

Female ~ ~ ~

CHECK LIST

NAME	Sabana Patuon		PATHOLOGY/PP
OP			ECG/PFT
AGE	30y		ECHO/TMT
DATE	5/12/22		USG / CXR
PACKAGE			URINE / STOOL
REFERRED BY			MAMMO/ PAP
HT	162.5cm.		EYE/ DENTAL
WT	43kg		GP CONSULTATION
BP	120/80mm/hg		DIETITION
PULSE	73 bpm		CARDIOLOGIST
WAIST			GYNECOLOGIST
HIP			DENTAL
RESPIRATORY RATE	19%.		
CHEST (INHALE)			
CHEST (EXHALE)			
ABDOMEN			

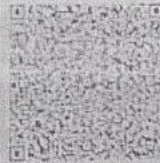




भारतीय विशिष्ट पहचान प्राधिकरण
 भारत सरकार
 Unique Identification Authority of India
 Government of India

Enrolment No: 4193/53036/02551

17012012
 Sabana Parvin
 D/O Golari Gardens
 25/8 Diamond Harbour Road
 P. S. Hardevpur Kolkata
 Barisha South Twenty Four Parganas
 West Bengal 700005
 9674783035



आपका आधार क्रमांक / Your Aadhaar No. :

6695 8829 7089

आधार - आम आदमी का अधिकार

भारत सरकार
 GOVERNMENT OF INDIA

Sabana Parvin
 Year of Birth : 1992
 Female

6695 8829 7089




आधार - आम आदमी का अधिकार

Sabana Parvin



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA

UHID : NMHK.2221968

Episode : OP

Ref. Doctor : NMH

Address : 25/8 D.H ROAD , . ,Kolkata,West Bengal ,700008

Age/Sex : 30 Year(s) / Female

Order Date : 05/12/2022 10:23

Mobile No : 891705166

DOB : 01/01/1992

Facility : NARAYAN MEMORIAL HOSPITAL

Immunology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0092026	Collection Date : 05/12/22 10:37	Ack Date : 05/12/2022 11:27	Report Date : 05/12/22 16:32

BLOOD GROUPING & Rh TYPING

SAMPLE : EDTA BLOOD

BLOOD GROUP ' B '

Method - Agglutinationforward & Reverse

RH TYPE POSITIVE

THYROID FUNCTION TEST

SAMPLE : SERUM

T3	1.2	ng/ml	0.60 - 1.80
Method - ECLIA			
T4	8.2	ug/dL	5.40 - 11.70
Method - ECLIA			
TSH	4.23	uIU/ml	Adult Male – 0.27-5.50 Adult Female – 0.27-5.50 Newborns - <25 Upto 12 years – 0.3-5

Method - 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 $\mu\text{mol/L}$ 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 $\mu\text{mol/ml}$.
- 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 $\mu\text{mol/L}$ 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 $\mu\text{mol/L}$ 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).

LABORATORY INVESTIGATION REPORT

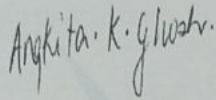
Patient Name	: Mrs. PARVIN SABANA	Age/Sex	: 30 Year(s) / Female
Patient ID	: NMHK.2221968	Order Date	: 05/12/2022 10:23
Episode	: OP	Mobile No	: 891705166
Ref. Doctor	: NMH	DOB	: 01/01/1992
Address	: 25/8 D.H ROAD , , Kolkata, West Bengal , 700008	Facility	: NARAYAN MEMORIAL HOSPITAL

End of Report



Dr.S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

Checked By



Dr. ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

RegNo: 82734



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA	Age/Sex : 30 Year(s) / Female
PHID : NMHK.2221968	Order Date : 05/12/2022 10:23
Episode : OP	Mobile No : 891705166
Ref. Doctor : NMH	DOB : 01/01/1992
Address : 25/8 D.H ROAD , , Kolkata, West Bengal , 700008	Facility : NARAYAN MEMORIAL HOSPITAL

Biochemistry

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0092026	Collection Date : 05/12/22 10:37	Ack Date : 05/12/2022 11:48	Report Date : 05/12/22 18:02

SERUM CREATININE

SAMPLE : SERUM

SERUM CREATININE	0.6	mg/dl	0.5 - 0.9
<i>Method - Jaffe Gen2 Compensated</i>			

LIVER FUNCTION TEST (LFT)

