

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:09 AM Reported On : 25/03/2023 11:53 AM

Barcode : 812303250244 Specimen : Whole Blood - ESR Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

HAEMATOLOGY LAB

| Test | Result | Unit | Biological Reference Interval |
|---|-------------|--------|-------------------------------|
| Erythrocyte Sedimentation Rate (ESR) (Modified Westergren Method) | 40 H | mm/1hr | 0.0-10.0 |

--End of Report--

Dr. Shanaz Latif
MD, Pathology
Consultant Pathology MBBS, DTM&H, DCP, MD .Reg No 41555 : WBMC

Note

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



DEPARTMENT OF LABORATORY MEDICINE

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Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:10 AM Reported On : 25/03/2023 12:15 PM


Barcode : 802303250369 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

CLINICAL CHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|--|---------------|-------|-------------------------------|
| LIVER FUNCTION TEST(LFT) | | | |
| Bilirubin Total (Colorimetric -Diazo Method) | 0.75 | mg/dL | 0.2-1.3 |
| Conjugated Bilirubin (Direct) (Calculated) | 0.35 | mg/dL | 0.0-0.4 |
| Unconjugated Bilirubin (Indirect) (Colorimetric Endpoint) | 0.4 | - | - |
| Total Protein (Biuret Method) | 8.30 H | g/dL | 6.3-8.2 |
| Serum Albumin (Colorimetric - Bromo-Cresol Green) | 5.00 | gm/dL | 3.5-5.0 |
| Serum Globulin (Calculated) | 3.3 | g/dL | 2.0-3.5 |
| Albumin To Globulin (A/G)Ratio (Calculated) | 1.52 | - | 1.0-2.1 |
| SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate)) | 62 H | U/L | 17.0-59.0 |
| SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate)) | 88 H | U/L | <50.0 |
| Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer) | 136 H | IU/L | 38.0-126.0 |
| Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method)) | 38 | U/L | 15.0-73.0 |

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)



Dr. Sujata Ghosh
PhD, Biochemistry
Biochemist M.Sc , Ph. D

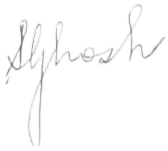
CLINICAL CHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|--|----------------|---------------------------|---|
| SERUM CREATININE | | | |
| Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase) | 0.80 | mg/dL | 0.66-1.25 |
| eGFR | 106.1 | mL/min/1.73m ² | - |
| Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric - Urease) | 8.91 L | - | 9.0-20.0 |
| Serum Sodium (Direct ISE - Potentiometric) | 140 | mmol/L | 137.0-145.0 |
| Serum Potassium (Direct ISE - Potentiometric) | 4.1 | mmol/L | 3.5-5.1 |
| LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL) | | | |
| Cholesterol Total (Colorimetric - Cholesterol Oxidase) | 223 H | mg/dL | Desirable: < 200 Borderline High: 200-239 High: > 240 |
| Triglycerides (Enzymatic Endpoint Colorimetric) | 195 | mg/dL | Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500 |
| HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method) | 35 L | mg/dL | 40.0-60.0 |
| Non-HDL Cholesterol | 188.0 | - | - |
| LDL Cholesterol (Non LDL Selective Elimination, CHOD/POD) | 125.8 H | mg/dL | Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190 |

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| | | | |
|---|------|-------|----------|
| VLDL Cholesterol (Calculated) | 39.0 | mg/dL | 0.0-40.0 |
| Cholesterol /HDL Ratio | 6.4 | - | - |
| Prostate Specific Antigen (PSA) (CLIA) | 1.04 | ng/mL | 0.0-2.5 |

--End of Report--



Dr. Sujata Ghosh
PhD, Biochemistry
Biochemist M.Sc , Ph. D



Dr. Debasree Biswas
MD, Biochemistry
Clinical Biochemist MBBS, MD

Note

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(Lipid Profile, -> Auto Authorized)
(Serum Sodium, -> Auto Authorized)
(Blood Urea Nitrogen (Bun), -> Auto Authorized)
(Serum Potassium, -> Auto Authorized)
(CR, -> Auto Authorized)
(Prostate Specific Antigen (Psa) -> Auto Authorized)



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Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:10 AM Reported On : 25/03/2023 11:31 AM

Barcode : 802303250369 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

CLINICAL CHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|---|--------|--------|-------------------------------|
| THYROID PROFILE (T3, T4, TSH) | | | |
| Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence Immunoassay (CLIA)) | 1.36 | ng/mL | 0.97-1.69 |
| Thyroxine (T4) (Enhanced Chemiluminescence Immunoassay (CLIA)) | 8.54 | µg/dl | 5.53-11.0 |
| TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence Immunoassay (CLIA)) | 2.677 | uIU/ml | 0.4001-4.049 |

