

Name : Mr. DEVENDRA PRATAP

Lab No. : 305534283 Ref By : DR A BATSH

Collected : 7/10/2022 11:49:00AM

A/c Status : P

Collected at : VERMA DIAGNOSTIC

B-24, MITRA MANDAL COLONY, SAKET VIHAR, M

no -7050483752

Age : 31 Years Gender : Male

Reported : 7/10/2022 6:16:13PM

Report Status : Final

Processed at : Patna Lab II

R K ESTATE opposite IGIMS Raja Bazar Bailey

Road Patna-800014

## **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
SwasthFit Super 2			

( Electrical Impedence & Flow)			
Hemoglobin	14.60	g/dL	13.00 - 17.00
Packed Cell Volume (PCV)	48.30	%	40.00 - 50.00
RBC Count	5.22	mill/mm3	4.50 - 5.50
MCV	92.50	fL	83.00 - 101.00
MCH	28.00	pg	27.00 - 32.00
MCHC	30.20	g/dL	31.50 - 34.50
Red Cell Distribution Width (RDW)	14.70	%	11.60 - 14.00
Total Leukocyte Count (TLC)	8.22	thou/mm3	4.00 - 10.00
Differential Leucocyte Count (DLC)			
Segmented Neutrophils	61.10	%	40.00 - 80.00
Lymphocytes	32.40	%	20.00 - 40.00
Monocytes	2.90	%	2.00 - 10.00
Eosinophils	3.20	%	1.00 - 6.00
Basophils	0.40	%	<2.00
Absolute Leucocyte Count			
Neutrophils	5.02	thou/mm3	2.00 - 7.00
Lymphocytes	2.66	thou/mm3	1.00 - 3.00
Monocytes	0.24	thou/mm3	0.20 - 1.00
Eosinophils	0.26	thou/mm3	0.02 - 0.50
Basophils	0.03	thou/mm3	0.02 - 0.10
Platelet Count	168	thou/mm3	150.00 - 410.00

# Note

1. As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of



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**Test Report** 

Test Name Results Units Bio. Ref. Interval

blood

2. Test conducted on EDTA whole blood



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## **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
LIVER & KIDNEY PANEL, SERUM (Spectrophotometry, Indirect ISE)			
Bilirubin Total	0.50	mg/dL	<1.10
Bilirubin Direct	0.18	mg/dL	<0.20
Bilirubin Indirect	0.32	mg/dL	<1.10
AST (SGOT)	83.8	U/L	<40
ALT (SGPT)	186.4	U/L	<41
GGTP	23.0	U/L	<71.00
Alkaline Phosphatase (ALP)	52.00	U/L	<128
Total Protein	7.42	g/dL	6.40 - 8.30
Albumin	5.10	g/dL	3.97 - 4.94
A : G Ratio	2.20		0.90 - 2.00
Urea	18.10	mg/dL	19.00 - 44.00
Creatinine	0.80	mg/dL	<1.20
Uric Acid	4.20	mg/dL	3.4 - 7.0
Calcium, Total	8.92	mg/dL	8.6 - 10.0
Phosphorus	2.92	mg/dL	2.6 - 4.5
Sodium	136.60	mEq/L	136.00 - 145.00
Potassium	4.39	mEq/L	3.5 - 5.1
Chloride	100.60	mEq/L	97 - 107



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## **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD (HPLC, NGSP certified)			
HbA1c	5.4	%	4.00 - 5.60
Estimated average glucose (eAG)	108	mg/dL	

## Interpretation

HbA1c result is suggestive of non diabetic adults (>=18 years)/ well controlled Diabetes in a known Diabetic

**Note:** Presence of Hemoglobin variants and/or conditions that affect red cell turnover must be considered, particularly when the HbA1C result does not correlate with the patient's blood glucose levels.