SAMPLE : SERUM

TOTAL BILIRUBIN	0.4	mg/dl	0 - 1.1
<i>Method - Diazo Method</i>			
DIRECT BILIRUBIN	0.2	mg/dl	0 - 0.2
<i>Method - Diazo Method</i>			
INDIRECT BILIRUBIN	0.2	mg/dl	0.2 - 0.9
<i>Method - Calculated</i>			
SGPT (ALT)	14	U/L	0 - 34
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
SGOT (AST)	20	U/L	0 - 31
<i>Method - IFCC Without Pyridoxal Phosphate</i>			
ALKALINE PHOSPHATASE	88	U/L	53 - 128
<i>Method - IFCC</i>			
TOTAL PROTEIN	7.4	g/dl	6.4 - 8.2
<i>Method - Biuret</i>			
ALBUMIN	4.7	gm/dl	3.5 - 5.2
<i>Method - Bromocresol Green</i>			
GLOBULIN	2.7	g/dl	2 - 3.5
<i>Method - Calculated</i>			
ALBUMIN:GLOBULIN	1.7	-	1.1 - 2.5
<i>Method - Calculated</i>			
GGT	10	U/L	5 - 36



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA	Age/Sex : 30 Year(s) / Female
UHID : NMHK.2221968	Order Date : 05/12/2022 10:23
Episode : OP	
Ref. Doctor : NMH	Mobile No : 891705166
	DOB : 01/01/1992
Address : 25/8 D.H ROAD , . ,Kolkata,West Bengal ,700008	Facility : NARAYAN MEMORIAL HOSPITAL

Method - Enzymatic colorimetric assay

BLOOD UREA NITROGEN

BLOOD UREA NITROGEN 09 mg/dl 6 - 20

Method - Calculated

LIPID PROFILE

SAMPLE : SERUM

TOTAL CHOLESTEROL 196 mg/dl Desirable <200 |
Borderline 200-239 |
High >=240

Method - CHOD-PAP

HDL CHOLESTEROL 67 ▲ mg/dl 40 - 60

Method - Homogenous Enzymatic Colorimetric

LDL CHOLESTEROL 110 mg/dl Optimal < 100 |
Borderline 130

Method - Homogenous Enzymatic Colorimetric

VLDL 18 mg/dl 0 - 30

Method - CALCULATED

CHOLESTEROL-HDL RATIO 2.93 -

LDL-HDL RATIO 1.64 -

TRIGLYCERIDES 88 mg/dl Desirable <150 |
Borderline 150 - 200 |
High >200

Method - Enzymatic Colorimetric

URIC ACID

SAMPLE : SERUM

URIC ACID 3.6 mg/dl 2.4 - 5.7

Method - Enzymatic Colorimetric

SAMPLE : SERUM

RESULT 15.0

Sample No : 07H0092026A Collection Date : 05/12/22 10:37 Ack Date : 05/12/2022 14:15 Report Date : 05/12/22 18:01

GLYCOSYLATED HAEMOGLOBIN (HBA1C)

SAMPLE : EDTA BLOOD

LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA	Age/Sex : 30 Year(s) / Female
UHID : NMHK.2221968	Order Date : 05/12/2022 10:23
Episode : OP	Mobile No : 891705166
Ref. Doctor : NMH	DOB : 01/01/1992
Address : 25/8 D.H ROAD , , Kolkata, West Bengal ,700008	Facility : NARAYAN MEMORIAL HOSPITAL

HBA1C 5.2

Interpretation & Remark:

- HbA1c is used for monitoring diabetic control. It reflects the estimated average glucose.
- HbA1c has been endorsed by clinical groups & American Diabetes Association guidelines 2017, for diagnosis of diabetes using a cut-off point of 6.5%.
- Trends in HbA1c are a better indicator of diabetic control than a solitary test.
- Low HbA1c in a non-diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (Specially severe iron deficiency anaemia & haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- 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.
C. Heterozygous state detected (D10/ turbo is corrected for HbS and HbC trait).
- For known diabetic patients, following values can be considered as a tool for monitoring the glycemc control :

Excellent Control - 6 -7 %
Fair to Good Control - 7 - 8 %
Unsatisfactory Control - 8 - 10 %
Poor Control - > 10 % .

