



Name : MR RANGAM VASMSIKRISHNA
Registration No : MH010578264
Patient Episode : O00008901948
Referred By : DR.ABHISHEK PATIL
Receiving Date : 19 Nov 2022 12:35

Age : 34 Yr(s) Sex :Male
Lab No : 12221117633
Collection Date : 19 Nov 2022 11:39
Reporting Date : 19 Nov 2022 13:41

Clinical Laboratory Report

BIOCHEMISTRY

TEST	RESULT	UNIT	REFERENCE
SERUM CREATININE (mod.Jaffe)	0.74 #	mg/dl	[0.80-1.60]
*eGFR	120.3	ml/min/1.73sq.m	[>60.0]

Disclaimer :

eGFR which is primarily based on Serum Creatinine is a derivation of CKD-EPI 2009 equation normalized to 1.73 sq.m BSA and is not applicable to individuals below 18 years. eGFR tends to be less accurate when Serum Creatinine estimation is indeterminate e.g. patients at extremes of muscle mass, on unusual diets etc. and samples with severe Hemolysis / Icterus / Lipemia.

Serum LDH (UV kinetic)	182	IU/L	[100-250]
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Serum LIVER FUNCTION TEST

BILIRUBIN-TOTAL (mod.J Groff)**	0.63	mg/dl	[0.10-1.20]
BILIRUBIN - DIRECT (mod.J Groff)	0.22 #	mg/dl	[<0.2]
BILIRUBIN - INDIRECT (mod.J Groff)	0.41	mg/dl	[0.20-1.00]
SGOT/ AST (P5P,IFCC)	16.00	IU/L	[5.00-37.00]
SGPT/ ALT (P5P,IFCC)	33.00	IU/L	[10.00-50.00]
ALP (p-NPP,kinetic)*	73	IU/L	[45-135]
TOTAL PROTEIN (mod.Biuret)	7.7	g/dl	[6.0-8.2]
SERUM ALBUMIN (BCG-dye)	4.6	g/dl	[3.5-5.0]
SERUM GLOBULIN (Calculated)	3.1	g/dl	[1.8-3.4]
ALB/GLOB (A/G) Ratio	1.48		[1.10-1.80]

Note:

**NEW BORN:Vary according to age (days), body wt & gestation of baby

Page 1 of 7

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Collection Date : 19 Nov 2022 11:39
Reporting Date : 19 Nov 2022 13:41

Clinical Laboratory Report

BIOCHEMISTRY

TEST	RESULT	UNIT	REFERENCE
*New born: 4 times the adult value			
SERUM PROTEIN ELECTROPHORESIS			
TOTAL PROTEIN (mod.Biuret)	7.7	g/dl	[6.0-8.2]
SERUM ALBUMIN (BCG-dye)	4.2	g/dl	[3.5-5.0]
ALPHA -1 GLOBULINS	0.4	g/dl	[0.1-0.4]
ALPHA -2 GLOBULINS	0.9	g/dl	[0.4-1.2]
BETA -1 GLOBULINS	0.4	g/dl	[0.2-0.7]
BETA -2 GLOBULINS	0.5	g/dl	[0.1-0.5]
GAMMA GLOBULINS	1.4	g/dl	[0.5-1.6]
A/G Ratio	1.22		
RELATIVE PERCENTAGE			
Albumin	54.9 #	%	[55.0-65.0]
ALPHA -1 GLOBULINS	4.6	%	[2.5-6.5]
ALPHA -2 GLOBULINS	11.3	%	[6.3-12.0]
BETA -1 GLOBULINS	5.4	%	[4.7-7.2]
BETA -2 GLOBULINS	6.1	%	[3.2-6.5]
GAMMA GLOBULINS	17.7	%	[12.0-22.0]

Method: Capillary Electrophoresis

IMP: Normal Pattern.

