Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 03:00 PM
Sample ID : 1924056238
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
HbA1c HPLC			
HbA1c HPLC Method : High Performance Liquid Chromatography (HPLC)	6.3	%	Normal : < 5.7 Pre Diabetes : 5.7 - 6.4 Diabetes : >= 6.5
Estimated Average Glucose	134	mg/dL	70 - 116

NOTE :

1. Glucose combines with haemoglobin(Hb) continuously and nearly irreversibly during life span of RBC(120 days); thus glycosylated Hb is proportional to mean plasma glucose level during the previous 2-3 months. Therefore A1c assay is a useful mean of evaluation of success of long term diabetic control by monitoring diabetic patient~s compliance with therapeutic regimen used and long-term blood glucose level control. Added advantage is its ability to predict progression of diabetic complications.

2. Presence of Hb variant may interfere with accurate estimation of HbA1c. Please do Hb HPLC test to identify Haemoglobinapathy if any and also do Glycated albumin or Fructosamine tests to assess glycemic status if required.

3. Inappropriately low value may be seen in anemia due to iron deficiency or due to other causes, acute blood loss, recent blood transfusion, hemoglobinopathies, CLD, Hypertriglyceridemia, intake of Vitamin E & C, Aspirin, Co-trimoxazole etc.

Reported By : -

Registered By : BISWAJIT MUKHERJEE

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 03:00 PM
Sample ID : 1924056238
Sample Type : Edta Blood

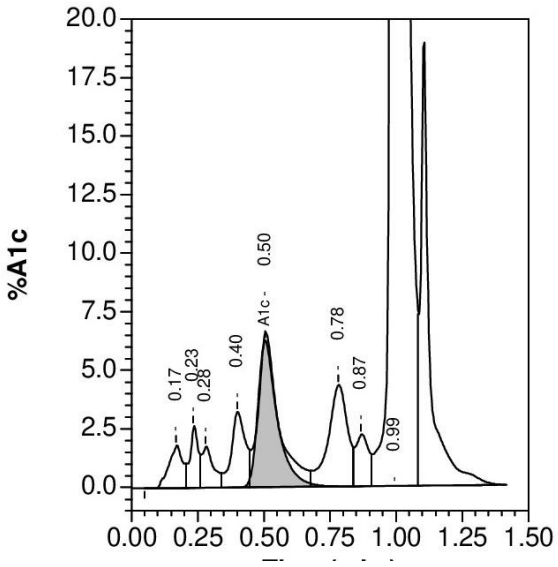
Test Description	Value(s)	Unit(s)	Reference Range

Peak Name	NGSP %	Area %	Retention Time (min)	Peak Area
A1a	---	1.1	0.167	17554
A1b	---	0.9	0.233	14992
F	---	0.9	0.279	14059
LA1c	---	1.9	0.400	31157
A1c	6.3*	---	0.504	84575
P3	---	3.5	0.780	57434
P4	---	1.2	0.867	19621
Ao	---	85.3	0.994	1388122

*Values outside of expected ranges

Total Area: 1,627,514

HbA1c (NGSP) = 6.3* %



END OF REPORT

Checked by
Pintu Manna

Dr.Supratik Biswas
MBBS, MD
Consultant Biochemist
Regn.No.: 64600 (WBMC)

Reported By : -

Registered By : BISWAJIT MUKHERJEE

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 01:17 PM
Sample ID : 1924056238
Sample Type : Urine

Test Description	Value(s)	Unit(s)	Reference Range
Urine Routine			
PHYSICAL EXAMINATION			
Volume	40 ml		--
Colour	Straw		Pale to dark yellow
Appearance	Slightly hazy		Clear
Deposit	Present		Absent
Specific Gravity	1.025		1.010 - 1.030
CHEMICAL EXAMINATION			
Reaction / PH	Acidic (PH: 6.0)		5.0 - 8.0
Protein	Absent		Absent
Sugar	Absent		Absent
Ketones Bodies	Absent		Absent
Urobilinogen	Normal		Normal
Bilirubin	Absent		Absent
Blood	Absent		Absent
Nitrite	Negative		Negative
MICROSCOPIC EXAMINATION			
Pus Cells	1 - 2 /hpf		<5 /hpf
R.B.C	Not found		Absent
Epithelial Cells	1 - 2 /hpf		A few
Casts	Not found		Absent
Crystals	Not found		--

METHOD : SEDIMENTATION AND MICROSCOPE

Terms and conditions:

Test results released pertain to the specimen/sample submitted.

