









H-2008-0017

Clinical Laboratory Services

Department of Haematology

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Registration No.

Episode No.

Specimen

: 3495646

Ward No.

Room No.

Location Type : Out Patient

Location : CENTRAL INVESTIGATION

: OP14543501

Collected On.

: 01 Feb 2025 11:09AM

CENTRE Referred By : DR. V. B. BHASIN

Lab Request No. : 1125023885

Received On

: 01 Feb 2025 01:21PM

Ext. Doctor

Reported On

: 01 Feb 2025 02:05PM

Released by : Mr. Piyush Negi

: Blood Printed On : 02 Feb 2025 07:07PM

Results Investigation

Units Bio.Ref.Interval Test Method

Type of Sample: - Citrated Blood

Prothrombin Time ACL TOP 750 Photo-Optical (Automated)

ACL TOP 750 -Test INR

Mean Normal(MNPT)

12.3 1.11 11.5

sec

ACL TOP 750

sec

(9.7 - 13.3)

Type of Sample: - Citrated Blood

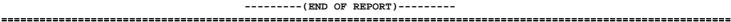
Photo-Optical (Automated)

Activated Partial Thromboplastin

Time (APTT)

ACL TOP 750 -Test 33.1 Mean Normal

sec 32.2 sec (26.4 - 38.0)



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H-2008-0017

Clinical Laboratory Services

Department of Biochemistry

Ward No.

Age/Sex. : MRS SONI CHOUBEY : 37 Yrs/Female

Registration : 3495646

No.

Lab Request No. : 9925029237 Room No.

Episode No. : OP14543501 Location Type : Out Patient

Collected On. Location : CENTRAL INVESTIGATION : 01 Feb 2025 11:09AM

CENTRE

Received On : 01 Feb 2025 01:34PM Referred By : DR. V. B. BHASIN Reported On : 01 Feb 2025 02:32PM Ext. Doctor

Specimen Released by : Dr Reetika Saini : Blood

Printed On : 02 Feb 2025 07:07PM

Bio.Ref.Interval Test Method Investigation Results Units

RENAL BIOCHEMICAL PROFILE - COMPLETE, PLASMA (NaF), SERUM

GLUCOSE RANDOM BUN CREATININE URIC ACID CALCIUM PHOSPHOROUS SODIUM POTASSIUM CHLORIDE BICARBONATE TOTAL PROTEIN ALBUMIN GLOBULIN A/G RATIO ALKALINE PHOSPHATASE	102.00 9.17 0.64 8.99 7.90 2.52 139.00 4.01 111.20 22.00 7.57 4.32 3.25 1.33 74.00	mg/dL mg/dL mg/dL mg/dL mg/dL mmol/L mmol/L mmol/L gm/dL gm/dL gm/dL	(70.00-160.00) (7.00-18.70) (0.57-1.11) (2.60-6.00) (8.40-10.20) (2.30-4.70) (136.00-146.00) (3.50-5.10) (98.00-113.00) (20.00-31.00) (6.00-8.30) (3.50-5.20) (1.80-3.60) (2:1)	Hexokinase Urease UV Jaffe Kinetic (IDMS) Uricase Assay Arsenazo-3 Phosphomolybdate UV ISE (Indirect) ISE (Indirect) ISE (Indirect) PEP Carboxylase, Enzymatic Biuret BCG Calculated Calculated Enzymatic Kinetic (PNP)
ALKALINE PHOSPHATASE TOTAL CHOLESTEROL	74.00 188.00	IU/L mg/dL	(40.00-150.00) (<190.00)	Enzymatic Kinetic (PNP) CHOD POD
		J		

COMMENTS:

A raised Blood Urea Nitrogen (BUN) can be caused by several different conditions, mostly involving the kidneys. Serum creatinine, in conjunction with the BUN, helps to differentiate between these conditions. A normal creatinine does not exclude renal disease as a loss of 50% of renal function is required to increase the creatinine from 1.0 to 2.0 mg/dL.

A high serum uric acid is indicative of gout or renal failure, but it can be affected by several other factors, e.g. diet, drug or alcohol intake, or other disease conditions.

Calcium and phosphorous are major minerals of the body which are involved in the normal functioning of bones and neuromuscular junctions, and in the formation of renal calculi. Sodium and potassium are the major electrolytes of our body, which maintain reciprocal concentrations in the intracellular and the extracellular compartments. In renal failure, calcium and protein levels may decrease, and potassium, phosphorus and cholesterol levels may increase.

Bicarbonate measurements are used in the diagnosis and treatment of disorders associated with changes in body acid - base balance.

-----(END OF REPORT)-----

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H-2008-0017

Clinical Laboratory Services

Department of Biochemistry

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Registration

: 3495646

Ward No.

No.

Lab Request No. : 9925029237

Room No.

Location Type : Out Patient

Episode No. Location

: OP14543501 : CENTRAL INVESTIGATION

Collected On.

: 01 Feb 2025 11:09AM

Referred By

CENTRE

Ext. Doctor

: DR. V. B. BHASIN Received On

: 01 Feb 2025 01:34PM : 01 Feb 2025 02:49PM

Specimen : Blood Reported On Released by

: Dr Reetika Saini

Printed On : 02 Feb 2025 07:07PM

Investigation Results

Units Bio.Ref.Interval

Test Method

VITAMIN B12, SERUM

518.00 pg/mL

(197.00-771.00) ECLIA

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H-2008-0017

Clinical Laboratory Services

Department of Biochemistry

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Registration : 3495646

No.