--End of Report--

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- (-> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

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Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:10 AM Reported On : 25/03/2023 10:56 AM

Barcode : 802303250370 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

CLINICAL CHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|--|--------------|-------|--|
| Fasting Blood Sugar (FBS) (Glucose Oxidase, Peroxidase) | 108 H | mg/dL | Normal: 70-99 Pre-diabetes: 100-125 Diabetes: => 126 ADA standards 2019 |

--End of Report--

Dr. Sujata Ghosh
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- Kindly correlate clinically.
(Fasting Blood Sugar (FBS) -> Auto Authorized)



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:30 AM Reported On : 25/03/2023 11:22 AM

Barcode : BR2303250029 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

IMMUNOHAEMATOLOGY

| Test | Result | Unit |
|---|----------|------|
| BLOOD GROUP & RH TYPING | | |
| Blood Group (Column Agglutination Technology) | O | - |
| RH Typing (Column Agglutination Technology) | Positive | - |

--End of Report--

Dr. Amal Kumar Saha
MBBS, D.PED, ECFMG
Blood Bank Officer

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:09 AM Reported On : 25/03/2023 12:36 PM

Barcode : 802303250371 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

CLINICAL CHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|---------------------------|--------|------|---|
| HBA1C | | | |
| HbA1c (HPLC) | 5.4 | % | Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2019 (Carpenter/ Coustan) |
| Estimated Average Glucose | 108.29 | - | - |

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--

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Clinical Biochemist MBBS, MD

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:04 AM Reported On : 25/03/2023 10:48 AM

Barcode : 822303250024 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

CLINICAL PATHOLOGY

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

URINE ROUTINE & MICROSCOPY**PHYSICAL EXAMINATION**

| | | | |
|------------|-----------------|----|---|
| Volume | 40 | ml | - |
| Colour | Light-Yellow | - | - |
| Appearance | Slightly-Cloudy | - | - |

CHEMICAL EXAMINATION

| | | | |
|---|----------|---|-------------|
| pH(Reaction) (Mixed PH Indicator) | 5.0 | - | 4.8-7.5 |
| Sp. Gravity (Dual Wavelength Reflectance) | 1.010 | - | 1.002-1.030 |
| Protein (Protein Error Of PH Indicator) | Negative | - | - |
| Urine Glucose (Glucose Oxidase, Peroxidase) | Negative | - | Negative |
| Ketone Bodies (Legal's Method) | Negative | - | Negative |
| Bile Salts (Dual Wavelength Reflectance/Manual) | Negative | - | Negative |
| Bile Pigment (Bilirubin) (Coupling Of Bilirubin With Diazonium Salt) | Negative | - | Negative |
| Urobilinogen (Coupling Reaction Of Urobilinogen With A Stable Diazonium Salt In Buffer) | Normal | - | Normal |
| Urine Leucocyte Esterase (Enzymatic, Indoxyl Ester And Diazonium Salt) | Negative | - | Negative |
| Blood Urine (Pseudo - Enzymatic Test, Organic Peroxidase And Chromogen) | Negative | - | Negative |

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Nitrite (Modified Griess Reaction) Negative - Negative

MICROSCOPIC EXAMINATION

| | | | |
|------------------|-----|------|-------|
| Pus Cells | 1-2 | /hpf | 1-2 |
| RBC | NIL | /hpf | 0 - 3 |
| Epithelial Cells | 1-2 | /hpf | 2-3 |
| Crystals | NIL | - | - |
| Casts | NIL | - | - |

--End of Report--



Dr. Sanjib Kumar Pattari
MD, Pathology
Consultant Pathology MBBS, MD. Reg No : 53635 (WBMC)

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 09:36 AM Received On : 25/03/2023 10:09 AM Reported On : 25/03/2023 10:34 AM

