

# ADULT TRANS-THORACIC ECHO REPORT

**PATIENT NAME** : Ms Rupa Ghosh  
**GENDER/AGE** : Female, 40 Years  
**LOCATION** : -

**PATIENT MRN** : 17600000238658  
**PROCEDURE DATE** : 09/05/2023 12:18 PM  
**REQUESTED BY** : Dr. Swarup Paul



## IMPRESSION

- NORMAL SIZED LEFT VENTRICULAR CAVITY
- NO RWMA
- GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 66 %
- GRADE I DIASTOLIC DYSFUNCTION
- GOOD RIGHT VENTRICULAR SYSTOLIC FUNCTION
- NO PULMONARY HYPERTENSION

## FINDINGS

### CHAMBERS

LEFT ATRIUM : NORMAL  
RIGHT ATRIUM : NORMAL  
LEFT VENTRICLE : NORMAL SIZED LEFT VENTRICULAR CAVITY. NO RWMA. GOOD LEFT VENTRICULAR SYSTOLIC FUNCTION WITH LVEF 66 %. GRADE I DIASTOLIC DYSFUNCTION.  
RIGHT VENTRICLE : NORMAL IN SIZE. GOOD RV SYSTOLIC FUNCTION, TAPSE 24 MM

### VALVES

MITRAL : MORPHOLOGICALLY NORMAL  
AORTIC : MORPHOLOGICALLY NORMAL, AV VMAX 98 CM/SEC, PEAK PG - 7 MMHG  
TRICUSPID : MORPHOLOGICALLY NORMAL  
PULMONARY : MORPHOLOGICALLY NORMAL

### SEPTAE

IAS : INTACT  
IVS : INTACT

### ARTERIES AND VEINS

AORTA : NORMAL  
PA : NORMAL , NO PULMONARY HYPERTENSION  
IVC : IVC 6 MM WITH NORMAL RESPIRATORY VARIATION

**PERICARDIUM** : NORMAL

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

MS RUPA GHOSH (17600000238658)



DR. SANYAL SOUGATA  
ASSOCIATE CONSULTANT

09/05/2023 12:18 PM

**PREPARED BY** : SURAJIT BISWAS(353011)  
**GENERATED BY** : ABHIJIT DAS(346520)

**PREPARED ON** : 09/05/2023 12:20 PM  
**GENERATED ON** : 10/05/2023 06:36 PM

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 02:31 PM Received On : 09/05/2023 02:55 PM Reported On : 09/05/2023 09:51 PM

Barcode : F12305090153 Specimen : Plasma Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**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**

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 10:15 AM Received On : 09/05/2023 12:00 PM Reported On : 09/05/2023 01:28 PM

Barcode : F32305090011 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**CLINICAL PATHOLOGY**

Test	Result	Unit	Biological Reference Interval
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**URINE ROUTINE & MICROSCOPY**

**PHYSICAL EXAMINATION**

Volume (Visible)	45	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)	1.025	-	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	-	-

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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)                                      Occasional                      -                      2-3

Crystals (Microscopy)    Not Seen                      -                      -

Casts (Microscopy)    **Absent**                      -                      -

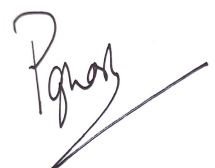
Bacteria    Not Found                      -                      -

Yeast Cells    Not Found                      -                      -

Mucus    Not Found                      -                      -

Others (Microscopy)    Nil                                      -                      -

--End of Report--



Dr. Prithwijiit Ghosh  
 MBBS, MD, Pathology  
 Consultant Pathologist

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Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 10:15 AM Received On : 09/05/2023 12:00 PM Reported On : 09/05/2023 01:37 PM

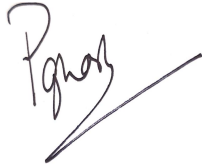
Barcode : F32305090011 Specimen : Urine Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**CLINICAL PATHOLOGY**

Test	Result	Unit
Urine For Sugar	Absent	-

--End of Report--



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MBBS, MD, Pathology  
Consultant Pathologist

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Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 10:15 AM Received On : 09/05/2023 10:18 AM Reported On : 09/05/2023 09:08 PM

