Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
HAEMATOLOGY				
PHC PACKAGE 8 - I2H, Men				
Complete Blood count				
EDTA BLOOD	Total WBC count	7280	cells/cumm	4500 - 11000 (Fluorescent Flow Cytometry)
DIFFERENTIAL COUNT.				
EDTA BLOOD	NEUTROPHILS	49.70	%	40.00 - 70.00 (Fluorescent Flow Cytometry)
EDTA BLOOD	LYMPHOCYTES	43.70	%	20.00 - 45.00 (Fluorescent Flow Cytometry)
EDTA BLOOD	EOSINOPHILS	1.50	%	1.00 - 7.00 (Fluorescent Flow Cytometry)
EDTA BLOOD	MONOCYTES	4.30	%	2 - 7 (Fluorescent Flow Cytometry)
EDTA BLOOD	BASOPHILS	0.80	%	0.00 - 1.00 (Fluorescent Flow Cytometry)
EDTA BLOOD	Haemoglobin	**13.4**	g/dL	14.0 - 18.0 (Non-Cyanide Haemoglobin Analysis)
EDTA BLOOD	PCV	42.7	%	40.0 - 54.0 (Electrical Impedance (RBC pulse height detection))
EDTA BLOOD	Red Blood Cell (RBC) Count	4.58	million/cumm	4.50 - 6.20 (Electrical Impedance)
EDTA BLOOD	MCV	93.2	fl	82.0 - 98.0 (Calculated)
EDTA BLOOD	MCH	29.3	pg	26.0 - 34.0 (Calculated)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : 47000343
Branch : MUMBAI
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : 4700117272

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
EDTA BLOOD	MCHC	31.4	g/dL	30.0 - 35.0 (Calculated)
EDTA BLOOD	Platelet count	282000	cells/cumm	150000 - 400000 (Electrical Impedance)
EDTA BLOOD	ESR	**12**	mm	0 - 10 (Westergran Method)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
BIOCHEMISTRY				
PHC PACKAGE 8 - I2H, Men				
Fluoride	Glucose, Fasting	**73.5**	mg/dL	Healthy Adult or children : less than 100 Pre diabetic : 100 – 125 Diabetic : 126 or above (Colorimetric : GOD - PAP)
HbA1c				
EDTA BLOOD	Glycosylated Haemoglobin (HbA1c)	5.5	%	Adult Normal : < 5.7 Prediabetic : 5.7-6.4 Diabetic : >= 6.5 A1C Goals Reasonable Goal : <7 More stringent goal : <6.5 Less stringent goal : <8.0 (ADA, 2019) (immunoturbidimetric) (Immunoturbidimetry)
EDTA BLOOD	Estimated Average Glucose (eAG)	111.2	mg/dL	(Calculation)
Serum	BUN	6.6	mg/dL	6.9-18.0 (Enzymatic)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Creatinine.	0.71	mg/dL	Cord : 0.6-1.2 Newborn 1-4 days : 0.3 - 1.0 Infant : 0.2 - 0.4 Child : 0.3 - 0.7 Adolescent: 0.5 - 1.0 18 - 60 yr Male : 0.9 - 1.3 Female : 0.6 - 1.1 60 - 90 yr Male : 0.8 - 1.3 Female : 0.6 - 1.2 >90 yr Male : 1.0 - 1.7 Female : 0.6 - 1.3 (Colorimetric : Alkaline picrate)
Serum	Uric Acid.	6.70	mg/dL	Child : 2.0 - 5.0 Adult Male : 3.5 - 7.2 Female : 2.6 - 6.0 (Uricase/peroxidase)
Lipid Profile				
Serum	Cholesterol, Total	**217.2**	mg/dL	Adult (NCEP ATP-III) Desirable : <200 Borderline high : 200 - 239 High : >239 (Enzymatic : CHOD-PAP)

Note: Above Biological interval is based on 9 to 12 hours fasting.

