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| | | | |
|--------------|---------------------|---------------------|-----------------------|
| Patient Name | : Ms.BIMLA JANDWANI | Barcode | : F00517271 |
| Age/Gender | : 63 Y 0 M 1 D/F | Sample Collected On | : 19/Nov/2020 08:30AM |
| Order Id | : 6596760 | Sample Received On | : 19/Nov/2020 02:40PM |
| Referred By | : | Report Generated On | : 19/Nov/2020 03:40PM |
| Sample Type | : NAF PLASMA | Sample Temperature | : Maintained |

DEPARTMENT OF BIOCHEMISTRY
ADVANCED FULL BODY CHECKUP

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

GLUCOSE, FASTING , NAF PLASMA

| | | | | |
|------------------|----|-------|----------|-----------|
| GLUCOSE, FASTING | 97 | mg/dL | 70 - 100 | GOD - POD |
|------------------|----|-------|----------|-----------|

Americal Diabetes Association (ADA) guideliness Blood Sugar Levels for diagnosing Diabetes and Prediabetes

| Condition | Fasting Blood Glucose |
|--------------|-----------------------|
| Normal | <100 |
| Pre-Diabetes | 100-125 |
| Diabetes | More than 126* |

* A confirmatory test of either a fasting blood sugar, OGTT or random blood sugar with symptoms must be done on another day (Except in the case of unequivocal hyperglycemia with metabloic decompensation)

*Atleast 8-10 hours fasting is mandatory for Fasting Blood Glucose/Sugar. If not, values might fluctuate.

Saakshi
DR. SAAKSHI MITTAL
MD PATHOLOGY
CONSULTANT PATHOLOGIST



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| Referred By | : | Report Generated On | : 19/Nov/2020 03:40PM |
| Sample Type | : SERUM | Sample Temperature | : Maintained |

DEPARTMENT OF BIOCHEMISTRY
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| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|--------|-------|--|-------------|
| LIPID PROFILE (7 PARAMETERS) , <i>SERUM</i> | | | | |
| TOTAL CHOLESTEROL | 161 | mg/dL | Desirable:<200 Borderline High:200-239 High:>240 | CHE/CHO/POD |
| TRIGLYCERIDES | 103 | mg/dL | Normal:<150 Borderline High:151-199 High:200-499 Very High:>500 | Enzymatic |
| HDL CHOLESTEROL | 52 | mg/dL | High (Desirable):>60 Acceptable:40-59 Low:<39 | CHE/CHO/POD |
| NON-HDL CHOLESTEROL | 109.00 | mg/dl | Optimal:<130 Near&Above optimal: 131-159 Borderline High:160-189 High: 190-219 Very high: >220 | Calculated |
| LDL CHOLESTEROL | 88.4 | mg/dL | Optimal:<100 Near Optimal:101-129 Borderline High:130-159 High:160-189 Very High:>190 | Calculated |
| VLDL CHOLESTEROL | 20.6 | mg/dL | <30 | Calculated |
| CHOL / HDL RATIO | 3.10 | Ratio | 0-4.97 | Calculated |

General Information's: LDL & VLDL are calculated values by using Friedewald's equation. The value of LDL and VLDL will not be reported in the following circumstances as the value should not be considered/used in such cases as per the limitation of Friedewald's equation. A) When chylomicrons are present, B) When plasma/serum triglyceride (TGL) concentration exceeds 400 mg/dl, C) In patients with dysbetalipoproteinemia (type III lipoproteinemia) Also, If TGL value exceeds 400 mg/dl it is suggested to go for Direct LDL method for getting an actual value and for further evaluation. *REFERENCE RANGES AS PER NCEP ATP III GUIDELINES: *10-12 hours fasting is mandatory for lipid parameters. If not, values might fluctuate.

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|--|--------|-------|--------------------|----------------|
| RENAL PROFILE (6 PARAMETERS) , <i>SERUM</i> | | | | |
| UREA | 21.00 | mg/dL | 19.0-43.0 | Urease |
| BLOOD UREA NITROGEN | 9.8 | mg/dL | 7.0 - 17.0 | Calculated |
| CREATININE | 0.60 | mg/dL | 0.52 - 1.04 | Amidohydrolase |
| UREA/CREATININE RATIO | 35.00 | Ratio | | Calculated |
| BUN / CREATININE RATIO | 16.33 | Ratio | | Calculated |
| URIC ACID | 3.60 | mg/dL | 2.5-6.2 | Uricase |

General Information:

Preanalytical issues such as high-protein intake and increased muscle bulk may lead to elevated creatinine levels not representative of actual renal function in an individual. Likewise, serum creatinine as a marker of renal function is often unreliable in the those with decreased muscle bulk such as the elderly, amputees and is individuals affected by muscular dystrophy.

