMINATION Only mature squamous epithelial cells seen. Polymorphs (+).

IMPRESSION Inadequate for final evaluation.

NOTE Please repeat PAP smears with adequate sampling.

--End of Report--



Dr. Ruby Sarkar
MBBS, MD Pathology Consultant

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DEPARTMENT OF LABORATORY MEDICINE

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Collected On : 24/06/2023 10:20 AM Received On : 24/06/2023 10:52 AM Reported On : 24/06/2023 11:38 AM

Barcode : F12306240095 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

BIOCHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|---|--------|-------|---|
| Fasting Blood Sugar (FBS) (Glucose Oxidase, Hydrogen Peroxidase) | 91 | mg/dL | Normal: 70-109 Pre-diabetes: 110-125 Diabetes: => 126 |

--End of Report--

Dr. Prithwijiit Ghosh
MBBS, MD, Pathology
Consultant Pathologist

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ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Ms Krishna Das
GENDER/AGE : Female, 34 Years
LOCATION : -

PATIENT MRN : 17600000241328
PROCEDURE DATE : 24/06/2023 12:52 PM
REQUESTED BY : Dr. Swarup Paul



IMPRESSION

- NORMAL SIZED LEFT VENTRICULAR CAVITY
- NO RWMA
- GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 69 %
- 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 : NORMAL SIZED LEFT VENTRICULAR CAVITY. NO RWMA. GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 69 %. NORMAL DIASTOLIC INFLOW PATTERN.

| | | | | | |
|-----------|------|---------------|-----|---------|------|
| LVIDD(MM) | : 45 | IVSD(MM) | : 8 | EDV(ML) | : |
| LVIDS(MM) | : 27 | LVPWD(MM) | : 8 | ESV(ML) | : |
| E/A RATIO | : | E/E'(AVERAGE) | : | LVEF(%) | : 69 |

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

VALVES

MITRAL : MORPHOLOGICALLY NORMAL
AORTIC : MORPHOLOGICALLY NORMAL
TRICUSPID : MORPHOLOGICALLY NORMAL
PULMONARY : MORPHOLOGICALLY NORMAL

SEPTAE

IAS : INTACT
IVS : INTACT

ARTERIES AND VEINS

AORTA : NORMAL
SINUS(MM): 22

PA : NORMAL, NO PULMONARY HYPERTENSION
IVC : IVC 12 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 : 40 CM/SEC AORTIC :
VMAX : 101 CM/SEC, PEAK PG : 4 MMHG TRICUSPID : VMAX : 86 CM/SEC, PEAK PG : 2.9
MMHG PULMONARY : VMAX : 72 CM/SEC, PEAK PG : 2 MMHG



DR. SANYAL SOUGATA
ASSOCIATE CONSULTANT

24/06/2023 12:52 PM

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

PREPARED ON : 24/06/2023 12:55 PM
GENERATED ON : 01/07/2023 12:43 PM

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989)

Collected On : 24/06/2023 10:20 AM Received On : 24/06/2023 10:52 AM Reported On : 24/06/2023 06:42 PM

Barcode : F12306240096 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

BIOCHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|---------------------------|--------------|------|---|
| HBA1C | | | |
| HbA1c (HPLC) | 5.9 H | % | 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.

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Dr. Samarпита Mukherjee
MBBS, MD Biochemistry
CONSULTANT

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1440

| | | | |
|---------------------|----------------|---------------------------|---------------------|
| Patient Name | Krishna Das | Requested By | Dr. Swarup Paul |
| MRN | 17600000241328 | Procedure DateTime | 2023-06-24 11:30:28 |
| Age/Sex | 34Y 4M/Female | Hospital | NH-BARASAT |

X-RAY - CHEST (PA)

Non-specific pneumonitis seen at right paracardiac region.

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

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Collected On : 24/06/2023 10:20 AM Received On : 24/06/2023 10:52 AM Reported On : 24/06/2023 12:12 PM

Barcode : F22306240064 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8017782068

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) | 9.5 L | g/dL | 12.0-15.0 |
| Red Blood Cell Count (Impedance Variation) | 3.87 | millions/ μ L | 3.8-4.8 |
| PCV (Packed Cell Volume) / Hematocrit (Impedance) | 30.4 L | % | 36.0-46.0 |
| MCV (Mean Corpuscular Volume) (Calculated) | 79 L | fL | 83.0-101.0 |
| MCH (Mean Corpuscular Haemoglobin) (Calculated) | 24.5 L | pg | 27.0-32.0 |
| MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated) | 31.2 L | g/dL | 31.5-34.5 |
| Red Cell Distribution Width (RDW) (Impedance) | 15.4 H | % | 11.6-14.0 |
| Platelet Count (Impedance Variation/Microscopy) | 263 | Thousand / μ L | 150.0-410.0 |
| Total Leucocyte Count(WBC) (Impedance Variation) | 6.4 | $\times 10^3$ cells/ μ l | 4.0-10.0 |
| DIFFERENTIAL COUNT (DC) | | | |
| Neutrophils (Impedance Variation And Absorbency /Microscopy) | 54.6 | % | 40.0-80.0 |
| Lymphocytes (Impedance Variation And Absorbency /Microscopy) | 36.1 | % | 20.0-40.0 |

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

Appointments

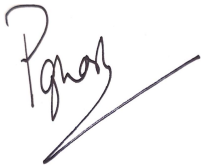
1800-309-0309 (Toll Free)

Emergencies

9836-75-0808

| | | | |
|---|--------------|---|----------|
| Patient Name : Ms Krishna Das MRN : 17600000241328 Gender/Age : FEMALE , 34y (06/02/1989) | | | |
| Monocytes (Impedance Variation And Absorbency /Microscopy) | 3.1 | % | 2.0-10.0 |
| Eosinophils (Impedance Variation And Absorbency /Microscopy) | 6.2 H | % | 1.0-6.0 |
| Basophils (Impedance Variation And Absorbency /Microscopy) | 0.0 L | % | 1.0-2.0 |
| Absolute Neutrophil Count | 3.5 | - | 2.0-7.0 |
| Absolute Lymphocyte Count | 2.32 | - | 1.0-3.0 |
| Absolute Monocyte Count | 0.2 | - | 0.2-1.0 |
| Absolute Eosinophil Count | 0.4 | - | 0.02-0.5 |

--End of Report--



Dr. Prithwijiit Ghosh
 MBBS, MD, Pathology
 Consultant Pathologist

Note

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



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