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Triglycerides	**193.40**	mg/dL	Adult (NCEP ATP-III) Normal : <150 High : 150 - 199 Hypertriclyceridemic: 200 - 499 Very High : >499 (Glycerol-3-phosphate oxidase-PAP)
Note: Above Biological interval is based on 9 to 12 hours fasting				
Serum	Cholesterol, HDL	45.4	mg/dL	Adult (NCEP ATP-III) Low : < 40 High : >=60 (Direct)
Serum	Cholesterol, LDL	**133.1**	mg/dL	Optimal : <100 Near or above optimal : 100 - 129 Borderline high : 130 - 159 High : 160 - 189 Very high : >190. (Calculation)
Serum	Cholesterol, VLDL	38.7	mg/dL	Less than 30 (NCEP ATP-III) (Calculation)
Serum	Cholesterol/HDL Ratio	4.8		Castelli's Risk Index -I Ideal : <3.5 Good: 3.5-5.0 High: >=5 (Calculation)
Serum	LDL/HDL Ratio	2.9	Ratio	Castelli's Risk Index -II Ideal : <2.0 Good: 2.0-5.0 High: >=5 (Calculation)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Non - HDL Cholesterol	171.8	mg/dL	Children Acceptable: <120 Borderline: 120-144 Abnormal : >=145 Adult (NCEP ATP-III) Optimal : <130 Near or above optimal : 130-159 Borderline high : 160-189 High : 190-219 Very high : >220 (Calculation)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
BIOCHEMISTRY				
PHC PACKAGE 8 - I2H, Men				
Liver Function test				
Serum	Bilirubin, Total	0.45	mg/dL	Premature: Cord : < 2.0 0 - 1 day :<8.0 1 - 2 days : <12.0 3 - 5 days : <16.0 Full term: Cord : < 2.0 0 - 1 day : 1.4 - 8.7 1 - 2 days : 3.4 - 11.5 3 - 5 days : 1.5 - 12 >5 days - 60y : 0.3 - 1.2 60 - 90 y : 0.2 - 1.1 >90y : 0.2 - 0.9 (Sulphanilic Acid Diazotized/Caffeine Benzoate)
Serum	Bilirubin, Direct	0.19	mg/dL	0.0 - 0.2 (Colorimetric : Diazo)
Serum	Bilirubin, Indirect	0.26	mg/dL	0.1 - 1.0 (Calculated)
TOTAL PROTEIN & A/G RATIO				
Serum	Total Protein.	7.46	g/dL	Adult : 6.6 - 8.7 (Colorimetric-Biuret)
Serum	Albumin.	4.28	g/dL	Adult - 3.5 - 5.2 (Colorimetric: Bromocresol Green)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : 47000343
Branch : MUMBAI
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : 4700117272

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Globulin.	3.18	g/dL	2.0-3.9 (Calculated)
Serum	Albumin/Globulin	1.3	Ratio	(Calculated)
Serum	Aspartate aminotransferase (AST/SGOT)	21.00	U/L	Adult Male : <35 Female: <31 (UV without pyridoxal phosphate)
Serum	Alanine aminotransferase (ALT/SGPT)	30.50	U/L	Male : <41 Female: <33 (UV without pyridoxal phosphate)
Serum	Alkaline phosphatase	100.4	U/L	Children : 47 - 406 (Age and gender dependent) Adults : 30 - 120 (Colorimetric : p-Nitrophenyl Phosphate-AMP Buffer)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
BIOCHEMISTRY				
PHC PACKAGE 8 - I2H, Men				
Serum	Calcium	9.8	mg/dL	NEWBORN: 8.4 - 10.6 Adults : 8.6 - 10.3 (End point : Arsenazo III)
Serum	Phosphorous	4.30	mg/dL	Adults : 2.5 - 4.5 (Phosphomolybdate complex)
Transferrin Saturation				
Serum	IRON	92.3	ug/dl	Adults : 33 -193 (Colorimetric)
Serum	UIBC	247.2	ug/dl	Females: 135 - 392 Males : 125 - 345 (FerroZine)
Serum	TIBC	339.5	ug/dl	Infant : 100 - 400 Adult : 250 - 425 (Calculation)
Serum	TRANSFERRIN SATURATION	27.2	%	Men : 20 - 50 Women: 15 - 50 (Calculation)
Microalbumin/Creatinine , Urine				
URINE	Spot Microalbumin	7.7	mg/L	(Immunoturbidimetry)
URINE	Spot Creatinine	264.3	mg/dL	Male : 39 - 259 Female: 28 - 217 (Colorimetric : Alkaline picrate)
URINE	Microalbumin/Creatinine	2.9	mg Alb/g Creat	Non exercised state Adults : <20 Children (3-5 yrs): <37 (Calculated)

Verified By
Mr.Tushar

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method

Note:
To detect early kidney disease in those with diabetes or other risk factors such as hypertension, heart failure, cirrhosis, or systemic lupus erythematosus (SLE). According to the American Diabetes Association and National Kidney Foundation, those with type 1 diabetes should get tested starting 5 years after onset of the disease and then annually, and with type 2 diabetes should get tested starting at the time of diagnosis and then annually. Patients with hypertension may be tested at regular intervals, with the frequency determined by their healthcare practitioner. Persistent increased protein in the urine (two positive tests over 3 - 6 months) is the principal marker of kidney damage, acting as an early and sensitive marker in many types of kidney disease.