Barcode : 812303250245 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

HAEMATOLOGY LAB

| Test | Result | Unit | Biological Reference Interval |
|--|---------------|-------------------|-------------------------------|
| COMPLETE BLOOD COUNT (CBC) | | | |
| Haemoglobin (Hb%) (Photometric Measurement) | 14.8 | g/dL | 13.0-17.0 |
| Red Blood Cell Count (Electrical Impedance) | 5.05 | millions/ μ L | 4.5-5.5 |
| PCV (Packed Cell Volume) / Hematocrit (Calculated) | 44.7 | % | 40.0-54.0 |
| MCV (Mean Corpuscular Volume) (Derived From RBC Histogram) | 88.5 | fL | 83.0-101.0 |
| MCH (Mean Corpuscular Haemoglobin) (Calculated) | 29.3 | pg | 27.0-32.0 |
| MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated) | 33.1 | % | 31.5-34.5 |
| Red Cell Distribution Width (RDW) (Calculated) | 15.6 H | % | 11.6-14.0 |
| Platelet Count (Electrical Impedance) | 155 | $10^3/\mu$ L | 150.0-400.0 |
| Mean Platelet Volume (MPV) (Derived) | 12.8 H | fL | 7.0-11.7 |
| Total Leucocyte Count(WBC) (Electrical Impedance) | 8.0 | $10^3/\mu$ L | 4.0-10.0 |
| DIFFERENTIAL COUNT (DC) | | | |
| Neutrophils (VCSn Technology) | 72.6 | % | 40.0-75.0 |
| Lymphocytes (VCSn Technology) | 18.0 L | % | 20.0-40.0 |
| Monocytes (VCSn Technology) | 7.5 | % | 2.0-10.0 |
| Eosinophils (VCSn Technology) | 1.5 | % | 1.0-6.0 |

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

| | | | |
|--|------|--------------------|----------|
| Basophils (VCSn Technology) | 0.4 | % | 0.0-2.0 |
| Absolute Neutrophil Count (Calculated) | 5.81 | $10^3/\mu\text{L}$ | 1.8-7.8 |
| Absolute Lymphocyte Count (Calculated) | 1.44 | $10^3/\mu\text{L}$ | 1.0-4.8 |
| Absolute Monocyte Count (Calculated) | 0.6 | $10^3/\mu\text{L}$ | 0.0-0.8 |
| Absolute Eosinophil Count (Calculated) | 0.12 | $10^3/\mu\text{L}$ | 0.0-0.45 |
| Absolute Basophil Count (Calculated) | 0.03 | $10^3/\mu\text{L}$ | 0.0-0.2 |

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

--End of Report--

Dr. Sanjib Kumar Pattari
MD, Pathology
Consultant Pathology MBBS, MD. Reg No : 53635 (WBMC)

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MC - 2803



DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : Mr Mohan Kumar Patra MRN : 17510001172753 Gender/Age : MALE , 42y (02/02/1981)

Collected On : 25/03/2023 01:55 PM Received On : 25/03/2023 02:28 PM Reported On : 25/03/2023 02:48 PM

Barcode : 802303250677 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9860855167

CLINICAL CHEMISTRY

| Test | Result | Unit | Biological Reference Interval |
|---|--------|-------|---|
| Post Prandial Blood Sugar (PPBS) (Glucose Oxidase, Peroxidase) | 136 | mg/dL | Normal: 70-139 Pre-diabetes: 140-199 Diabetes: => 200 ADA standards 2019 |

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. Sujata Ghosh
PhD, Biochemistry
Biochemist M.Sc , Ph. D



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MD, Biochemistry
Clinical Biochemist MBBS, MD

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(Post Prandial Blood Sugar (PPBS) -> Auto Authorized)



ADULT TRANS-THORACIC ECHO REPORT

PATIENT NAME : Mr Mohan Kumar Patra
GENDER/AGE : Male, 42 Years
LOCATION : -

PATIENT MRN : 17510001172753
PROCEDURE DATE : 25/03/2023 01:34 PM
REQUESTED BY : EXTERNAL



IMPRESSION

- NO SIGNIFICANT ECHOCARDIOGRAPHIC ABNORMALITY DETECTED.

FINDINGS

CHAMBERS

LEFT ATRIUM : NORMAL SIZED
RIGHT ATRIUM : NORMAL SIZED
LEFT VENTRICLE : NORMAL SIZED CAVITY. NO REGIONAL WALL MOTION ABNORMALITY. GOOD SYSTOLIC FUNCTION WITH EJECTION FRACTION: 64%. NORMAL DIASTOLIC FLOW PATTERN.
RIGHT VENTRICLE : NORMAL SIZE AND THICKNESS WITH NORMAL FUNCTION

VALVES

MITRAL : NORMAL.
AORTIC : NORMAL.
TRICUSPID : NORMAL.
PULMONARY : NORMAL.