The tests results are dependent on the quality of the sample received by the Laboratory.

The test results are released with the presumption that the specimen/sample belongs to the patient as mentioned on the bill/ vials/TRF/booking ID Laboratory investigations test results are only a tool to facilitate in arriving at a diagnosis and should always be clinically correlated by the Referring Physician.

Repeat samples/specimens are accepted on request of Referring Physician within 7 days of reporting.

Due to some unforeseen circumstances reports may be delayed. Inconvenience is regretted.

Reported By : -

Registered By : BISWAJIT MUKHERJEE

Patient Name : MR. UTTAM KUMAR SHAW

Age / Gender : 38 Years / Male

Mobile No. : 9182416764

Patient ID : 113460

Bill ID : 117196

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 10/08/2024, 09:11 AM

Receiving Time : 10/08/2024, 11:09 AM

Reporting Time : 10/08/2024, 01:17 PM

Sample ID : 1924056238

Sample Type : Urine

Test Description	Value(s)	Unit(s)	Reference Range

Test result may show inter laboratory variations.

The test results are not valid for medico legal purposes.

END OF REPORT

Checked by
Sudipta Halder

Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631

Reported By : -

Registered By : BISWAJIT MUKHERJEE

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 12:18 PM
Sample ID : 1924056238
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
T3,T4 & TSH			
T3 Method : Chemiluminescent Microparticle Immunoassay (CMIA)	1.10	ng/mL	1 - 30 days: 1 - 7.4 1m - 11m: 1.05 - 2.45 1yr - 5yrs: 1.05 - 2.69 6yrs - 10yrs: 0.94 - 2.41 11yrs - 15yrs: 0.82 - 2.13 16yrs- 20yrs: 0.8 - 2.1 Adult: 0.58 - 1.59
T4 Method : Chemiluminescent Microparticle Immunoassay (CMIA)	7.53	µg/dL	1d - 6d : 11.8 - 22.6 7d - 14d : 9.9 - 16.6 15d - 4m : 7.2 - 14.4 4m - 12m : 7.8 - 16.5 1yr - 5yr : 7.2 - 15.0 5yr - 10yr : 6.4 - 13.6 > 10yr : 4.87 - 11.72 Adult : 4.87 - 11.72
TSH Method : Chemiluminescent Microparticle Immunoassay (CMIA)	3.06	µIU/ml	0.35 - 4.94

Interpretation :

T3

Triiodothyronine (3,5,3' triiodothyronine or T3) is the thyroid hormone principally responsible for the regulation of metabolism of the various target organs. T3 is mainly formed extrathyroidally, particularly in the liver, by enzymatic 5' deiodination of T4 (thyroxine). A reduction in the conversion of T4 to T3 results in a decrease in the T3 concentration. It occurs under the influence of medicaments such as propranolol, glucocorticoids or amiodarone and in severe non thyroidal illness (NTI), and is referred to as “low T3 syndrome”. The determination of T3 is utilized in the diagnosis of T3■hyperthyroidism, the detection of early stages of hyperthyroidism and for indicating a diagnosis of thyrotoxicosis factitia.

T4

The hormone thyroxine (T4) is the main product secreted by the thyroid gland and is an integral component of the hypothalamus anterior pituitary thyroid regulating system. The major part (> 99 %) of total thyroxine in serum is present in proteinbound form. As the concentrations of the transport proteins in serum are subject to exogenous and endogenous effects, the status of the binding proteins must also be taken into account in the assessment of the thyroid hormone concentration in serum. If this is ignored, changes in the binding proteins (e.g. due to estrogen containing preparations, during pregnancy or in the presence of a nephrotic syndrome etc.) can lead to erroneous assessments of the thyroid metabolic state.The determination of T4 can be utilized for the following indications: the detection of hyperthyroidism, the

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 12:18 PM
Sample ID : 1924056238
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range

detection of primary and secondary hypothyroidism, and the monitoring of TSH suppression therapy.

