

**Registration Id**: 258319049

Patient Name : Mr. Vijendra Aswal

**Referred By** : CITI CORP

Registration Date/Time Collection Date / Time

Reporting Date / Time

Age /Sex

: 13/02/2018 / 09:17AM : 13/2/2018 / 09:56 AM

:13/02/2018 / 12:05PM :25 Years / Male

| Investigation                                                   |     | Patients Value |      |                        | Reference      |  |
|-----------------------------------------------------------------|-----|----------------|------|------------------------|----------------|--|
|                                                                 | Low | Normal         | High |                        |                |  |
| mple Type: SERUM  Total Proteins  Method: Biuret)               |     | 7.42<br>4.57   |      | 6.3 - 8.4<br>3.8 - 5.0 | gm/dl<br>gm/dl |  |
| Albumin Method: Bromocresol Green) Globulin Method: Calculated) |     | 2.85           |      | 2.3 - 3.5              | gm/dl          |  |
| A/G Ratio Method : Calculated)                                  |     | 1.60           |      | 1.10 - 2.20            |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |
|                                                                 |     |                |      |                        |                |  |

NOTE: This is Electronically generated report. Signature is not required.

Page 1 of 1



RAHUL D Verified By