Barcode : F12305090098 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>HBA1C</b>			
HbA1c (HPLC)	5.3	%	Both: Normal: 4.0-5.6 Both: Prediabetes: 5.7-6.4 Both: Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan)
Estimated Average Glucose	105.41	-	-

**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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<b>Patient Name</b>	Rupa Ghosh	<b>Requested By</b>	Dr. Swarup Paul
<b>MRN</b>	17600000238658	<b>Procedure DateTime</b>	2023-05-09 11:52:16
<b>Age/Sex</b>	40Y 1M/Female	<b>Hospital</b>	NH-BARASAT

### **ULTRASONOGRAPHY OF WHOLE ABDOMEN**

**LIVER** : It is normal in size (11.0 cm), shape and outline. It shows normal homogeneous echotexture. No focal SOL seen. IHBRs are not dilated.

**CBD** : It is not dilated, measuring – 3.7 mm at porta, visualized proximal lumen is clear. Distal CBD is obscured by bowel gas shadow.

**PV** : It appears normal, measuring – 8.9 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 ( 6.2 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 – 9.8 x 3.9 cm. Left kidney – 9.7 x 3.9 cm.

**URETERS** : They are not visualized as they are not dilated.

Aorta – Normal.

IVC – Normal

**URINARY BLADDER** : It is optimally distended. Wall is normal. No intraluminal pathology seen.

**UTERUS** : It is normal in size ( 3.5 x 4.5 x 6.6 cm), anteverted. Myometrial echopattern is within normal limits. No focal SOL is seen.

Endometrial echoes are central (6.0 mm) and shows normal echogenecity. 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 – 2.7 cm x 1.1 cm ,Left Ovary – 1.9 cm x 1.9 cm.



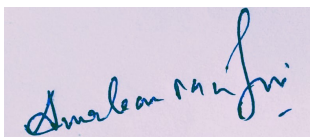
No adnexal lesion is seen.

No ascites seen.

**IMPRESSION :**

- **Findings are within normal limits.**

Advise : Clinical correlation & further relevant investigation suggested.

A handwritten signature in blue ink on a light purple background. The signature is cursive and appears to read "Anirban Majhi".

**Dr. Anirban Majhi**  
MD (Radiodiagnosis)

**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 10:15 AM Received On : 09/05/2023 10:18 AM Reported On : 09/05/2023 01:08 PM

Barcode : F12305090096 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>SERUM CREATININE</b>			
Serum Creatinine (Enzymatic Method)	0.7	mg/dL	0.52-1.04
eGFR	92.7	mL/min/1.73m <sup>2</sup>	-
<b>Serum Sodium</b> (ISE Direct )	141	mmol/L	137.0-145.0
<b>Serum Potassium</b> (ISE Direct )	<b>3.1 L</b>	mmol/L	3.5-5.1
<b>LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)</b>			
Cholesterol Total (Cholesterol Oxidase Esterase Peroxidase)	187	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Enzymatic End Point)	166	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Direct Measure, PTA /MgCl <sub>2</sub> )	54	mg/dL	Low: <40.0 mg/dL High: >60.0 mg/dL
Non-HDL Cholesterol	133.0	-	-
LDL Cholesterol (End Point)	<b>102.37 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)	33	mg/dL	0.0-40.0
Cholesterol /HDL Ratio (Calculated)	3.5	-	-
<b>LIVER FUNCTION TEST(LFT)</b>			
Bilirubin Total (Dyphylline, Diazonium Salt)	0.7	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Direct Measure)	0.2	mg/dL	0.0-0.3

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**9836-75-0808**

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)			
Unconjugated Bilirubin (Indirect) (Direct Measure)	0.5	mg/dL	0.3-1.3
Total Protein (Biuret, No Serum Blank, End Point)	7.7	g/dL	6.3-8.2
Serum Albumin (Bromocresol Green (BCG))	4.3	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.4	g/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.26	-	1.0-2.1
SGOT (AST) (Multiple-point Rate)	26	U/L	14.0-36.0
SGPT (ALT) (Uv With P5p)	25	U/L	<35.0
Alkaline Phosphatase (ALP) (PMPP, AMP Buffer)	52	IU/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (G-glutamyl-p-nitroanilide)	14	U/L	12.0-43.0
<b>THYROID PROFILE (T3, T4, TSH)</b>			
Tri Iodo Thyronine (T3) (CLIA)	1.41	ng/mL	0.97-1.69
Thyroxine (T4) (CLIA)	10.3	µg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (CLIA)	2.380	µIU/mL	0.4-4.049

--End of Report--



Dr. Samarпита Mukherjee  
MBBS, MD Biochemistry  
CONSULTANT

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

**Note**

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- Results relate to the sample only.
- Kindly correlate clinically.