SEPTAE

IAS : INTACT
IVS : INTACT

ARTERIES AND VEINS

AORTA : NORMAL, LEFT AORTIC ARCH
PA : NORMAL SIZE
IVC : NORMAL SIZE & COLLAPSIBILITY
SVC & CS : NORMAL
PULMONARY VEINS : NORMAL

PERICARDIUM : NORMAL PERICARDIAL THICKNESS. NO EFFUSION

INTRACARDIAC MASS : NO TUMOUR, THROMBUS OR VEGETATION SEEN

OTHERS : NIL.

Langata Das

MR MOHAN KUMAR PATRA (17510001172753)

DR. SANGEETA DAS
CONSULTANT GENERAL MEDICINE MBBS

SANTASHI GHOSH
SENIOR TECHNICIAN

25/03/2023 01:34 PM

| | | | |
|---------------------|-------------------------------|---------------------|-----------------------|
| PREPARED BY | : NITA PAUL(308573) | PREPARED ON | : 25/03/2023 03:01 PM |
| GENERATED BY | : MADHUPARNA DASGUPTA(333433) | GENERATED ON | : 03/04/2023 09:18 AM |

| | | | |
|---------------------|-------------------|---------------------------|---------------------|
| Patient Name | Mohan Kumar Patra | Requested By | EXTERNAL |
| MRN | 17510001172753 | Procedure DateTime | 2023-03-25 11:37:09 |
| Age/Sex | 42Y 1M/Male | Hospital | NH-RTIICS |

USG OF WHOLE ABDOMEN (SCREENING)

LIVER:

It is enlarged in size and mildly hyperechoic in echogenicity. No focal SOL is seen. The intrahepatic biliary radicles are not dilated.

PORTAL VEIN:

The portal vein is normal in calibre at the porta. There is no intraluminal thrombus.

GALL BLADDER:

It is optimally distended. No calculus or sludge is seen within it. The wall is not thickened.

CBD:

The common duct is not dilated at porta. No intraluminal calculus is seen.

SPLEEN:

It is normal in size measuring 8.8 cm and echogenicity. No focal SOL is seen. The splenoportal axis is patent and is normal in dimensions.

PANCREAS:

It is normal in size and echogenicity. The duct is not dilated. No calcification or focal SOL is seen.

KIDNEYS:

Both kidneys are normal in size, position and echogenicity. The corticomedullary differentiation is maintained. Clear cyst (8 mm) noted in left lower pole. No hydronephrosis or calculus is seen.

Right kidney and left kidney measures 11.7 cm and 12.0 cm respectively.

URINARY BLADDER:

It is normal in capacity. The wall is not thickened. No intraluminal calculus or mass is seen.

Post void residual urine - insignificant.

PROSTATE:

It is mildly enlarged in size measuring 3.3 x 3.6 x 4.3 cm (Weight = 27 gms). It shows a homogenous echotexture and smooth outline.

IMPRESSION:

- Hepatomegaly with grade-I fatty liver.
- Prostate weight around 27 gms with insignificant post void residual urine.

NOT FOR MEDICO LEGAL PURPOSES

This is only a Radiological Impression and not Diagnosis. Like all diagnostic modalities, USG also has its limitations. Therefore USG report should be interpreted in correlation with clinical and pathological findings.

All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.

Assist By :Arpita



Dr. Ashish Kumar
Consultant Sonologist

* ***This is a digitally signed valid document.*** Reported Date/Time: 2023-03-25 11:54:29

| | | | |
|---------------------|-------------------|---------------------------|---------------------|
| Patient Name | Mohan Kumar Patra | Requested By | EXTERNAL |
| MRN | 17510001172753 | Procedure DateTime | 2023-03-25 10:32:09 |
| Age/Sex | 42Y 1M/Male | Hospital | NH-RTIICS |

CHEST RADIOGRAPH (PA VIEW)

FINDINGS:

- Trachea is normal and is central.
- The cardiac shadow is normal in contour.
- Mediastinum and great vessels are within normal limits.
- The hilar shadows are within normal limits.
- The costo-phrenic angles are clear.
- The lung fields and bronchovascular markings appear normal.
- The visualized bones and soft tissue structures appear normal.
- Both the diaphragmatic domes appear normal.

IMPRESSION:

- **No significant radiological abnormality detected.**

NOT FOR MEDICO LEGAL PURPOSES

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All typing and topographical error is regretted and if detected at any time is correctable. Please inform us immediately.



Dr. Arathy V
MBBS, DNB (Radiodiagnosis)
88249 West Bengal Medical Council

* ***This is a digitally signed valid document.*** Reported Date/Time: 2023-03-25 14:28:57