Page 2 of 7

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Registration No : MH010578264
Patient Episode : O00008901948
Referred By : DR.ABHISHEK PATIL
Receiving Date : 19 Nov 2022 14:09

Age : 34 Yr(s) Sex :Male
Lab No : 12221117633
Collection Date : 19 Nov 2022 11:39
Reporting Date : 19 Nov 2022 16:38

Clinical Laboratory Report

BIOCHEMISTRY

TEST	RESULT	UNIT	REFERENCE
URINE PROTEIN CREATININE RATIO			Specimen: Urine
URINE PROTEIN-Random Method: Benzethonium chloride	15.9 #	mg/dl	[0.0-15.0]
URINE CREATININE(Random) Method: mod. Jaffe's	162.90	mg/dl	
Protein Creatinine Ratio Method: Calculated	0.10		[<0.2](< 0.2)

Page 3 of 7

-----END OF REPORT-----



Dr. Hemantha Kumara D.S
M.D(Biochem),KMC Reg.No.93955

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Referred By : DR.ABHISHEK PATIL
Receiving Date : 19 Nov 2022 12:41

Age : 34 Yr(s) Sex :Male
Lab No : 13221112181
Collection Date : 19 Nov 2022 11:39
Reporting Date : 19 Nov 2022 13:52

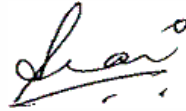
Clinical Laboratory Report

HAEMATOLOGY

TEST	RESULT	UNIT	REFERENCE
ERYTHROCYTE SEDIMENTATION RATE (Automated) Specimen-Whole Blood			
ESR	46.0 #	/1sthour	[0.0-10.0]

Page 4 of 7

-----END OF REPORT-----



Dr. Swati Pai MD, DNB
Consultant Hematopathologist

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Patient Episode : O00008901948
Referred By : DR.ABHISHEK PATIL
Receiving Date : 19 Nov 2022 12:34

Age : 34 Yr(s) Sex :Male
Lab No : 15221108907
Collection Date : 19 Nov 2022 11:39
Reporting Date : 19 Nov 2022 14:34

Clinical Laboratory Report

MICROBIOLOGY

Human Immunodeficiency Virus 1 & 2 (serology)

Specimen-Serum

Test Value: 0.10
Cut Off Value 0.90
Method: Enhanced Chemiluminescence Immuno assay
Test Result: Non-reactive for anti HIV-1, anti HIV-2 and p24 antigen

Comments:

Acquired Immunodeficiency syndrome (AIDS) is a disease caused by Human Immuno Deficiency Virus (HIV 1 and HIV 2). This test is a qualitative detection of antibodies to Human Immunodeficiency Virus types 1, including group M and O, and/or 2 (anti-HIV-1 and anti-HIV-2) and HIV P24 antigen. A non-reactive result does not preclude the possibility of infection with HIV. False positive results may be seen in autoimmune diseases, alcoholic hepatitis, primary biliary cirrhosis, leprosy and multiple pregnancies. The test may be non-reactive during the window period and end stage of the disease.

Page 5 of 7

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MICROBIOLOGY

Clinical Laboratory Report

Hepatitis C virus Antibody (HCV- Serology)

Specimen-Serum

Test Value 0.03
Cut Off Value: 0.90
Method Enhanced Chemiluminescence Immuno assay
Test Result: Non-Reactive, negative for Anti-HCV

Technical Note:

It is a screening test based on immunometric technique, using enhanced chemiluminescence for the qualitative detection of IgG antibodies to hepatitis C virus in human serum. Antibodies to hepatitis C virus appear after variable periods of time in different patients. Other tests like PCR may be used for confirmation of results. A non-reactive result does not preclude the possibility of infection with HCV

Hepatitis B surface Antigen (HBsAg - serology)

Specimen-Serum

Test Value 0.05
Cut-off value: 0.9
Test Method Enhanced Chemiluminescence Immuno assay
Test Result Non-Reactive

Technical Note:

It is a screening test for the qualitative detection of Hepatitis B surface antigen in human serum. A reactive result does not confirm diagnosis. The result should be interpreted in conjunction with clinical condition and other serological markers of Hepatitis B. A non-reactive result does not preclude the possibility of

Page 6 of 7

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Clinical Laboratory Report

MICROBIOLOGY

infection with HBV.

ANTI NUCLEAR ANTIBODIES (Immunofluorescence) Specimen-Serum

ANA BY IF Negative
ANA (IF) titre : <1:40

Technical Note:

Antinuclear antibodies are autoantibodies directed against various structures of the cell nucleus and cytoplasm, seen in a variety of connective tissue disorders. ANA may be positive in normal population in low titres. The pattern of nuclear fluorescence reflects specificity for various diseases.

Smooth (Homogenous) - SLE

Speckled - SLE, Sjogren's, MCTD, RA

Nucleolar - PSS, Sjogren's, SLE

Centromere - CREST syndrome, Scleroderma

Page 7 of 7

-----END OF REPORT-----



Dr. Ranjeeta Adhikary MD
Consultant Microbiologist

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