Note : Hemoglobin electrophoresis (HPLC method) is recommended for detecting hemoglobinopathy.

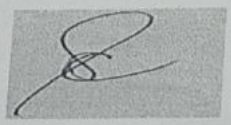
Sample No : 07H0092026B Collection Date : 05/12/22 10:37 Ack Date : 05/12/2022 11:49 Report Date : 05/12/22 18:02

BLOOD SUGAR(F)

SAMPLE : PLASMA

BLOOD SUGAR FASTING 90 mg/dl 70 - 109
Method - Hexokinase

End of Report



Dr.S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

Checked By



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA	Age/Sex : 30 Year(s) / Female
UHID : NMHK.2221968	Order Date : 05/12/2022 10:23
Episode : OP	Mobile No : 891705166
Ref. Doctor : NMH	DOB : 01/01/1992
Address : 25/8 D.H ROAD , . ,Kolkata,West Bengal ,700008	Facility : NARAYAN MEMORIAL HOSPITAL

Clinical Pathology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No : 07H0092026	Collection Date : 05/12/22 10:37	Ack Date : 05/12/2022 14:55	Report Date : 05/12/22 17:05

URINE FOR R/E

SAMPLE : URINE

PHYSICAL EXAMINATION

VOLUME	20	ml	
COLOUR	PALE YELLOW		
APPEARANCE	SLIGHTLY HAZY		
SPECIFIC GRAVITY	1.010		1.010 - 1.030
REACTION(pH)	ACIDIC (6.0)		

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	3-5 / HPF	<20/HPF
RBC	NIL	
CAST	ABSENT	ABSENT
CRYSTAL	ABSENT	ABSENT

Please correlate clinically.

URINE FOR SUGAR FASTING^a

SAMPLE : URINE

RESULT	ABSENT
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Episode : OP
Ref. Doctor : NMH
Address : 25/8 D.H ROAD , . ,Kolkata,West Bengal ,700008

Age/Sex : 30 Year(s) / Female
Order Date : 05/12/2022 10:23
Mobile No : 891705166
DOB : 01/01/1992
Facility : NARAYAN MEMORIAL HOSPITAL

End of Report

Dr.S. Chatterjee
MD, MBBS, FAACC
(CONSULTANT BIOCHEMIST)

Checked By

Dr.ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

RegNo: 82734



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA	Age/Sex : 30 Year(s) / Female
UHID : NMHK.2221968	Order Date : 05/12/2022 10:23
Episode : OP	
Ref. Doctor : NMH	Mobile No : 891705166
	DOB : 01/01/1992
Address : 25/8 D.H ROAD , , Kolkata, West Bengal , 700008	Facility : NARAYAN MEMORIAL HOSPITAL

Hematology

INVESTIGATION	RESULTS	UNITS	BIOLOGICAL REF RANGE
Sample No. : 07H0092026	Collection Date : 05/12/22 10:37	Ack Date : 05/12/2022 11:27	Report Date : 05/12/22 16:27

COMPLETE HAEMOGRAM (CBC)

SAMPLE : EDTA BLOOD

HAEMOGLOBIN (HB)	13.0	gm/dl	12 - 15
<i>Method - Colorimetric method (Cyn Meth)</i>			
RBC COUNT	4.75	$\times 10^6/\mu\text{l}$	3.8 - 4.8
<i>Method - Electrical Impedance Method</i>			
TOTAL WBC COUNT	4.4	$10^3/\text{cmm}$	4 - 10
<i>Method - Electrical Impedance Method</i>			
PLATELET COUNT	180	$10^3/\text{cmm}$	150 - 410
<i>Method - Electrical Impedance Method</i>			
PCV	41	%	36 - 46
<i>Method - RBC pulse ht. detection method</i>			
MCV	86	fl	83 - 101
<i>Method - calculated</i>			
MCH	27	pg	27 - 32
<i>Method - Calculated</i>			
MCHC	32	gm/dl	31.5 - 34.5
<i>Method - Calculated</i>			
ESR	10	%	0 - 12
<i>Method - Modified Westergren Method</i>			

DIFFERENTIAL COUNT

NEUTROPHILS	59	%	40 - 80
<i>Method - Microscopy</i>			
LYMPHOCYTES	36	%	20 - 40
<i>Method - Microscopy</i>			
MONOCYTES	03	%	2 - 10
<i>Method - Microscopy</i>			