ELECTROLYTES

Serum	Sodium.	139	mmol/L	New Born : 133 - 146 Infant : 139 - 146 Child : 138 - 145 Adult : 136 - 145 >90 years: 132 - 146 (Ion Selective Electrode)
Serum	Potassium.	4.3	mmol/L	New Born : 3.7 - 5.9 Infant : 4.1 - 5.3 Child : 3.4 - 4.7 Adults : 3.5 - 5.1 (Ion Selective Electrode)
Serum	Chloride.	99	mmol/L	Cord : 96 - 104 Premature : 95 - 110 0 - 30 days: 98 - 113 Adult : 98 - 107 >90 years : 98 - 111 (Ion Selective Electrode)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : 4700117272

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Lactate Dehydrogenase (LDH)	173	U/L	Females : 135 - 214 Males : 135 - 225 Children : 120 - 300 Newborns : 225 - 600 (Colorimetric : Lactate - Pyruvate)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
IMMUNOLOGY				
PHC PACKAGE 8 - I2H, Men				
FREE TFT				
Serum	FREE T3	3.17	pg/ml	2.00 - 4.40 (ECLIA)
Serum	FREE T4	1.15	ng/dl	0.93 - 1.70 (ECLIA)
Serum	TSH	1.380	uIU/ml	0.270 - 5.350 (ECLIA)

Note: TSH has a diurnal rhythm, peaks at 2.00-4.00 am and has lowest level at 5.00-6.00 pm with ultradian variation. Hence thyroid test is only a snapshot of what is occurring within a dynamic system and for treatment purpose, the results should be accessed in conjugation with patient medical history, clinical examination & other tests/finding for confirmation. Many multivitamins (such as Vit B7), supplements (especially hair, skin, and nail) and over-the-counter and prescription medications may affect thyroid test results, and their use should be discussed with the healthcare practitioner prior to testing.
When a high serum TSH concentration and normal free T4 is found, repeat measurement 3-6 months later along with thyroid antibodies after excluding nonthyroidal illness and drug interference is recommended.

Serum	25 Hydroxyvitamin D	**18.6**	ng/ml	Deficiency : <= 20 Insufficiency: 21 - 29 Sufficiency : >= 30 (ECLIA)

Comments : Vitamin D is a fat-soluble steroid hormone precursor that is mainly produced in the skin by exposure to sunlight. Vitamin D is biologically inert and must undergo two successive hydroxylations in the liver and kidney to become the biologically active 1,25 - dihydroxyvitamin D. It is commonly agreed that 25-hydroxyvitamin D is the metabolite to determine the overall vitamin D status as it is the major storage form of vitamin D in the human body. This primary circulating form of vitamin D is present human body with levels approximately 1000 fold greater than the circulating 1,25-dihydroxyvitamin D. The half-life of circulating 25-hydroxyvitamin D is 2-3 weeks.
Vitamin D is essential for : Bone health. In children, severe deficiency leads to bone-malformation, known as rickets. Milder degrees of insufficiency are believed to cause reduced efficiency in the utilization of dietary calcium.
Vitamin D deficiency causes : Muscle weakness in elderly, the risk of falling has been attributed to the effect of vitamin D on muscle function. Vitamin D deficiency is a common cause of secondary hyperparathyroidism. Elevations of PTH levels, especially in elderly vitamin D deficient adults can result in osteomalacia, increased bone turnover, reduced bone mass and risk of bone fractures. Low vitamin D (25-OH) concentrations are also associated with lower bone mineral density.
The results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

