



Vijaya Diagnostic Centre

3-6-16 & 17, Street No. 19, Basheerbagh, Hyderabad - 500 029

LABORATORY TEST REPORT

Regn Date : 3/24/2019 07:16
Name : MRS. G V RAMANI
Regn No : 141922478
Ref By : Dr. RAGHU K
Sample Type : Serum

Sample Collection : 24/03/2019 07:24
Print Date : 25/03/2019 15:27
Age / Sex : 54 Years / Female
Regn Centre : Ameerpet
Ref no. :

URIC ACID

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Uric Acid	: 4.0	2.6 - 6.0 mg/dL
<i>Method : Uricase Peroxidase</i>		

Comments / Interpretation :

- Useful for monitoring therapeutic management of gout and chemotherapeutic treatment of neoplasms.

UREA

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Urea	: 16	Adult : 17 - 43 mg/dL Newborn : 8.4 - 25.8 mg/dL Children : 10.8 - 38.4 mg/dL Infant : 10.8 - 38.4 mg/dL
<i>Method : Urease / GLDH</i>		

Comments / Interpretation :

- In conjunction with serum creatinine, urea level aids in differential diagnosis of Pre-Renal, Renal and Post-Renal hyperuremia.

CREATININE

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Creatinine	: 0.5	Adult Female : 0.6 - 1.0 mg/dL Neonate : 0.3 - 1.0 mg/dL Infant : 0.2 - 0.4 mg/dL Children : 0.3 - 0.8 mg/dL
<i>Method : Jaffe Kinetic IDMS</i>		

Comments / Interpretation :

- Useful in the diagnosis renal insufficiency and is more specific and sensitive indicator of renal disease than of BUN.
- Use of simultaneously BUN and creatinine levels provide more information in the diagnosis of renal insufficiency.

ELECTROLYTES

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Sodium	: 138	136 - 146 mmol/L
<i>Method : ISE INDIRECT</i>		
Potassium	: 5.0	3.5 - 5.1 mmol/L
<i>Method : ISE INDIRECT</i>		
Chlorides	: 101	101 - 109 mmol/L
<i>Method : ISE INDIRECT</i>		





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Comments / Interpretation :

Sodium :-

- Useful in the diagnosis and treatment of dehydration, overhydration. Hyponatremia suggests dehydration and Hyponatremia (<130 mmol/L) suggests overhydration.
- Levels of sodium when evaluated with electrolytes aid in assessing acid base balance, water balance and water intoxication.

Potassium :-

- Useful in evaluation of electrolyte balance, cardiac arrhythmia, muscular weakness, hepatic encephalopathy and renal failure.

Chloride :-

- Useful, when assayed along with Sodium, Potassium and bicarbonate in assessment of electrolyte, acid base and water balance.

DR S G ALI HATIM
CONSULTANT BIOCHEMIST





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LABORATORY TEST REPORT

Regn Date : 3/24/2019 07:16
Name : MRS. G V RAMANI
Regn No : 141922478
Ref By : Dr. RAGHU K
Sample Type : Fluoride Plasma

Sample Collection : 24/03/2019 07:24
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Regn Centre : Ameerpet
Ref no. :

FASTING PLASMA GLUCOSE (FPG)

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Fasting Plasma Glucose	: 201	Normal : 70-100 mg/dL Impaired Fasting Glucose : 101-125 mg/dL Diabetes : ≥ 126 mg/dL

Method : Hexokinase

Comments / Interpretation :

- ADA Guidelines (2018) are adopted for the evaluation of Diabetic Status.

POST LUNCH PLASMA GLUCOSE (PLPG)

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
2 hrs Post Lunch Plasma Glucose	: 212	Normal : 100-140 mg/dL Impaired Glucose Tolerance : 141-199 mg/dL Diabetes : ≥ 200 mg/dL

Method : Hexokinase

Comments / Interpretation :

- ADA Guidelines (2018) are adopted for the evaluation of Diabetic Status.