Room No.

Lab Request No. : 9925029237 Episode No.

: OP14543501 Location Type : Out Patient

Ward No.

Location : CENTRAL INVESTIGATION

Collected On. : 01 Feb 2025 11:09AM

CENTRE

Referred By : DR. V. B. BHASIN Ext. Doctor

Received On : 01 Feb 2025 01:34PM Reported On : 01 Feb 2025 03:48PM

Specimen : Blood

Released by : Dr Reetika Saini

Printed On : 02 Feb 2025 07:07PM

Units Bio.Ref.Interval Test Method Investigation Results

GLYCOSYLATED Hb (HbA1c), WHOLE BLOOD (EDTA)

GLYCOSYLATED Hb. 5.6 용 (<5.7)HPLC(NGSP certified)

(HbA1c)

Interpretation as per American Diabetes Association (ADA 2023)

Glycosylated hemoglobin (HbA1c) estimations are primarily required for the diagnosis and management of diabetes mellitus.

HbA1c reflects the average blood glucose over the preceding 6-8 weeks and is a better indicator of glycemic control for patients of diabetes mellitus on medication.

HbA1c Criteria	$\mathtt{HbA1c}$	in '
Non diabetics adults(>=18 years)	4.0 -	5.6
Prediabetes	5.7 -	6.4
Diabetes	>=	6.5
Goal of therapy	<	7.0

Any condition that shortens erythrocyte survival such as sickle cell disease, pregnancy (second and third trimesters), hemodialysis, recent blood loss or transfusion or erythropoietin will falsely lower HbAlc results regardless of the assay method.

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Clinical Laboratory Services

Department of Nuclear Medicine

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Ward No. Registration : 3495646

No.

Lab Request No. : 1325004150 Room No.

Episode No. : OP14543501 Location Type : Out Patient

Collected On. : 01 Feb 2025 11:09AM : CENTRAL INVESTIGATION

CENTRE

Referred By : DR. V. B. BHASIN Received On : 01 Feb 2025 02:29PM

Ext. Doctor Reported On : 01 Feb 2025 03:34PM

Specimen : Blood Released by : Dr. Ritu Verma

Printed On : 02 Feb 2025 07:07PM

Investigation Results Units Bio.Ref.Interval Test Method

PARATHORMONE LEVEL : BY CLIA METHOD

PARATHORMONE LEVEL 225.100 pg/mL (12.000-72.000)

(INTACT MOLECULE)

-----(END OF REPORT)-----______

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Clinical Laboratory Services

Department of Nuclear Medicine

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Registration : 3495646

No.

Episode No.

Referred By

Ext. Doctor

Ward No. Room No.

Lab Request No. : 1325004150

: OP14543501 Location Type

: CENTRAL INVESTIGATION

Collected On.

: 01 Feb 2025 11:09AM

: Out Patient

CENTRE

: DR. V. B. BHASIN

Received On : 01 Feb 2025 02:29PM

Reported On

: 01 Feb 2025 03:41PM

Specimen : Blood Released by

: Dr. Ritu Verma

Printed On : 02 Feb 2025 07:07PM

Investigation Results

Units Bio.Ref.Interval

Test Method

25 OH VITAMIN D (CLIA METHOD)

25 OH VITAMIN D 10.700 ng/mL

Recommended reference range as per :

Evaluation, Treatment, and Prevention of Vitamin D Deficiency: An Endocrine Society Clinical Practice Guideline.

: < 20 Deficient ng/mL Insufficient : 21 - 29 ng/mL Sufficient : > 30 ng/mL Toxic : > 150 ng/mL

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Clinical Laboratory Services

Department of Nuclear Medicine

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Registration : 3495646

Referred By

Ext. Doctor

Lab Request No. : 1325004150

Episode No. : OP14543501 Location Type

: Out Patient

CENTRE

Collected On. : 01 Feb 2025 11:09AM : CENTRAL INVESTIGATION

Ward No.

Room No.

: DR. V. B. BHASIN Received On : 01 Feb 2025 02:29PM Reported On : 01 Feb 2025 03:42PM

Specimen : Blood Released by : Dr. Ritu Verma

Printed On : 02 Feb 2025 07:07PM

Investigation Results Units Bio.Ref.Interval Test Method

CLIA METHOD

uIU/ml (0.30 - 4.00)Thyroid Stimulating Hormone 2.06

-----(END OF REPORT)-----______

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H-2008-0017

Clinical Laboratory Services

Institute of Clinical Microbiology and Immunology

: MRS SONI CHOUBEY Age/Sex. : 37 Yrs/Female

Registration : 3495646

No.

Location

Ward No.

Lab Request No. : 5525011503 Room No.

Episode No. : OP14543501 Location Type : Out Patient

: CENTRAL INVESTIGATION CENTRE

Collected On. : 01 Feb 2025 11:09AM

Referred By : DR. V. B. BHASIN Received On : 01 Feb 2025 03:10PM Ext. Doctor Reported On : 02 Feb 2025 09:53AM Specimen : Blood Released by : Dr. Anuj Pathak

Printed On : 02 Feb 2025 07:07PM

Investigation Results Units Bio.Ref.Interval Test Method

HEPATITIS C VIRUS ANTIBODY

(Immuno Assay)

RESULT: NEGATIVE

Comments:

This assay detects antibodies to structural and non structural proteins of HCV. However, this assay can be negative in very early stage of the disease.

NOTE:

Each run of our lab is evaluated for its cut off keeping in view the coefficients of inter and intra assay variation and is reported accordingly.

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