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DEPARTMENT OF BIOCHEMISTRY
ADVANCED FULL BODY CHECKUP

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|---------------|-------|--------------------|--------------------|
| LIVER FUNCTION TEST (11 PARAMETERS) , <i>SERUM</i> | | | | |
| BILIRUBIN-TOTAL | 0.30 | mg/dL | 0.20 - 1.20 | Diazonium salt |
| BILIRUBIN-DIRECT | 0.20 | mg/dL | 0.0-0.3 | Spectrophotometric |
| BILIRUBIN-INDIRECT | 0.10 | mg/dL | 0.0-1.10 | Direct measure |
| ALKALINE PHOSPHATASE | 181.00 | U/L | 38-126 | PNP |
| AST/SGOT | 66.0 | U/L | 17-59 | UV with P-5-P |
| ALT/SGPT | 38.0 | U/L | <35.0 | UV with P-5-P |
| AST:ALT RATIO | 1.74 | Ratio | Upto 1.3 | Calculated |
| PROTEIN, TOTAL | 6.80 | g/dL | 6.3-8.2 | Biuret |
| ALBUMIN | 3.80 | g/dL | 3.5 - 5.0 | Bromocresol Green |
| GLOBULIN | 3.00 | g/dL | 2.0-3.5 | Calculated |
| A/G RATIO | 1.27 | | 0.8-1.2 | Calculated |

Genral Information:

High coffee consumption and heavy smoking were both associated with low total protein and albumin levels. High coffee consumption lowered serum AST levels, independently. Because smoking, coffee and alcohol drinking habits showed strong interactions among each other, the association of those habits and LFTs should be carefully analyzed and interpreted.

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| Sample Type | : SERUM | Sample Temperature | : Maintained |

DEPARTMENT OF BIOCHEMISTRY
ADVANCED FULL BODY CHECKUP

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|---------------------------|--------------------|-----------------|
| EGFR - ESTIMATED GLOMERULAR FILTRATION RATE , <i>SERUM</i> | | | | |
| CREATININE | 0.60 | mg/dL | 0.52 - 1.04 | Amidohydrolase |
| EGFR - CREATININE AND GLOMERULAR FILTRATION RATE | 96.98 | mL/min/1.73m ² | | CKD-EPI FORMULA |

| Stage | e-GFR | Description |
|-------|--------------------|--|
| 1 | 90+ | Normal kidney function but urine findings or structurel abnormalities or genetic trait point to kidney disease |
| 2 | 60 to 89 | Mildly reduced kidney function and other findings (as for stage 1) point to kideny disease |
| 3A | 45 to 59 | Moderate reduced kidney function |
| 3B | 30 to 44 | Moderate reduced kidney function |
| 4 | 15 to 29 | Severely reduced kidney function |
| 5 | <15 or on dialysis | Very severe or end stage kidney failure |

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| Age/Gender | : 63 Y 0 M 1 D/F | Sample Collected On | : 19/Nov/2020 08:30AM |
| Order Id | : 6596760 | Sample Received On | : 19/Nov/2020 02:40PM |
| Referred By | : | Report Generated On | : 19/Nov/2020 04:07PM |
| Sample Type | : SERUM | Sample Temperature | : Maintained |

DEPARTMENT OF IMMUNOLOGY
ADVANCED FULL BODY CHECKUP

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|---|--------|--------|--------------------|--------|
| THYROID PROFILE (TOTAL T3, TOTAL T4, TSH) , <i>SERUM</i> | | | | |
| TRI-iodothyronine (T3, TOTAL) | 1.44 | ng/mL | 0.97-1.80 | ECLIA |
| Thyroxine (T4, TOTAL) | 13.00 | µg/dL | 5.53-14.00 | ECLIA |
| TSH | 2.560 | µIU/mL | 0.46-4.68 | ECLIA |

TSH is a glycoprotein hormone secreted by the anterior pituitary. TSH is a labile hormone & is secreted in a pulsatile manner throughout the day and is subject to several non-thyroidal pituitary influences. TSH levels are influenced by circadian rhythm, reaches peak level between 2 to 4 am and at its minimum between 6 to 10pm. hence time of the day significantly affects serum TSH concentrations.

Important note for the people with borderline TSH levels (4.0 to 10 mIU/L).