TSH

TSH is formed in specific basophil cells of the anterior pituitary and is subject to a circadian secretion sequence. The hypophyseal release of TSH (thyrotropic hormone) is the central regulating mechanism for the biological action of thyroid hormones.The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid.

Uric Acid, Serum

URIC ACID	3.00	mg/dL	3.5 - 7.2

Method : Uricase PAP

Creatinine, Serum

CREATININE	0.78	mg/dl	< 1.2

Method : Modified Jaffe kinetic.

END OF REPORT

Checked by
Barun Jana

Supratik Biswas
Dr. Supratik Biswas
MBBS, MD
Consultant Biochemist
Regn. No.: 64600 (WBMC)

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 12:37 PM
Sample ID : 1924056238
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
Glucose Fasting Plasma			
GLUCOSE FASTING PLASMA Method : Hexokinase	**137**	mg/dL	74 - 109
Lipid Profile			
TRIGLYCERIDES Method : Enzymatic Colorimetric Assay using GPO-POD	**327**	mg/dL	Normal : < 150 Borderline High : 150 - 199 High : 200 - 499 Very High : >= 500
CHOLESTEROL Method : Enzymatic Colorimetric Assay using CHOD-POD	221	mg/dl	Desirable : < 200 Borderline High : 200 - 240 High Risk : > 240
HDL CHOLESTEROL Method : Enzymatic Immunoinhibition	38	mg/dl	Low HDL : <40 High HDL : >= 60
LDL CHOLESTEROL Method : Enzymatic Selective Protection	123	mg/dl	Optimal : < 100 Above Optimal : 100 - 129 Borderline High : 130 - 159 High : 160 - 189 Very High : > 190
VLDL / CHOLESTEROL REMNANTS Method : Calculation	**60**	mg/dl	< 30
NON HDL CHOLESTEROL Method : Calculation	183	mg/dl	<130
TOTAL CHOLESTEROL / HDL CHOLESTEROL RATIO	**5.82**	Ratio	
LDL CHOLESTEROL / HDL CHOLESTEROL RATIO	**3.24**	Ratio	

Remark :

* National Cholesterol Education Programme Adult Treatment Panel III Guidelines (US)

Liver Function Test			
TOTAL BILIRUBIN Method : DPD	1.10	mg/dL	<1.2
CONJUGATED BILIRUBIN Method : DPD	**0.26**	mg/dl	< 0.2
UNCONJUGATED BILIRUBIN Method : Calculation	0.84	mg/dL	

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 12:37 PM
Sample ID : 1924056238
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
SGPT Method : IFCC (without pyridoxal phosphate activation)	47	U/L	< 50
SGOT Method : IFCC (without pyridoxal phosphate activation)	31	U/L	< 50
ALKALINE PHOSPHATASE Method : IFCC AMP Buffer	**148**	U/L	30 - 120
TOTAL PROTEIN Method : Biuret	8.05	g/dL	6.6 - 8.3
ALBUMIN Method : Bromocresol Green	4.81	g/dL	Adults: 3.5 - 5.2 Newborn (1–4 days): 2.8 - 4.4
GLOBULIN Method : Calculation	3.24	g/dL	1.80 - 3.60
A/G RATIO Method : Calculation	1.48		1.2 - 2
GAMMA-GLUTAMYL TRANSFERASE Method : IFCC	**74**	U/L	< 55
Total Proteins, Serum			
TOTAL PROTEIN Method : Biuret	8.05	g/dl	6.6 - 8.3
ALBUMIN Method : Bromocresol green	4.80	g/dl	Adults: 3.5 - 5.2 Newborn(0-4days): 2.8 - 4.4
GLOBULIN Method : Calculation	3.25	g/dl	1.8 - 3.6
A/G RATIO Method : Calculation	1.48		1.2 - 2.0

END OF REPORT

Checked by
Priya Manna

Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 12:48 PM
Receiving Time : 10/08/2024, 03:43 PM
Reporting Time : 10/08/2024, 06:38 PM
Sample ID : 1924056238P
Sample Type : Fluoride Plasma

Test Description	Value(s)	Unit(s)	Reference Range
Glucose Post Prandial Plasma			
GLUCOSE POST PRANDIAL PLASMA Method : Hexokinase	**211**	mg/dL	70 - 140

