



DRAWN : 06-01-2026      RECEIVED : 06-01-2026  
10:01 Hrs      12:45 Hrs

REPORTED : 06-01-2026  
13:57 Hrs

OPD/IPD DOC NO OP40162332

PATIENT CODE 1000351368

REFERRING DOCTOR Dr. Mohit Kharbanda

AGE 56 Yrs 10 Mths 21 Dys SEX Female

ACCESSION NO DH-101/2025-26/0024303



3259180774

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Glucose - Fasting</b>  Specimen : Plasma Flouride Methodology : Hexokinase	108	70.0 - 100.0	mg/dL
<b>Urea</b>  Specimen : Serum Methodology : Urease GLDH, UV	14.2	15.0 - 45.0	mg/dL
<b>Creatinine</b>  Specimen : Serum Methodology : Jaffe	0.79	Adult Male : < 50 yrs : 0.84 - 1.25 > 50 yrs : 0.81 - 1.44 Adult Female : 0.66 - 1.09  Child : 0.5 - 1.2 Infant : 0.4 - 0.7 Neonate : 0.5 - 1.2	mg/dL
<b>Electrolytes (Na, K, Cl)</b>			
<b>Sodium</b>  Specimen : Serum Methodology : Direct ISE / Indirect ISE	140.6	135.0 - 150.0	mmol/L
<b>Potassium</b>  Specimen : Serum Methodology : Direct ISE / Indirect ISE	3.99	3.5 - 5.0	mmol/L
<b>Chloride</b>  Specimen : Serum Methodology : Direct ISE / Indirect ISE	105.1	94.0 - 110.0	mmol/L
 <b>Dr. JAYATI GUPTA</b> <b>Ph.D (Bio.Chem)</b> Senior Consultant Biochemist			

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J. S. Jan

Dr. JAYATI GUPTA  
Ph.D (Bio.Chem)  
Senior Consultant Biochemist

PATIENT NAME &amp; ADDRESS

MRS. MEENAKSHI SANYAL

## PATHOLOGY



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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>LFT (Liver Function Test)</b>			
<b>Total Bilirubin</b> Specimen : Serum Methodology : Diazo Salt	0.62	Normal : 0.3 - 1.1 New Born : 1.2 - 12.0	mg/dL
<b>Direct Bilirubin</b> Specimen : Serum Methodology : Diazo Salt	0.13	Adult and Child : < 0.2	mg/dL
<b>Indirect Bilirubin</b> Methodology : Calculated Value	0.49		mg/dL
<b>Total Protein</b> Specimen : Serum Methodology : Biuret	7.55	6.7 - 8.3	gm/dl
<b>Albumin</b> Specimen : Serum Methodology : Bromocresol Green (BCG)	4.15	4.0 - 5.0	g/dL
<b>Globulin</b> Methodology : Calculated Value	3.40	1.8 - 3.6	g/dL
<b>A/G Ratio</b> Methodology : Calculated Value	1.22	1.0 - 2.0 : 1	ratio
<b>Aspartate Aminotransferase (SGOT) (AST)</b> Specimen : Serum Methodology : UV without P5P	33	13.0 - 33.0	U/L
<b>Alanine Aminotransferase (SGPT) (ALT)</b> Specimen : Serum Methodology : UV without P-5-P	36	6 - 27	U/L
<b>Alkaline Phosphatase (ALP)</b> Specimen : Serum Methodology : IFCC pNPP with AMP Buffer	98	30 - 120	U/L

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<b>Lipid Profile</b>			
<b>Cholesterol - Total</b> Specimen : Serum Methodology : Cholesterol oxidase, POD	155	130.0 - 220.0	mg/dL
<b>Cholesterol - HDL</b> Specimen : Serum Methodology : Direct / Innovative Detergent	59.8	40.0 - 59.0	mg/dL
<b>Cholesterol - LDL</b> Methodology : Calculated Value	69.0	> 160.0 : High Risk 130.0 – 160.0 : Borderline High <= 130.0 : Desirable	mg/dL
<b>Cholesterol - VLDL</b> Methodology : Calculated Value	26.2	< 40.0	mg/dL
<b>Triglyceride</b> Specimen : Serum Methodology : GPO/POD	131	30.0 - 150.0	mg/dL
<b>Cholesterol - Total/HDL ratio</b> Methodology : Calculated Value	2.59	3.3 : 1/2 Average Risk 4.4 : Average Risk 7.1 : 2 x Average Risk 11.0 : 3 x Average Risk	ratio
<b>Cholesterol - LDL/HDL ratio</b> Methodology : Calculated Value	1.15		

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<p><b>HbA1c (Glycosylated Haemoglobin)</b></p> <p><b>Glycosylated Haemoglobin (HbA1c)</b> Specimen : Whole Blood - EDTA Methodology : NGSP (Enzymatic Assay) * CLINICAL CORRELATION REQUESTED.</p> 	* 5.97	<p>&lt; 5.7 : Normal 5.7 - 6.4 : Prediabetes &gt;= 6.5 : Higher Diabetics</p>	%