Certificate # MC-2657

DR S G ALI HATIM
CONSULTANT BIOCHEMIST



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LABORATORY TEST REPORT

Regn Date : 3/24/2019 07:16
Name : MRS. G V RAMANI
Regn No : 141922478
Ref By : Dr. RAGHU K
Sample Type : Whole Blood - EDTA

Sample Collection : 24/03/2019 07:24
Print Date : 25/03/2019 15:27
Age / Sex : 54 Years / Female
Regn Centre : Ameerpet
Ref no. :

COMPLETE BLOOD PICTURE (CBP)

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVAL
Haemoglobin <i>Photometric measurement</i>	: 11.2	12.0 - 15.0 g/dL
Total RBC Count <i>Coulter Principle</i>	: 4.38	3.8 - 4.8 millions/cumm
Packed Cell Volume / Hematocrit <i>Calculated</i>	: 34.2	36.0 - 46.0 Vol%
MCV <i>Derived from RBC Histogram</i>	: 78.1	83.0 - 101.0 fl
MCH <i>Calculated</i>	: 25.7	27 - 32 pg
MCHC <i>Calculated</i>	: 32.9	31.5 - 34.5 gm/dL
RDW <i>Derived from RBC Histogram</i>	: 16.8	11.6 - 14.0 %
Total WBC Count <i>Coulter Principle</i>	: 6400	4000 - 10000 Cells/cumm
<u>Differential count</u>		
Neutrophils <i>VCSn Technology & Microscopy</i>	: 60	40 - 80 %
Lymphocytes <i>VCSn Technology & Microscopy</i>	: 28	20 - 40 %
Eosinophils <i>VCSn Technology & Microscopy</i>	: 2	1 - 6 %
Monocytes <i>VCSn Technology & Microscopy</i>	: 9	2 - 10 %
Basophils <i>VCSn Technology & Microscopy</i>	: 1	0 - 2 %
<u>Absolute Leucocyte Count</u>		
Absolute Neutrophil Count <i>Method : Calculation</i>	: 3900	2000 - 7000 Cells/cumm
Absolute Lymphocyte Count <i>Method : Calculation</i>	: 1800	1000 - 3000 Cells/cumm
Absolute Eosinophil Count <i>Method : Calculation</i>	: 100	20 - 500 Cells/cumm
Absolute Monocyte Count <i>Method : Calculation</i>	: 600	200 - 1000 Cells/cumm





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Sample Type : Whole Blood - EDTA

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Ref no. :

COMPLETE BLOOD PICTURE (CBP)

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Platelet Count <i>Coulter Principle</i>	: 427000	150000 - 410000 /cumm
<u>Peripheral Smear</u>		
RBC <i>Microscopy : Leishman stain/Modified Giemsa Stain</i>	: Normocytic Normochromic with mild anisocytosis	
WBC <i>Microscopy : Leishman stain/Modified Giemsa Stain</i>	: Normal in morphology, maturity and distribution	
Platelets <i>Microscopy : Leishman stain/Modified Giemsa Stain</i>	: Adequate	



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CONSULTANT PATHOLOGIST



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LABORATORY TEST REPORT

Regn Date : 3/24/2019 07:16
Name : MRS. G V RAMANI
Regn No : 141922478
Ref By : Dr. RAGHU K
Sample Type : Urine

Sample Collection : 24/03/2019 07:24
Print Date : 25/03/2019 15:27
Age / Sex : 54 Years / Female
Regn Centre : Ameerpet
Ref no. :

COMPLETE URINE EXAMINATION (CUE)

TEST NAME	RESULT	BIOLOGICAL REFERENCE INTERVAL
Macroscopic Examination		
Colour	: Pale Yellow	Pale Yellow
Appearance	: Clear	Clear
Specific Gravity	: 1.010	1.003 - 1.030
<i>Ion Exchange</i>		
Reaction/pH	: Alkaline (7.5)	4.6 - 8
<i>Double Indicator</i>		
Protein	: Nil	Nil - Trace
<i>Protein error of Indicator</i>		
Glucose	: Nil	Nil
<i>GOD-POD</i>		
Urobilinogen	: Normal	NA
<i>Modified Ehrlich reaction</i>		
Bilirubin	: Negative	Negative
<i>Diazonium method</i>		
Ketones	: Negative	Negative
<i>Nitroprusside reaction</i>		
Nitrites	: Negative	Negative
<i>Diazonium method</i>		
Microscopic Examination		
Pus Cells	: 1-2/HPF	0 - 5 Cells / HPF
R.B.C	: Nil	0 - 2 Cells / HPF
Epithelial Cells	: 1-2/HPF	0 - 5 Cells / HPF
Casts	: Nil	Nil/LPF
Crystals	: Nil	Nil
Method	: Reagent Strip Method, Microscopy.	



