

## LABORATORY INVESTIGATION REPORT

<b>Patient Name</b>	: Mrs. Sabita Mondal	<b>Age/Sex</b>	: 52 Year(s)/Female
<b>UHID</b>	: NMHK.2204169	<b>Order Date</b>	: 26/03/2022 14:41
<b>Episode</b>	: OP	<b>Mobile No</b>	: 9748049844
<b>Ref. Doctor</b>	: NMH	<b>Facility</b>	: NARAYAN MEMORIAL HOSPITAL
<b>Address</b>	: BAGAKHALI , ,Kolkata,West Bengal ,700140		

### Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060286A	Collection Date : 26/03/22 14:48	Ack Date :	Report Date : 26/03/22 18:48

#### GLYCOSYLATED HAEMOGLOBIN (HBA1C)

##### SAMPLE : EDTA BLOOD

HBA1C	6.2 ▲	%	Non-diabetic : 4-6
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By HPLC

1. HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
2. HbA1c has been endorsed by clinical group & American Diabetes Association guidelines 2017, for diagnosis of Diabetes using a cut-off point of 6.5%.
3. Trends in HbA1c are a better indicator of diabetic control than a solitary test.
4. Low HbA1c in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (Specially in Severe iron deficiency anaemia and hemolytic), chronic renal failure and liver disease. Clinical correlation suggested.
5. Interference of Haemoglobinopathies in HbA1c estimation.
  - a) For HbF > 25%, an alternate platform (fructosamine) is recommended for testing of HbA1c.
  - b) Homozygous hemoglobinopathy is detected, fructosamine is recommended for monitoring diabetic status.

Note: Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.  
c) Heterozygous state detected (D10/turbo is corrected for HbS and HbC trait).  
6. For known diabetic patients, following values can be considered as a tool for monitoring the glycemic control:  
Excellent control:- 6 - 7%,  
Fair to good control:- 7 - 8%,  
Unsatisfactory control:- 8 - 10%  
Poor control > 10%

End of Report



**Dr.S. Chatterjee**  
**MD, MRBS, FAACC**  
(CONSULTANT BIOCHEMIST)

Checked By

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#### SERUM CREATININE

##### SAMPLE : SERUM

SERUM CREATININE 0.5 mg/dl 0.5 - 0.9  
*Jaffe Gen2 Compensated*

#### BLOOD UREA NITROGEN

BLOOD UREA NITROGEN 8.4 mg/dl 6 - 20  
*Calculated*

#### URIC ACID

##### SAMPLE : SERUM

URIC ACID 4.8 mg/dl 2.4 - 5.7  
*Enzymatic Colorimetric*

##### SAMPLE : SERUM

RESULT 16.8  
 Sample No : 07H0060286B Collection Date : 26/03/22 14:48 Ack Date : Report Date : 26/03/22 18:48

#### BLOOD SUGAR(F)

##### SAMPLE : PLASMA

BLOOD SUGAR FASTING 87 mg/dl 70 - 109  
*Hexokinase*

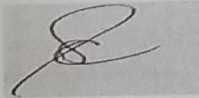
Sample No : 07H0060290B Collection Date : 26/03/22 15:00 Ack Date : Report Date : 26/03/22 18:48

#### BLOOD SUGAR(PP)

##### SAMPLE : PLASMA

BLOOD SUGAR PP 106 mg/dl 70 - 140  
*Hexokinase*

End of Report



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**Biochemistry**

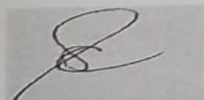
INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060286	Collection Date : 26/03/22 14:48	Ack Date :	Report Date : 26/03/22 18:48

**LIVER FUNCTION TEST ( LFT )**

**SAMPLE : SERUM**

TOTAL BILIRUBIN <i>Diazo Method</i>	0.5	mg/dl	0 - 1.1
DIRECT BILIRUBIN <i>Diazo Method</i>	0.2	mg/dl	0 - 0.2
INDIRECT BILIRUBIN <i>Calculated</i>	0.3	mg/dl	0.2 - 0.9
SGPT (ALT) <i>IFCC Without Pyridoxal Phosphate</i>	33	U/L	0 - 34
SGOT (AST) <i>IFCC Without Pyridoxal Phosphate</i>	28	U/L	0 - 31
ALKALINE PHOSPHATASE <i>IFCC</i>	<b>129 ▲</b>	U/L	53 - 128
TOTAL PROTEIN <i>Biuret</i>	7.5	g/dl	6.4 - 8.2
ALBUMIN <i>Bromocresol Green</i>	4.8	gm/dl	3.5 - 5.2
GLOBULIN <i>Calculated</i>	2.7	g/dl	2 - 3.5
ALBUMIN:GLOBULIN <i>Calculated</i>	1.8	-	1.1 - 2.5
GGT <i>Enzymatic colorimetric assay</i>	23	U/L	5 - 36

End of Report



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**Biochemistry**

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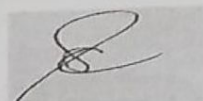
**LIPID PROFILE**