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Apolipoprotein A-I</b> <b>Apolipoprotein A-I</b> <i>Specimen : Serum</i> <i>Methodology : Spectrophotometry</i>	161.2	122 - 161	mg/dL
<b>Apolipoprotein B</b> <b>Apolipoprotein B</b> <i>Specimen : Serum</i> <i>Methodology : Spectrophotometry</i>	71.2	69 - 105	mg/dL

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>TSH (Thyroid Stimulating Hormone)</b> <b>Thyroid Stimulating Hormone (TSH)</b> <i>Specimen : Serum</i> <i>Methodology : Electrochemiluminescence</i>	1.78	0.27 - 4.20	µIU/mL

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<b>CBC (Complete Blood Count)</b>			
<b>Haemoglobin (Hb)</b> Specimen : Whole Blood - EDTA Methodology : Colorimetric Non-cyanide Haemoglobin method	12.2	12.0 - 15.0	gm/dl
<b>RBC Count</b> Specimen : Whole Blood - EDTA Methodology :	4.08	3.8 - 4.8	million/cmm
<b>Packed Cell Volume (Hematocrit) (PCV)</b> Specimen : Whole Blood - EDTA Methodology : Pulse height detection	37.5	36.0 - 46.0	%
<b>Mean Cell Volume (MCV)</b> Specimen : Whole Blood - EDTA Methodology : Calculated Value	92.0	83.0 - 101.0	fL
<b>Mean Cell Haemoglobin (MCH)</b> Specimen : Whole Blood - EDTA Methodology : Calculated Value	29.9	27 - 32	pg
<b>Mean Cell Haemoglobin Concentration (MCHC)</b> Specimen : Whole Blood - EDTA Methodology : Calculated Value	32.5	31.5 - 34.5	g/dL
<b>Platelet Count</b> Specimen : Whole Blood - EDTA Methodology : Electrical Impedance & Neubauer's chamber	1.95	1.5 - 4.0	lakh/cmm
<b>Total Count</b>			
<b>WBC Count</b> Specimen : Whole Blood - EDTA Methodology : Electrical Impedance & Manual	5.4	4.0 - 11.0	thou/cmm
<b>Differential Count (Elect. Impedence &amp; Microscopy)</b>			
<b>Neutrophil</b>	57	40 - 80	%
<b>Lymphocyte</b>	38	20 - 40	%

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<b>CBC (Complete Blood Count)</b>			
Monocyte	02	2 - 10	%
Eosinophil	03	1 - 6	%
Basophil	00	0 - 2	%
Peripheral Blood Smear (Microscopy)			
RBC	Normocytic	Normochromic	
WBC	No immature cell seen		
Platelet	Adequate		
Specimen : Whole Blood - EDTA			
<b>Erythrocyte Sedimentation Rate (ESR)</b>	33	<= 20	mm / hr
Specimen : Whole Blood - EDTA			
Methodology : Westergren			

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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<b>Apolipoprotein A-I</b>			
The decreased level is associated with increased risk of coronary heart disease (CHD).			
Elevated in: i.Familial hyperalphalipoproteinemia ii.Pregnancy iii.Estrogen therapy iv.Alcohol consumption v.Exercise			
Reduced in : i.Tangier disease ii."Fish-eye" disease iii.Familial hypoalphalipoproteinemia iv.Familial lecithin-cholesterol acyltransferase deficiency v.Type I and type V hyperlipoproteinemia vi.Diabetes mellitus vii.Cholestasis viii.Hemodialysis ix.Infection x.Drugs (e.g. Diuretics, beta-blockers etc.)			
<b>Apolipoprotein B</b>			
Elevated levels are associated with increased risk of CHD.			
Elevated in: i.Hyperlipoproteinemia (types IIIa, IIIb, IV, V) ii.Familial hyperapobetalipoproteinemia iii.Nephrotic syndrome iv.Pregnancy v.Biliary obstruction vi.Hemodialysis vii.Cigarette smoking viii.Drugs (e.g. Diuretics, beta-blockers, cyclosporine, glucocorticoids)			
Reduced in i.Hypo- and Abetalipoproteinemia ii.Type I hyperlipoproteinemia (hyperchylomicronemia) iii.Liver disease iv.Exercise v.Infections			

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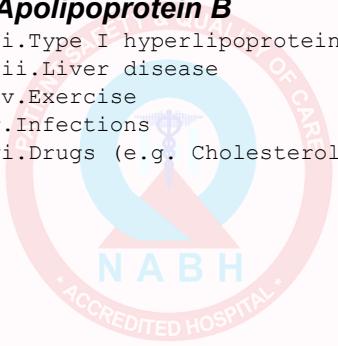
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TEST REPORT STATUS	RESULTS	BIOLOGICAL REFERENCE INTERVAL	UNITS
<p><b>Apolipoprotein B</b></p> <p>ii.Type I hyperlipoproteinemia (hyperchylomicronemia)</p> <p>iii.Liver disease</p> <p>iv.Exercise</p> <p>v.Infections</p> <p>vi.Drugs (e.g. Cholesterol-lowering drugs, estrogens)</p>  <p>----- <i>End of Report</i> -----</p>			

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