People with borderline TSH level while have no or mild to moderate sign & symptoms of thyroid issues, are considered to have **Sub-Clinical Hypothyroidism (SCH)**. Some time it could be a temporary fluctuation due to many reasons like age factor, circadian rhythm, hormonal status, stress, sleep deprivation, caloric intake, medication & circulating antibodies, and a retest (after 3 or 4 weeks) may be needed along with the test **Free T4** for further evaluation and confirmation.

| For pregnant females | Bio Ref Range for TSH in uIU/ml (As per American Thyroid Association) |
|----------------------|--|
| First trimester | 0.1 - 2.5 |
| Second trimester | 0.2 – 3.0 |
| Third trimester | 0.3 – 3.0 |

References:

American Thyroid Association (ATA) & European Thyroid Association (ETA)

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|--------------|---------------------|---------------------|-----------------------|
| Patient Name | : Ms.BIMLA JANDWANI | Barcode | : X0127461 |
| Age/Gender | : 63 Y 0 M 1 D/F | Sample Collected On | : 19/Nov/2020 08:30AM |
| Order Id | : 6596760 | Sample Received On | : 19/Nov/2020 02:40PM |
| Referred By | : | Report Generated On | : 19/Nov/2020 04:25PM |
| Sample Type | : URINE | Sample Temperature | : Maintained |

DEPARTMENT OF CLINICAL PATHOLOGY
ADVANCED FULL BODY CHECKUP

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-----------|--------|------|--------------------|--------|
|-----------|--------|------|--------------------|--------|

COMPLETE URINE EXAMINATION , URINE

PHYSICAL EXAMINATION

| | | | | |
|--------------|-------------|----|-------------|----------|
| VOLUME | 35.00 | mL | | |
| COLOUR | Pale Yellow | | PALE YELLOW | Visual |
| TRANSPARENCY | Clear | | CLEAR | Visual |
| pH | 5.0 | | 5-7.5 | Dipstick |
| SP. GRAVITY | 1.025 | | 1.002-1.030 | Dipstick |

BIOCHEMICAL EXAMINATION

| | | | | |
|-----------------|----------|--|----------|-------------------------|
| URINE PROTEIN | Negative | | NEGATIVE | Dipstick/Heat test |
| GLUCOSE | Negative | | NEGATIVE | Dipstick/Benedicts Test |
| URINE BILIRUBIN | Negative | | NEGATIVE | Dipstick/Fouchet Test |
| KETONES | Negative | | NEGATIVE | Dipstick/Rotheras Test |
| UROBILINOGEN | Normal | | NORMAL | Dipstick/Ehrlichs Test |
| BLOOD | Negative | | NEGATIVE | Dipstick |
| NITRITE | Negative | | NEGATIVE | Dipstick |

MICROSCOPIC EXAMINATION

| | | | |
|------------------|--------|------|--------|
| PUS CELLS | 2-3 | /hpf | 0-5 |
| EPITHELIAL CELLS | 3-4 | /hpf | <10 |
| RBC | Absent | /hpf | ABSENT |
| CASTS | Absent | | ABSENT |
| CRYSTALS | Absent | | ABSENT |
| BACTERIA | Absent | | |
| YEAST | Absent | | |
| PARASITES | Absent | | |
| OTHERS | Nil | | |

*** End Of Report ***

Page 8 of 8

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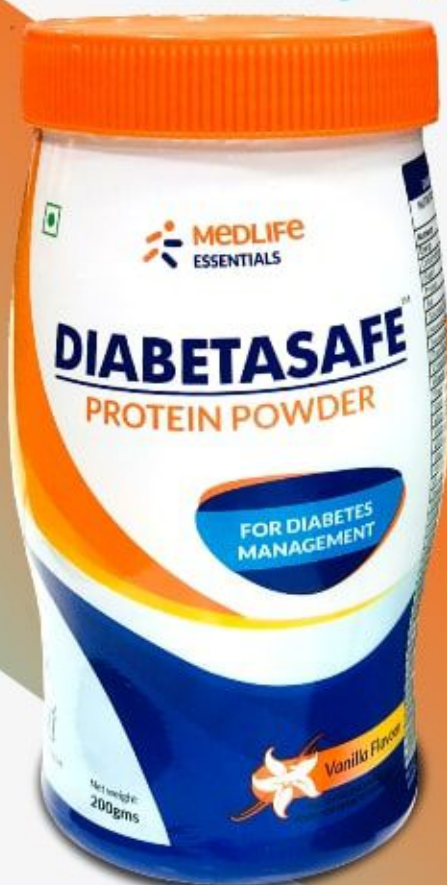


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- Contains potassium, magnesium, zinc and chromium, which help in managing blood sugar level.
- Contains Vegetable protein, which helps in reducing serum cholesterol and managing diabetes related complication like nephropathy.

Recommended Usage

Add 1 serving (24 g approx.) in 100 ml milk or water or as suggested by Health-care professional

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