**SAMPLE : SERUM**

TOTAL CHOLESTEROL	188	mg/dl	Desirable <200   Borderline 200-239   High ≥240
<i>CHOD-PAP</i>			
HDL CHOLESTEROL	49	mg/dl	40 - 60
<i>Homogenous Enzymatic Colorimetric</i>			
LDL CHOLESTEROL	116	mg/dl	Optimal < 100   Borderline 130
<i>Homogenous Enzymatic Colorimetric</i>			
VLDL	22	mg/dl	0 - 30
<i>CALCULATED</i>			
CHOLESTEROL-HDL RATIO	3.84	-	
LDL-HDL RATIO	2.37	-	
TRIGLYCERIDES	112	mg/dl	Desirable <150   Borderline 150 - 200   High >200

*Enzymatic Colorimetric*

End of Report



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**Immunoassay**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060286	Collection Date : 26/03/22 14:48	Ack Date :	Report Date : 28/03/22 11:09

**THYROID FUNCTION TEST**

**SAMPLE : SERUM**

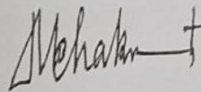
T3	1.27	ng/ml	0.6 - 1.8
<i>ECLIA</i>		ug/dL	5.4 - 11.7
T4	8.11		
<i>ECLIA</i>		uIU/ml	Adult Male – 0.27-5.50 Adult Female – 0.27-5.50 Newborns - <25 Upto 12 years – 0.3-5
TSH	2.13		

*ECLIA*

**Interpretations:**

- For diagnostic purposes, the result should always be assessed in conjunction with the patient's medical history, clinical examinations and other findings.
- The assay is unaffected by icterus (Bilirubin < 701 µmol/L or < 41 mg/dL), hemolysis (Hb < 0.621 mmol/L or < 1 g/dL), lipemia (Intralipid < 1500 mg/dL), biotin (<102 nmol/L or < 25 ng/ml), IgG < 2 g/dL and IgM < 0.5 g/dL)
- There is no high dose hook effect at TSH concentrations upto 1000 µmol/ml.
- TSH values may be transiently altered because of non thyroidal illness like several infections, liver disease, renal and heart failure, several burns, trauma and surgery etc. Drugs that decrease TSH values e.g. L-dopa, Glucocorticoid drugs that increase TSH values e.g. Iodine, Lithium, Amiodarone.
- The assay is unaffected by icterus (bilirubin < 633 µmol/L or < 37 mg/dl), hemolysis (Hb < 1.4 mmol/L or < 2.3 g/dl), lipemia (triglycerides < 28.5 mmol/L or 2500 mg/dl) and biotin (< 409 nmol or < 100 ng/ml).
- The assay is unaffected by icterus (bilirubin < 599 µmol/L or < 35 mg/dl), hemolysis (Hb < 1.2 mmol/L or < 2.0 g/dl), lipemia (Intralipid < 1800 mg/dl) and biotin (< 123 nmol or < 30 ng/ml).

End of Report



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**MBBS, MD(PATH)**  
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**Hematology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060286	Collection Date : 26/03/22 14:48	Ack Date :	Report Date : 28/03/22 10:51

**COMPLETE HAEMOGRAM ( CBC )**

**SAMPLE : EDTA BLOOD**

HAEMOGLOBIN (HB)	13.6	gm/dl	12 - 15
<i>Colorimetric method (Cyn Meth)</i>			
RBC COUNT	4.76	$\times 10^6/\mu\text{l}$	3.8 - 4.8
<i>Electrical Impedance Method</i>			
TOTAL WBC COUNT	6.9	$10^3/\text{cmm}$	4 - 10
<i>Electrical Impedance Method</i>			
PLATELET COUNT	220	$10^3/\text{cmm}$	150 - 410
<i>Electrical Impedance Method</i>			
PCV	41	%	36 - 46
<i>RBC pulse ht. detection method</i>			
MCV	86	fl	83 - 101
<i>calculated</i>			
MCH	29	pg	27 - 32
<i>Calculated</i>			
MCHC	33	gm/dl	31.5 - 34.5
<i>Calculated</i>			
ESR	40 ▲	%	0 - 19
<i>Modified Westergren Method</i>			

**DIFFERENTIAL COUNT**

NEUTROPHILS	61	%	40 - 80
<i>Microscopy</i>			
LYMPHOCYTES	33	%	20 - 40
<i>Microscopy</i>			
MONOCYTES	03	%	2 - 10
<i>Microscopy</i>			
EOSINOPHILS	03	%	1 - 6
<i>Microscopy</i>			
BASOPHILS	00	%	0 - 2
<i>Microscopy</i>			

**PERIPHERAL BLOOD SMEAR**

RBC	Normocytic Normochromic
WBC	Within normal limit
PLATELET	Adequate



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End of Report

*Angkita K. Ghosh*

**Dr. ANGKITA K. GHOSH**  
**MBBS, MD(PATH)**  
(CONSULTANT PATHOLOGIST)  
RegNo: 82734  
Checked By



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**Immunology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060286	Collection Date : 26/03/22 14:48	Ack Date :	Report Date : 26/03/22 16:53