END OF REPORT

Checked By
Debolina Bhadra

Supratik Biswas
Dr.Supratik Biswas
MBBS, MD
Consultant Biochemist
Regn.No.: 64600 (WBMC)

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW
Optional ID : -
Age / Gender : 38 Years / Male
Collection Time : 10/08/2024, 09:11 a.m.
Mobile No. : 9182416764
Receiving Time : 10/08/2024, 11:09 a.m.
Patient ID : 113460
Reporting Time : 10/08/2024, 02:14 p.m.
Bill ID : 117196
Sample ID : 1924056238
Referral : DR SELF
Sample Type : Serum

Test Description	Value(s)	Unit(s)	Reference Range
Bun / Creatrnine Ratio			
BUN/Creatinine ratio Method : Calculation	12.5		12 - 20

END OF REPORT

Checked By
Rahul Mondal

Supratik Biswas
Dr.Supratik Biswas
MBBS, MD
Consultant Biochemist
Regn.No.: 64600 (WBMC)

Reported By : -

Registered By : BISWAJIT MUKHERJEE

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 01:54 PM
Sample ID : 1924056238
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
Complete Blood Count			
HAEMOGLOBIN	15.3	gm/dl	13 - 17
TOTAL LEUCOCYTE COUNT	6700	/cumm	4000 - 10000
HCT	46.4	Vol%	40 - 50
R B C	5.22	millions/cumm	4.5 - 5.5
M C V	88.9	Femtolitre(fl)	80 - 100
M C H	29.3	Picograms(pg)	27 - 31
M C H C	33.0	gm/dl	32 - 36
PLATELET COUNT	1,90,000	/cumm	150000 - 410000
DIFFERENTIAL COUNT			
Neutrophils	51	%	40 - 80
Lymphocytes	**44**	%	20 - 40
Monocytes	02	%	2 - 10
Eosinophils	03	%	1 - 6
Basophils	00	%	0 - 1
ESR	04	mm	< 50 years : <=10 51 - 60 years : <=12 61 - 70 years : <=14 > 70 years : <=30
Remarks	Normocytic Normochromic. Platelets adequate.		

Note

XN 1000, SYSMEX

METHOD : FLOWCYTOMETRY

ESR : AUTOMATED VESCUBE - 30 TOUCH

***Biological Reference Values Updated as per Dacie & Lewis 12th Edition**

END OF REPORT

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW

Age / Gender : 38 Years / Male

Mobile No. : 9182416764

Patient ID : 113460

Bill ID : 117196

Referral : DR SELF

Source : ALLIANCE & PROJECT

Optional ID : -

Collection Time : 10/08/2024, 09:11 AM

Receiving Time : 10/08/2024, 11:09 AM

Reporting Time : 10/08/2024, 01:54 PM

Sample ID : 1924056238

Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range

Checked by
Tamal Sarkar

Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

Patient Name : MR. UTTAM KUMAR SHAW
Age / Gender : 38 Years / Male
Mobile No. : 9182416764
Patient ID : 113460
Bill ID : 117196
Referral : DR SELF
Source : ALLIANCE & PROJECT

Optional ID : -
Collection Time : 10/08/2024, 09:11 AM
Receiving Time : 10/08/2024, 11:09 AM
Reporting Time : 10/08/2024, 02:18 PM
Sample ID : 1924056238
Sample Type : Edta Blood

Test Description	Value(s)	Unit(s)	Reference Range
Blood Group & RH Typing			
BLOOD GROUP	**"B"**		
RH TYPING	**POSITIVE**		