FACTORS THAT INTERFERE WITH HbA1C	FACTORS THAT AFFECT INTERPRETATION
MEASUREMENT	OF HBA1C RESULTS
Hemoglobin variants,elevated fetal hemoglobin (HbF) and chemically modified derivatives of hemoglobin (e.g. carbamylated Hb in patients with renal failure) can affect the accuracy of HbA1c measurements	Any condition that shortens erythrocyte   survival or decreases mean erythrocyte   age (e.g.,recovery from acute blood loss,   hemolytic anemia, HbSS, HbCC, and HbSC)   will falsely lower HbAlc test results   regardless of the assay method used.Iron   deficiency anemia is associated with   higher HbAlc





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no -7050483752 - Bailey Road Patna-800014

## **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
GLUCOSE, FASTING (F), PLASMA	92.00	mg/dL	70.00 - 100.00
(Hexokinase)			





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**Report Status** 

Bailey Road Patna-800014

**Final** 

## **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
THYROID PROFILE,TOTAL, SERUM (ECLIA)			
T3, Total	1.79	ng/mL	0.80 - 2.00
T4, Total	8.60	μg/dL	5.10 - 14.10
TSH	5.62	μIU/mL	0.27 - 4.20

#### Note

- 1. TSH levels are subject to circadian variation, reaching peak levels between 2 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%. hence time of the day has influence on the measured serum TSH concentrations.
- 2. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy.
- 3. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration
- 4. Values <0.03 uIU/mL need to be clinically correlated due to presence of a rare TSH variant in some individuals





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## **Test Report**

Test Name	Results	Units	Bio. Ref. Interval
LIPID SCREEN, SERUM (CHO-POD)			
Cholesterol, Total	164.70	mg/dL	<200
Triglycerides	151.50	mg/dL	<150.00
HDL Cholesterol	29.30	mg/dL	>40
LDL Cholesterol, Calculated	105.10	mg/dL	<100.00
VLDL Cholesterol,Calculated	30.30	mg/dL	<30.00
Non-HDL Cholesterol	135	mg/dL	<130

# Interpretation

	REMARKS	TOTAL CHOLESTEROL	TRIGLYCERIDE   in mg/dL	LDL CHOLESTEROL   in mg/dL	NON HDL CHOLESTEROL     in mg/dL
	Optimal	<200	<150	<100	<130
	Above Optimal	_		100-129	130 - 159
	Borderline High	200-239	150-199	130-159	160 - 189
	High	>=240	200-499	160-189	190 - 219
	Very High	-	>=500	>=190	>=220

# Note

- 1. Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL& LDL Cholesterol.
- 2. NLA-2014 recommends a complete lipoprotein profile as the initial test for evaluating cholesterol.



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# **Test Report**

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- Friedewald equation to calculate LDL cholesterol is most accurate when Triglyceride level is < 400 mg/dL. Measurement of Direct LDL cholesterol is recommended when Triglyceride level is > 400 mg/dL
- 4. NLA-2014 identifies Non HDL Cholesterol(an indicator of all atherogeniclipoproteins such as LDL, VLDL, IDL, Lpa, Chylomicron remnants)along with LDL-cholesterol as co- primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL &Non HDL.
- 5. Apolipoprotein B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
- 6. Additional testing for Apolipoprotein B, hsCRP,Lp(a ) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

## Treatment Goals as per Lipid Association of India 2016

RISK	RISK   TREATMENT GOAL   CATEGORY		CONSIDER THERAPY	
CATEGORY			LDL CHOLESTEROL   (LDL-C)(mg/dL)	NON HDL CHLOESTEROL (NON HDL-C) (mg/dL)
Very   High	<50		>=50	>=80
High	<70	<100	>=70	>=100
Moderate	<100	<130	>=100	>=130
Low	<100	<130	>=130*	>=160*

<sup>\*</sup>In low risk patient, consider therapy after an initial non-pharmacological intervention for at least 3 months

Dr Manju Sharma DCP, Pathology Chief of Laboratory Dr Lal PathLabs Ltd

Manju Sharma

Dr.Shalini Sinha MBBS, DCP Chief of Lab

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



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## **Test Report**

**Test Name** 



Units

Bio. Ref. Interval

## **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. •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. •This is computer generated medical diagnostic report that has been validated by Authorized Medical Practitioner/Doctor. •The report does not need physical signature.

(#) Sample drawn from outside source.

If Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

Tel: +91-11-49885050,Fax: - +91-11-2788-2134, E-mail: lalpathlabs@lalpathlabs.com



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