**BLOOD GROUPING & Rh TYPING**

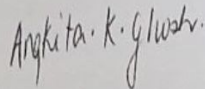
**SAMPLE : EDTA BLOOD**

BLOOD GROUP ' AB '

*Agglutination forward & Reverse*

RH TYPE POSITIVE

End of Report



**Dr. ANGKITA K. GHOSH**  
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**Clinical Pathology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060290	Collection Date : 26/03/22 15:00	Ack Date :	Report Date : 28/03/22 10:32

**URINE FOR R/E**

**SAMPLE : URINE**

**PHYSICAL EXAMINATION**

VOLUME	40	ml	
COLOUR	STRAW		
APPEARANCE	CLEAR		1.010 - 1.030
SPECIFIC GRAVITY	1.015		
REACTION(pH)	ACIDIC (6.5)		

**CHEMICAL EXAMINATION**

SUGAR	ABSENT	ABSENT
ALBUMIN.	ABSENT	ABSENT
BLOOD	ABSENT	ABSENT
KETONE	ABSENT	ABSENT
BILE SALT	ABSENT	ABSENT
BILE PIGMENTS	ABSENT	ABSENT

**MICROSCOPIC EXAMINATION**

PUS CELLS	1-2 / HPF	<5/HPF
EPITHELIAL CELLS	2-4 / HPF	<20/HPF
RBC	NIL	ABSENT
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT

*Please correlate clinically.*

End of Report

*Angkita K. Ghosh*

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**Clinical Pathology**

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0060290	Collection Date : 26/03/22 15:00	Ack Date :	Report Date : 26/03/22 18:46

**URINE FOR SUGAR FASTING**

**SAMPLE : URINE**

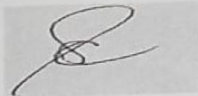
RESULT	ABSENT		
Sample No : 07H0060291	Collection Date : 26/03/22 15:00	Ack Date :	Report Date : 26/03/22 18:47

**URINE FOR SUGAR PP**

**SAMPLE : URINE**

RESULT	ABSENT
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End of Report



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**MD, MBBS, FAACC**  
(CONSULTANT BIOCHEMIST)

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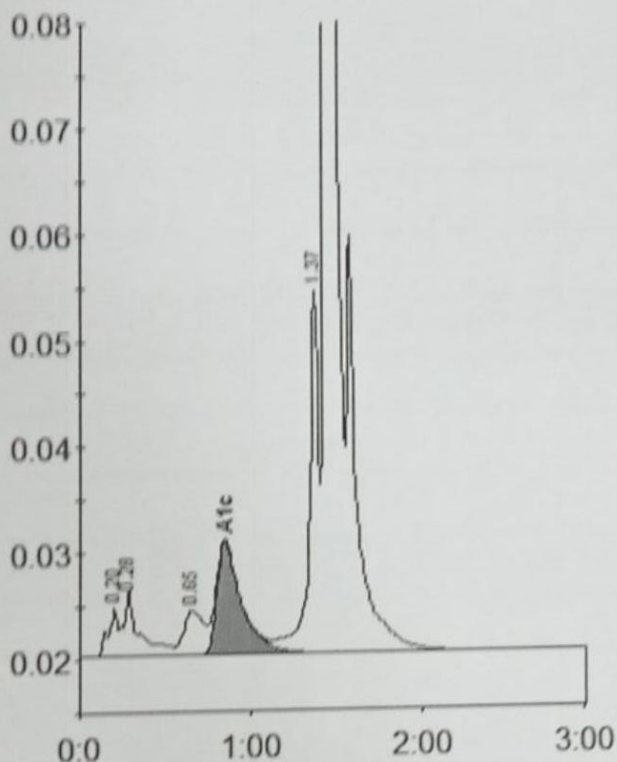
# Patient report

Bio-Rad DATE: 26/03/2022  
 D-10 TIME: 16:28  
 S/N: #DJ0A467747 Software version: 4.30-2  
 Sample ID: 07H0060286A  
 Injection date 26/03/2022 16:10  
 Injection #: 12 Method: HbA1c  
 Rack #: --- Rack position: 2

Mrs. Sapita Pondai  
 (R)NIMHK.2204169 52y/ F



07H0060286A  
 EDTA Wh 26-03 14:48



Peak table - ID: 07H0060286A

Peak	R.time	Height	Area	Area %
A1a	0.20	4592	17643	0.8
A1b	0.28	6423	39310	1.7
LA1c/CHb-1	0.65	4219	34161	1.5
A1c	0.84	10682	107265	6.2
P3	1.37	34263	130999	5.6
A0	1.44	713845	1998212	85.8
Total Area:		2327590		

Concentration:	%	mmol/mol
A1c	6.2	45