Serum	VITAMIN B 12	398	pg/ml	197 - 771 (ECLIA)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
	Note: Vitamin B12 or cyanocobalamin, is a complex corrinoid compound found exclusively from animal dietary sources, such as meat, eggs and milk. It is critical in normal DNA synthesis, which in turn affects erythrocyte maturation and in the formation of myelin sheath. Vitamin-B12 is used to find out neurological abnormalities and impaired DNA synthesis associated with macrocytic anemias. The test results should always be assessed in conjunction with the patients medical history, clinical examination and other findings.			
Serum	FERRITIN	56.6	ng/ml	New born : 25 - 200 1 month : 200 - 600 2-5 months: 50 - 200 6 months - 15y : 7 - 140 Adult Male : 20-250 Female: 10-120 (ECLIA)
Serum	INSULIN (F)	18.88	uIU/ml	Fasting: 2.6 – 24.9 (ECLIA)
	Determination of insulin is utilized in the diagnosis and therapy of various disorders of carbohydrate metabolism, including diabetes mellitus and hypoglycemia. Elevated levels: Acromegaly, Cushing syndrome, Use of corticosteroids, levodopa, oral contraceptives, Fructose or galactose intolerance, Insulinomas, Obesity and Insulin resistance. Decreased levels: Diabetes, Hypopituitarism and Pancreatic diseases. Patients treated with bovine, porcine or human insulin sometimes contain anti-insulin antibodies which can affect the test result. Samples should not be taken from patients receiving therapy with Vit B7 doses (i.e. > 5 mg/day) until at least 8 hours following the last administration. For diagnostic purposes, Insulin levels must be evaluated in context with the patient's medical history, clinical examination and other findings.			
Serum	PSA	0.541	ng/ml	< 4.0 (ELFA)
	This assay, a quantitative in vitro diagnostic test for total (free + complexed) prostate-specific antigen (tPSA) in human serum and plasma, is indicated for the measurement of total PSA in conjunction with digital rectal examination (DRE) as an aid in the detection of prostate cancer in men aged 50 years or older. Prostate biopsy is required for diagnosis of prostate cancer. The test is further indicated for serial measurement of tPSA to aid in the management of cancer patients. The PSA test may give false-positive or false-negative results due to various factors. Rigorous physical activity affecting the prostate, such as bicycle riding, may cause a temporary rise in PSA level. Ejaculation within 24 hours of testing can be associated with elevated PSA levels and should be avoided. Large doses of some chemotherapeutic drugs, such as cyclophosphamide and methotrexate, may increase or decrease PSA levels. An inflammation or trauma of the prostate (e.g. in cases of urinary retention or following rectal examination, cystoscopy, coloscopy, transurethral biopsy, laser treatment or ergometry) can lead to PSA elevations of varying duration and magnitude.			
Serum	FOLIC ACID	6.7	ng/ml	Male : 4.5 - 32.2 Female : 4.8 - 37.3 (CMIA)

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**
Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method

Comments:- Folic acid, also known as folates, are class of vitamin compounds, essential for nucleic acid and mitochondrial protein synthesis, amino acid metabolism and aids in rapid cell division and growth. Deficiency seen in pregnancy, low dietary intake, macrocytic and megaloblastic anaemia, drugs (phenytoin, methotrexate,sulphasalazine, triamterene, pyremethamine, trimethoprim-sulphamethoxazole, barbiturates and oral contraceptives), chronic alcoholism, Crohn's disease, Celiac disease, malabsorption syndromes, ileo-jejunal surgeries. Deficiency is also associated with neural tube defects in developing embryo. Low serum folate levels reflect the first stage of negative folate balance. Low RBC folate reflects second stage of negative folate balance and more closely correlates with tissue levels and megaloblastic anaemia.

Verified By
Mr.S.Eswaran

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
SEROLOGY				
PHC PACKAGE 8 - I2H, Men				
Serum	ANTI HBs	<2.0	uIU/ml	<10.0 NON IMMUNE (CMIA)

Verified By
Mr.Tushar

Dr.T.Amalarajasundari
DEPARTMENT INCHARGE

Bioline Laboratory
No-1,349, Business Point
Opp to WEA Metro Station
Andheri East, Mumbai - 400 069
Ph : 022-49761699
E-mail : info@biolinelab.com

SID No : **47000343**
Branch : **MUMBAI**
Mr. UTSAV PAREKH - 280140
Age / Sex : 22 Y / Male
Ref. By : **I2H - MUMBAI**

Patient ID : **4700117272**

Collected Date : 03/04/2022 / 14:43
Received Date : 03/04/2022 / 14:52
Reported Date : 03/04/2022 / 17:30

Final Test Report

Specimen	Test Name	Result	Units	Reference Range / Method
CLINICAL PATHOLOGY				
PHC PACKAGE 8 - I2H, Men				
Urine complete analysis				
URINE	COLOUR	Yellow		(Macroscopic)
URINE	SP. GRAVITY	1.025		1.016 - 1.022 (Reflectance photometry)
URINE	pH	5.0		4.8 - 7.4 (Reflectance photometry)
URINE	PROTEIN.	Not present		Not Present. (Reflectance photometry)
URINE	GLUCOSE	Not present		Not Present (Reflectance photometry)
URINE	BILIRUBIN	Not Present		Not Present (Reflectance photometry)
URINE	UROBILINOGEN	Normal		Within normal limits (Reflectance photometry)
URINE	KETONES	Not present		Not Present (Reflectance photometry)
URINE	NITRITES	Negative		Negative (Reflectance photometry)
URINE	LEUCOCYTES	1-2	/hpf	3 - 5 (Microscopic)
URINE	RBCs	Not Present	/hpf	Occasional (Microscopic)
URINE	EPITHELIAL CELLS	Occasional	/hpf	Few (Microscopic)
URINE	CAST	Not Present	/hpf	Not present (Microscopic)
URINE	CRYSTALS	Not Present	/hpf	Not present (Microscopic)

Verified By
Dr.Nelly Angom MBBS., DCP.

Dr.Nelly Angom MBBS., DCP.
Consultant Pathologist

---------- End of the Report ----------