



Patient : **THAMARAI SELVI**
 Age / Sex : 52 Y / Female
 Referrer : Self
 Branch : AVADI - CC

SID No. : **32007859**
 Reg Date & Time : 09/08/2022 09:00:01
 Coll Date & Time : 09/08/2022 11:55:31
 Report Date & Time : 09/08/2022 16:49:13

Final Test Report

INVESTIGATION / METHOD	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
HAEMATOLOGY			
COMPLETE BLOOD COUNT(CBC)			
RBC (Red Blood Cell Count) (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	4.11	Million/cmm	3.8-4.8
Haemoglobin (HB) (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	11.6	gm/dl	12-15
PCV -(Haematocrit-Packed Cell Volume) (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	36.1	%	36-46
MCV (Mean Corpuscular Volume) (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	87.8	fl	83-101
MCH (Mean Corpuscular Hemoglobin) (Specimen: EDTA WHOLE BLOOD)	28.3	pg	27-32
MCHC (Mean Corpuscular Hemoglobin Concentration) (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	32.2	%	31.5-34.5
Total WBC Count (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	6330	cells/cumm	4000-10000
DIFFERENTIAL COUNT(DC):EDTA WHOLE BLOOD (Optical(light scatter)Microscopy)			
Neutrophils (Specimen: EDTA WHOLE BLOOD)	60	%	40-80
Lymphocytes (Specimen: EDTA WHOLE BLOOD)	31	%	20-40
Monocytes (Specimen: EDTA WHOLE BLOOD)	4	%	2 - 10 %
Eosinophils (Specimen: EDTA WHOLE BLOOD)	4	%	1-6
Basophils (Specimen: EDTA WHOLE BLOOD)	1	%	< 1 - 2 %
Platelet Count (Method : WB/Automated) (Specimen: EDTA WHOLE BLOOD)	2.55	Lakhs/cumm	1.5-4.1
Erythrocyte Sedimentation Rate(ESR) (Westergran Method)			
1 Hour (Specimen: EDTA WHOLE BLOOD)	36	mm/hr	<19

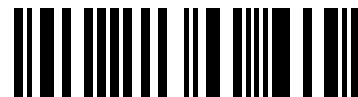


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BIOCHEMISTRY.			
GLUCOSE FASTING (FBS) (Method : Glucose Oxidase - Peroxidase) (Specimen: FLUORIDE EDTA PLASMA)	75.0	mg/dl.	74-100
GLUCOSE POST PRANDIAL (PPBS) (Method : Glucose Oxidase - Peroxidase) (Specimen: FLUORIDE EDTA PLASMA)	93.0	mg/dl.	80-140



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INVESTIGATION / METHOD	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
BIOCHEMISTRY			
LIPID PROFILE			
CHOLESTEROL (Method : Cholesterol oxidase,esterase,peroxidase) (Specimen: SERUM)	197.0	mg/dl	Desirable :<200 Boderline high :200-239 High :>240
HDL CHOLESTEROL (Method : Elimination/Catalase) (Specimen: SERUM)	39.0	mg/dl	>40
LDL CHOLESTEROL (Method : Elimination/Catalase) (Specimen: SERUM)	123	mg/dl	Optimal :<100 Near Optimal/above Optimal:100-129 Boderline high :132-159 High :159-189 VeryHigh :>190
TRIGLYCERIDES (Method : Glycerol kinase-Peroxidase) (Specimen: SERUM)	129.0	mg/dl	Normal :<150 Boderline high:150-199 High :200-499 very high :>500
VLDL CHOLESTEROL (Method : Calculation) (Specimen: SERUM)	25.8	mg/dl.	10-40
Non-HDL Cholesterol (Method : Calculation) (Specimen: SERUM)	158.0		<160
CHO / HDL RATIO (Method : Calculation) (Specimen: SERUM)	5.1	Ratio	Optimal<3.5 Goal <5.0
LDL/HDL RATIO (Specimen: SERUM)	3.2	Ratio	1.5-3.5



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INVESTIGATION / METHOD	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
TGL/HDL Ratio (Method : Calculated) (Specimen: SERUM)	3.3	Ratio	Ideal : <2.0 High Risk : >4.0 Very high risk:6.0

Diet containing simple sugars, saturated fats, and trans-fats, refined grains(eg, white rice, white bread) and alcohol will increase triglyceride levels .Hence if the nonfasting triglycerides are more than 200 mg/dL, a fasting lipid profile is recommended within a month.

End of the Report



M.V.R. Madhavi
Dr.M.V.R.MADHAVI MD.,
 Biochemist