FORWARD & REVERSE BLOOD GROUPING,
GEL CARD BY BIO-RAD

END OF REPORT

Checked by
Rupam Chatterjee

Dr. Meenakshi Mohan
MD (Pathology)
Consultant Pathologist
Regn. No. : WBMC 54631

Reported By : -

Registered By : BISWAJIT MUKHERJEE

MC-2167

UTTAM KUMAR SHAW
ID: 117196

Male

38 Years

10.08.2024 9:39:50
PULSE DIAGNOSTICS PVT LTD.
60, DIAMOND HARBOUR ROAD
KOLKATA, 700008

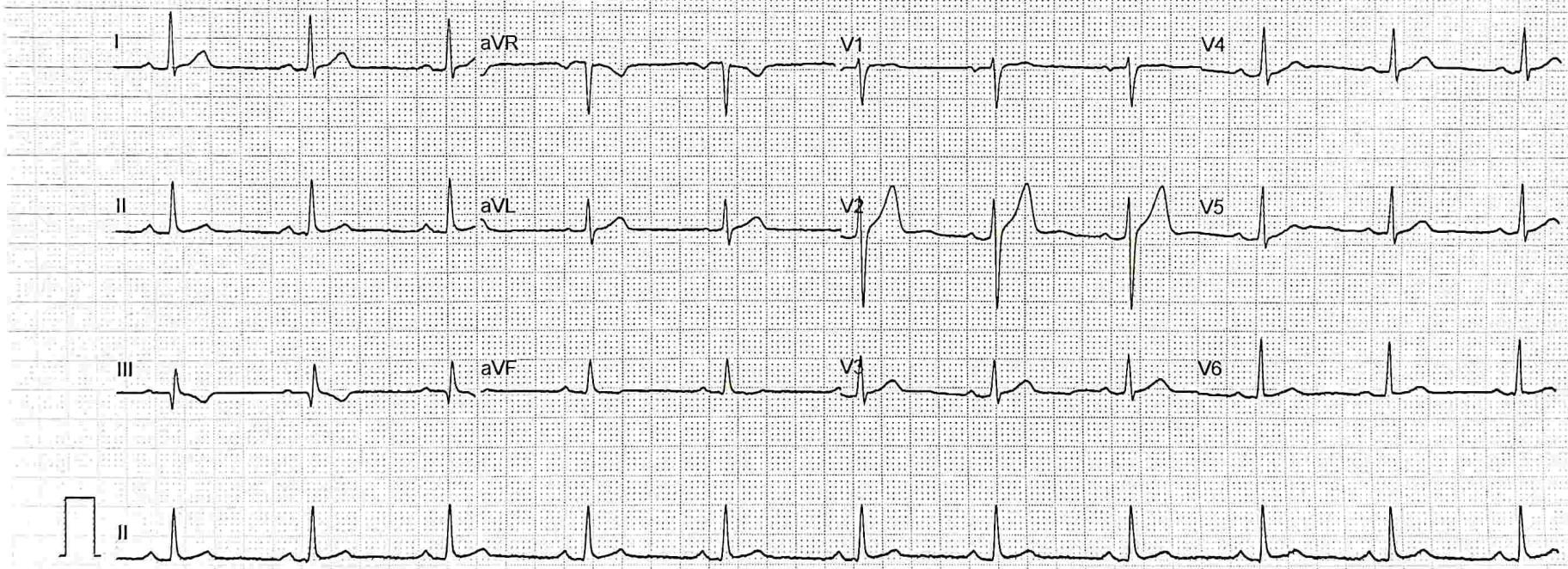
64 bpm
– / – mmHg

QRS :	76 ms
QT / QTcBaz :	348 / 359 ms
PR :	170 ms
P :	102 ms
RR / PP :	934 / 937 ms
P / QRS / T :	48 / 37 / 7 degrees