LABORATORY INVESTIGATION REPORT

Patient Name : Mrs. PARVIN SABANA
UHID : NMHK.2221968
Episode : OP
Ref. Doctor : NMH
Address : 25/8 D.H ROAD , , Kolkata, West Bengal , 700008

Age/Sex : 30 Year(s) / Female
Order Date : 05/12/2022 10:23
Mobile No : 891705166
DOB : 01/01/1992
Facility : NARAYAN MEMORIAL HOSPITAL

EOSINOPHILS 02 % 1 - 6
Method - Microscopy

BASOPHILS 00 % 0 - 2
Method - Microscopy

PERIPHERAL BLOOD SMEAR

RBC Normocytic Normochromic
WBC Within normal limits
PLATELET Adequate

End of Report

Angkita K. Ghosh

Dr. ANGKITA K. GHOSH
MBBS, MD(PATH)
(CONSULTANT PATHOLOGIST)

RegNo: 82734
Checked By



DIAGNOSTICS REPORT

Patient Name	: Mrs. PARVIN SABANA	Order Date	: 05/12/2022 10:23
Age/Sex	: 30 Year(s)/Female	Report Date	: 05/12/2022 14:57
UHID	: NMHK.2221968	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 25/8 D.H ROAD, ,Kolkata, West Bengal, 700008	Mobile	: 891705166

USG REPORT OF WHOLE ABDOMEN (SCREENING)

LIVER : Liver is normal in size and parenchymal echotexture. Intrahepatic biliary radicles are not dilated.No focal mass lesion is seen.

PORTA :PV : Normal. PV measures 0.9 cm.
CD : Normal . CD measures 0.3 cm.

GALL BLADDER : Gall bladder is normal in size, contour, outline and position. No calculus is seen. Wall thickness is normal.

PANCREAS :Pancreas is normal in size and parenchymal echogenicity. Pancreatic duct is not dilated.

SPLEEN :Spleen is not enlarged and parenchyma shows normal homogeneous pattern.

KIDNEYS :Both kidneys are normal in size, shape, outline, position and parenchymal echogenicity. Cortico medullary differentiation maintained. No evidence of any calculus/mass / hydronephrosis is seen. Right kidney measures : 9.8 cm & Left kidney measures : 10.0 cm.

URINARY BLADDER : Urinary bladder is normal in contour, outline and distension. No vesical lesion is seen.

UTERUS : Anteverted normal in size, shape, outline, position and parenchymal echogenicity. Cavity is empty. Uterus measures 6.8 cm x 4.0 cm x 3.2 cm.



DIAGNOSTICS REPORT

Patient Name	: Mrs. PARVIN SABANA	Order Date	: 05/12/2022 10:23
Age/Sex	: 30 Year(s)/Female	Report Date	: 05/12/2022 14:57
UHID	: NMHK.2221968	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 25/8 D.H ROAD, ,,Kolkata, West Bengal, 700008	Mobile	: 891705166

OVARIES : Both ovaries are normal in size, shape and echopattern. Right ovary : measures 2.7 cm x 1.4 cm. Left ovary : measures 1.9 cm x 1.0 cm .

PERITONEUM : :No free fluid is noted.

RETROPERITONEUM : IVC and aorta appear normal. No lymphadenopathy is seen.

IMPRESSION : Normal study.

Dr.MADHUSHREE RAY NASKAR ,
MBBS,DMRD
Consultant Radiologist
RegNo: 57032



DIAGNOSTICS REPORT

HCU

Patient Name	: Mrs. PARVIN SABANA	Order Date	: 05/12/2022 10:23
Age/Sex	: 30 Year(s)/Female	Report Date	: 05/12/2022 14:25
UHID	: NMHK.2221968	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 25/8 D.H ROAD, .,Kolkata, West Bengal, 700008	Mobile	: 891705166

ELECTROCARDIOGRAM REPORT (ECG)

HR	: 71 bpm
Rhythm	: Sinus
P wave	: Normal
PR Interval	: 124 msec
QRS axis	: Left axis (-8 Degree)
QRS duration	: 84 msec
QRS configuration	: Low voltage complex
T wave	: Abnormality in anterior leads
ST segment	: Non specific changes
QTc	: 398 msec
QT	: 362 msec

IMPRESSION:

- Sinus rhythm. Left QRS axis.
 - Low voltage QRS complex.
 - Non specific ST-T changes.
- Clinical correlation please.