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**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 10:15 AM Received On : 09/05/2023 10:18 AM Reported On : 09/05/2023 11:31 AM

Barcode : F12305090096 Specimen : Serum Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**BIOCHEMISTRY**

Test	Result	Unit	Biological Reference Interval
<b>Blood Urea Nitrogen (BUN)</b> (Urease, UV)	10.27	mg/dL	7.0-17.0

--End of Report--

Dr. Samarпита Mukherjee  
MBBS, MD Biochemistry  
CONSULTANT

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**DEPARTMENT OF LABORATORY MEDICINE**

Final Report

Patient Name : Ms Rupa Ghosh MRN : 17600000238658 Gender/Age : FEMALE , 40y (01/04/1983)

Collected On : 09/05/2023 10:15 AM Received On : 09/05/2023 10:18 AM Reported On : 09/05/2023 11:45 AM

Barcode : F22305090078 Specimen : Whole Blood - ESR Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
<b>Erythrocyte Sedimentation Rate (ESR)</b> (Westergren Method)	<b>25 H</b>	mm/1hr	0.0-20.0

--End of Report--

Dr. Prithwijiit Ghosh  
MBBS, MD, Pathology  
Consultant Pathologist

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<b>Patient Name</b>	Rupa Ghosh	<b>Requested By</b>	Dr. Swarup Paul
<b>MRN</b>	17600000238658	<b>Procedure DateTime</b>	2023-05-09 11:34:27
<b>Age/Sex</b>	40Y 1M/Female	<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**

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Barcode : F22305090077 Specimen : Whole Blood Consultant : Dr. Swarup Paul(CRITICAL CARE MEDICINE)  
Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9733861696

**HAEMATOLOGY LAB**

Test	Result	Unit	Biological Reference Interval
<b>BLOOD GROUP &amp; RH TYPING</b>			
Blood Group (Slide Technique And Tube Technique)	B	-	-
RH Typing (Slide Technique And Tube Technique)	Positive	-	-
<b>COMPLETE BLOOD COUNT (CBC)</b>			
Haemoglobin (Hb%) (Cyanide-free Hemoglobin Method)	13.1	g/dL	12.0-15.0
Red Blood Cell Count (Impedance Variation)	4.23	millions/ $\mu$ L	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Impedance)	39.0	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Calculated)	92	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	30.9	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.5	g/dL	31.5-34.5
Red Cell Distribution Width (RDW) (Impedance)	13.5	%	11.6-14.0
Platelet Count (Impedance Variation/Microscopy)	165	Thousand / $\mu$ L	150.0-410.0
Total Leucocyte Count(WBC) (Impedance Variation)	6.2	$\times 10^3$ cells/ $\mu$ l	4.0-10.0
<b>DIFFERENTIAL COUNT (DC)</b>			
Neutrophils (Impedance Variation And Absorbency /Microscopy)	63.6	%	40.0-80.0
Lymphocytes (Impedance Variation And Absorbency /Microscopy)	30.3	%	20.0-40.0



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Monocytes (Impedance Variation And Absorbency /Microscopy)	2.1	%	2.0-10.0
Eosinophils (Impedance Variation And Absorbency /Microscopy)	3.9	%	1.0-6.0
Basophils (Impedance Variation And Absorbency /Microscopy)	<b>0.1 L</b>	%	1.0-2.0
Absolute Neutrophil Count	3.94	-	2.0-7.0
Absolute Lymphocyte Count	1.88	-	1.0-3.0
Absolute Monocyte Count	<b>0.13 L</b>	-	0.2-1.0
Absolute Eosinophil Count	0.24	-	0.02-0.5
Absolute Basophil Count	<b>0.01 L</b>	-	0.02-0.1

*As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.*

--End of Report--



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 MBBS, MD, Pathology  
 Consultant Pathologist

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