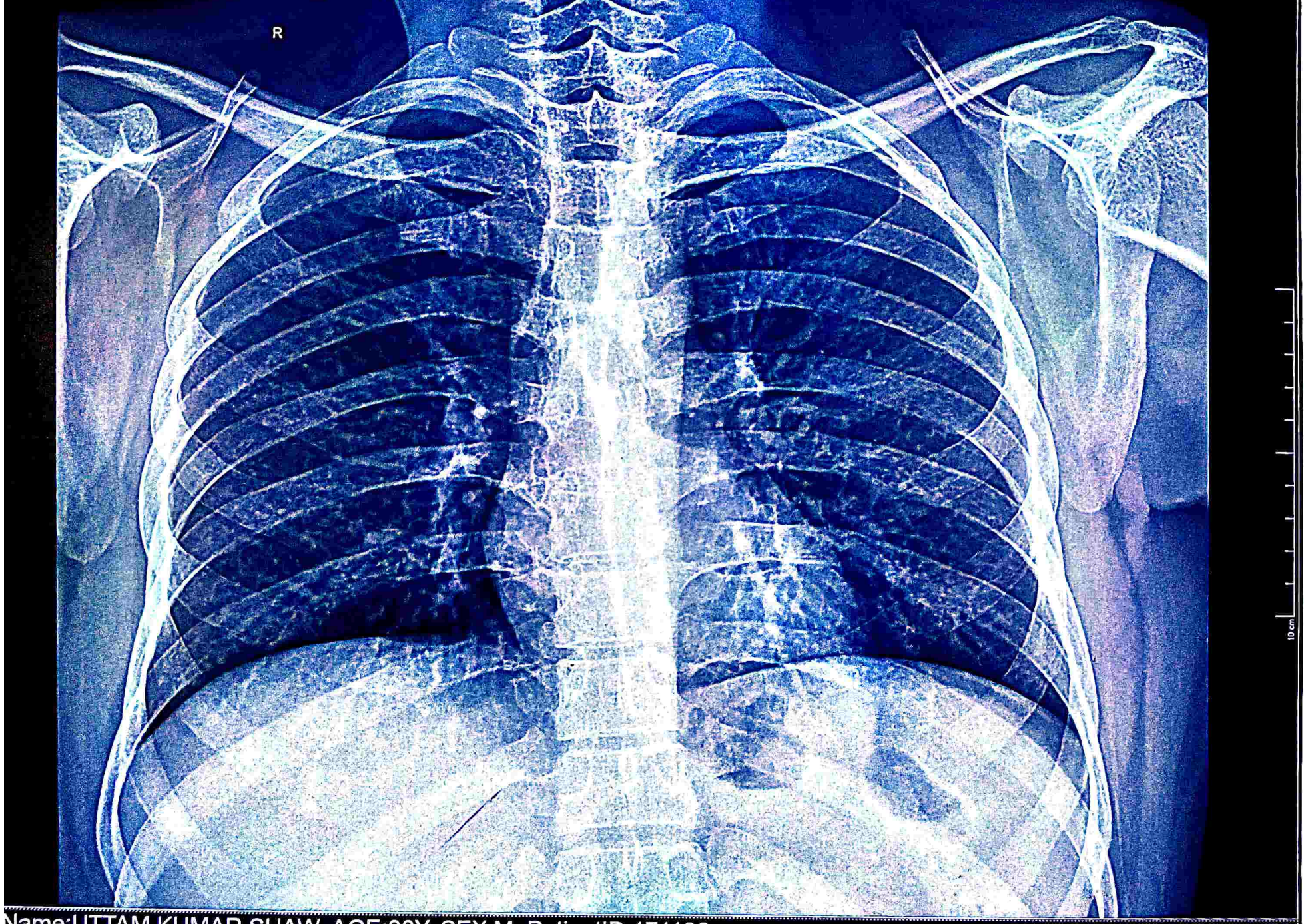
Normal sinus rhythm
~~Normal ECG~~

Technician:
Ordering Ph:
Referring Ph: self
Attending Ph:

DR. SIDDHARTHA GHOSH
M.D. (PHYSICIAN)
P.G.D.C.C. (Dip. Card)
WBMC ~~53897~~



GE MAC2000 1.1 12SL™ v241 25 mm/s 10 mm/mV ADS 0.56-20 Hz Unconfirmed 4x2.5x3_25_R1 1/1



Name:UTTAM KUMAR SHAW, AGE:38Y, SEX:M, PatientID:171196
DATE:2024-08-10, TIME:09:47:42
REF.:SELF
PULSE DIAGNOSTIC PVT LTD 60 D.H.ROAD KOL -700008,

Patient Name	**UTTAM KUMAR SHAW**	*Patient ID*	**171196**
Age/D.O.B	**38Y**	*Gender*	**M**
Ref Doctor	**SELF**	*Date*	**10 Aug 24**

X-RAY CHEST - PA

LUNG FIELDS:- Visualised lung fields are clear.
HILAR/MEDIASTINAL:- No hilar or mediastinal mass seen.
DOMES OF DIAPHRAGM:- Both domes of diaphragm are normal.
COSTOPHRENIC ANGLES:- Both costophrenic angles are clear.
CARDIAC SILHOUETTE:- Cardiac silhouette is within normal limits.
BONY THORAX:- Visualised bony thorax is normal..

Impression

No significant abnormality detected.

Reported By,

Dr. Farid Khan

MBBS, MD

Consultant Radiologist

MPMC - 23324