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DR. ASIMA MUBEEN QUADRI
CONSULTANT PATHOLOGIST



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LIPID PROFILE (LP)

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Serum Status	: Clear	
Triglycerides	: 212	Desirable Level : < 150 mg/dL Borderline : 150 - 199 mg/dL High : 200 - 499 mg/dL Very High : > 499 mg/dL
<i>Method : GPO-POD</i>		
Total Cholesterol	: 161	Desirable Level : < 200 mg/dL Borderline : 200 - 239 mg/dL Undesirable : > 239 mg/dL
<i>Method : CHOD-POD</i>		
LDL Cholesterol.	: 83	Optimal : < 100 mg/dL Near Optimal : 100 - 129 mg/dL Borderline High : 130 - 159 mg/dL High : 160 - 189 mg/dL Very High : > 189 mg/dL
<i>Method: Calculation</i>		
HDL Cholesterol	: 36	Desirable Level : > 59 mg/dL Optimal : 40 - 59 mg/dL Undesirable : < 40 mg/dL
<i>Method : Enzymatic Immunoinhibition</i>		
VLDL	: 42	< 30 mg/dL
<i>Method: Calculation</i>		
Total Cholesterol/HDL Cholesterol Ratio	: 4.47	Low Risk : 3.3 - 4.4 Average Risk : 4.5 - 7.1 Moderate Risk : 7.2 - 11.0
<i>Method: Calculation</i>		
LDL Cholesterol/HDL Cholesterol Ratio	: 2.29	Desirable Level : 0.5 - 3.0 Borderline Risk : 3.0 - 6.0 High Risk : > 6.0
<i>Method: Calculation</i>		

Comments / Interpretation :

- Lipid profile is a panel of blood tests that serves as an initial broad medical screening tool for abnormalities in lipids, the results of these tests can identify certain genetic diseases and can determine approximate risks for cardiovascular disease, certain forms of pancreatitis and other diseases.



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Handwritten signature of Dr. S G Ali Hatim

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Hyderabad-29. Ph: 23420422 / 423 / 424 / 425.

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Ref no. :

GLYCOSYLATED HAEMOGLOBIN (HbA1c)

<u>TEST NAME</u>	<u>RESULT</u>	<u>BIOLOGICAL REFERENCE INTERVAL</u>
Glycosylated Haemoglobin	: 8.3	Non Diabetic : < 5.6% Prediabetic Range : 5.7 - 6.4% Diabetic Range : > 6.5%

Method : High Performance Liquid Chromatography (HPLC)

Comments / Interpretation :

- Glycosylated hemoglobin is proportional to mean plasma glucose level during previous 6-12 weeks.
- Values may not be comparable with different methodologies and even different laboratories using the same methodology.
- Perform A1c at least twice annually in Diabetes patients to ascertain meeting of goals
- Perform A1c test quarterly in Diabetes patients whose therapy has changed and who are not meeting goals
- Recommended goal of A1c is < 7%
- ADA Guidelines 2016.





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Ref no. :

Bio-Rad CDM System CDM 5.1 VII TURBO Instrument

PATIENT REPORT V2TURBO_A1c_2.0

Patient Data

Sample ID: 141922478
Patient ID:
Name:
Physician:
Sex:
DOB:

Analysis Data

Analysis Performed: 24/03/2019 10:56:16
Injection Number: 13713
Run Number: 692
Rack ID:
Tube Number: 9
Report Generated: 24/03/2019 11:01:12
Operator ID:

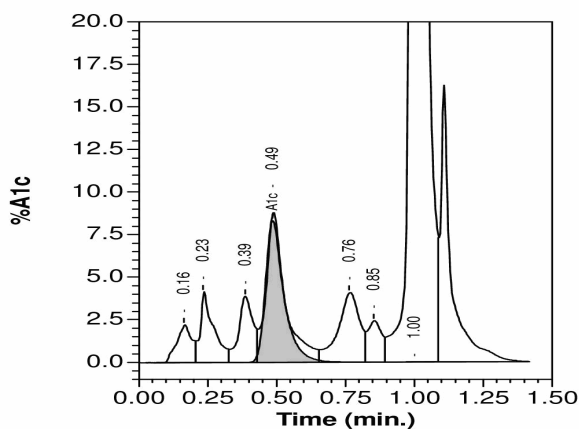
Comments:

Peak Name	NGSP %	Area %	Retention Time (min)	Peak Area
A1a	---	1.5	0.163	15349
A1b	---	2.5	0.233	24922
LA1c	---	2.3	0.385	23384
A1c	8.3*	---	0.485	69821
P3	---	4.0	0.764	39918
P4	---	1.5	0.852	15086
Ao	---	81.1	1.000	807659

*Values outside of expected ranges

Total Area: 996,138*

HbA1c (NGSP) = 8.3* %



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CONSULTANT BIOCHEMIST



Bio-Rad CDM System
CDM 5.1 VII TURBO Instrument

PATIENT REPORT
V2TURBO_A1c_2.0

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