Dr. MUNNA DAS, MD
(MEDICINE), DM(CARDIOLOGY)

Consultant Cardiologist

RegNo: 55696

IARUIN SABRANA
1221968

10 years M / F
..... kg

HR 71/min

Intervals:
RR 842 ms
P 98 ms
PR 124 ms
QRS 84 ms
QT 362 ms
QTc 398 ms
(Bazett)
10 mm/mV

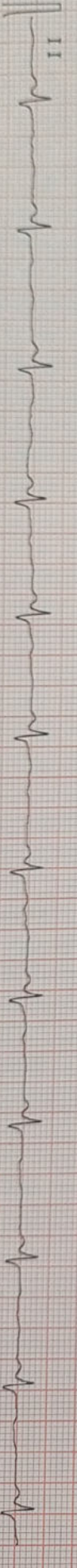
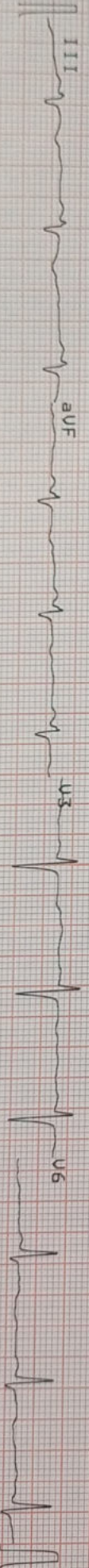
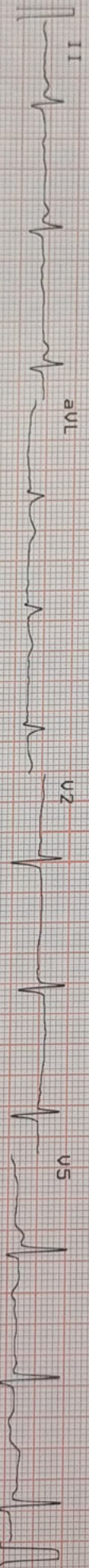
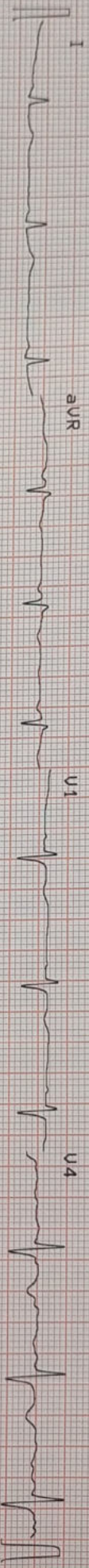
P axis: 56°

QRS -8°
T -21°
P (II) 0.08 mV
S (V1) -0.59 mV
R (V5) 0.95 mV
Sokol. 1.54 mV

SINUS RHYTHM
LEFTWARD AXIS
T ABNORMALITY IN ANTEROLATERAL LEADS
6.02

UNCONFIRMED REPORT

10 mm/mV



10 mm/mV

0.05-25 Hz FS0 55F SBS 05.12.2022 11:19:43

NARAYAN MEMORIAL
HOSPITAL, BEHALA

RT-102Plus 1.25 Ct

DIAGNOSTICS REPORT

Patient Name	: Mrs. PARVIN SABANA	Order Date	: 05/12/2022 10:23
Age/Sex	: 30 Year(s)/Female	Report Date	: 06/12/2022 17:14
UHID	: NMHK.2221968	IP No	:
Ref. Doctor	: NMH	Facility	: NARAYAN MEMORIAL HOSPITAL
Address	: 25/8 D.H ROAD, „Kolkata, West Bengal, 700008	Mobile	: 891705166

CHEST X-RAY REPORT OF PA VIEW

Lung fields are clear. No focal parenchymal opacity is seen.

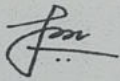
No appreciable pleural thickening / calcification is noted.

Costo-phrenic angles are normal.

Cardiac shadow appears normal.

Bilateral hilar shadows are normal.

No obvious bony abnormality is seen.



Dr. Sayani Mahal, MD Radiology
(AIIMS), PDCC (AIIMS)

RegNo: 74369

Handwritten notes on the right margin: "Mrs. Parvin Sabana (2021968)" and "06/12/2022".