

LPL - PSC-JANAK PURI
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DELHI

Name	: Master KIANVEER SINGH	Collected	: 22/10/2021 7:41:00AM
Lab No.	: 159752116	Received	: 22/10/2021 7:44:00AM
Age:	11 Years	Reported	: 22/10/2021 12:36:16PM
Gender:	Male	Report Status	: Final
A/c Status	: P	Ref By	: Dr. MOHIT ARORA

Test Name	Results	Units	Bio. Ref. Interval
ALKALINE PHOSPHATASE (ALP), SERUM* (IFCC)	177	U/L	135.00 - 530.00
CALCIUM, SERUM* (Arsenazo III)	10.00	mg/dL	8.80 - 10.80
PHOSPHORUS, SERUM* (Molybdate UV)	5.52	mg/dL	3.30 - 5.40
VITAMIN B12; CYANOCOBALAMIN, SERUM* (CLIA)	239.00	pg/mL	211.00 - 911.00

Notes

1. Interpretation of the result should be considered in relation to clinical circumstances.
2. It is recommended to consider supplementary testing with plasma Methylmalonic acid (MMA) or plasma homocysteine levels to determine biochemical cobalamin deficiency in presence of clinical suspicion of deficiency but indeterminate levels. Homocysteine levels are more sensitive but MMA is more specific
3. False increase in Vitamin B12 levels may be observed in patients with intrinsic factor blocking antibodies, MMA measurement should be considered in such patients
4. The concentration of Vitamin B12 obtained with different assay methods cannot be used interchangeably due to differences in assay methods and reagent specificity

VITAMIN D, 25 - HYDROXY, SERUM* (CLIA)	30.96	nmol/L	75.00 - 250.00
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Interpretation

LEVEL	REFERENCE RANGE IN nmol/L	COMMENTS
Deficient	< 50	High risk for developing bone disease
Insufficient	50-74	Vitamin D concentration which normalizes Parathyroid hormone concentration
Sufficient	75-250	Optimal concentration for maximal health benefit
Potential intoxication	>250	High risk for toxic effects



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Note

- The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D.
- 25 (OH)D is influenced by sunlight, latitude, skin pigmentation, sunscreen use and hepatic function.
- Optimal calcium absorption requires vitamin D 25 (OH) levels exceeding 75 nmol/L.
- It shows seasonal variation, with values being 40-50% lower in winter than in summer.
- Levels vary with age and are increased in pregnancy.
- A new test Vitamin D, Ultrasensitive by LC-MS/MS is also available

Comments

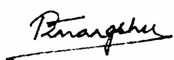
Vitamin D promotes absorption of calcium and phosphorus and mineralization of bones and teeth. Deficiency in children causes Rickets and in adults leads to Osteomalacia. It can also lead to Hypocalcemia and Tetany. Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs).

Decreased Levels

- Inadequate exposure to sunlight
- Dietary deficiency
- Vitamin D malabsorption
- Severe Hepatocellular disease
- Drugs like Anticonvulsants
- Nephrotic syndrome

Increased levels

Vitamin D intoxication



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-----End of report -----



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* Test conducted under NABL scope MC-2113,LPL-NATIONAL REFERENCE LAB at NEW DELHI

IMPORTANT INSTRUCTIONS

•Test results released pertain to the specimen submitted. •All test results are dependent on the quality of the sample received by the Laboratory .
•Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician. •Sample repeats are accepted on request of Referring Physician within 7 days post reporting. •Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. •Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting. •Test results may show interlaboratory variations. •The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s). •Test results are not valid for medico legal purposes. •Contact customer care Tel No. +91-11-39885050 for all queries related to test results.
(#) Sample drawn from outside source.

