Dr Lal PathLabs

Regd. Office : Dr Lal PathLabs Ltd, Block-E, Sector-18, Rohini, New Delhi-110085
Web : www.lalpathlabs.com, CIN: L74899DL1995PLC065388

Name	: Ms. KAJAL SHAH	**Age**	: 45 Years
Lab No.	: 488408559	**Gender**	: Female
Ref By	: DR MITESH D SHAH	**Reported**	: 18/9/2025 11:27:12AM
Collected	: 18/9/2025 8:50:00AM	**Report Status**	: Final
A/c Status	: P	**Processed at**	: LPL-PRAHLAD NAGAR LAB
Collected at	: A.S.SOLANKI COLLECTION CENTRE		002/101/102, Titanium City Centre Mall,
			100 Feet Road, Next to Sachin Tower,
			Prahladnagar, Satellite
			Ahmedabad-380015

MC-6379

Test Report

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE BASIC (Spectrophotometry)			
Cholesterol Total	194	mg/dL	<200.00
Triglycerides	**161**	mg/dL	<150.00
HDL Cholesterol	**48**	mg/dL	>50.00
LDL Cholesterol,Direct	**131**	mg/dL	<100.00
VLDL Cholesterol	**32**	mg/dL	<30.00
Non-HDL Cholesterol	**146**	mg/dL	<130.00

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. Lipid Association of India (LAI) recommends screening of all adults above the age of 20 years for Atherosclerotic Cardiovascular Disease (ASCVD) risk factors especially lipid profile. This should be done earlier if there is family history of premature heart disease, dyslipidemia, obesity or other risk factors
3. Triglycerides levels >150 mg/dL in fasting or >175 mg/dL in non-fasting are considered risk modifier for ASCVD risk
4. Test conducted in Serum

Treatment Goals for Lipid lowering therapy*

	TREATMENT GOAL	
ASCVD RISK CATEGORY	LDL-C in mg/dL (Primary target)	NON HDL-C in mg/dL (Co-Primary target)
Low	<100	<130
Moderate	<100	<130
High	<70	<100
Very High	<50	<80
Extreme (A)	<50 (<30 Optional)	<80 (< 60 optional)
Extreme (B)	<30	<60

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ASCVD Risk Stratification in Indian population*

Indians are at very high risk of developing ASCVD, they usually get the disease at an early age, have a more severe form of the disease and have poorer outcome as compared to the western populations. Many individuals remain asymptomatic before they get heart attack, ASCVD risk helps to identify high risk individuals even when there is no symptom related to heart disease. Risk stratification is important to guide lipid lowering therapy and to identify treatment goals.

*Reference: Lipid Association of India 2023 update on cardiovascular risk assessment and lipid management in Indian

patients: Consensus statement IV

Please Note: A more formal risk assessment may be used by clinicians according to their personal preferences and

familiarity with the risk scores

Risk factors/markers

Major ASCVD risk factors

1. Age ≥45 years in males and ≥55 years in females
2. Current cigarette smoking or tobacco use*
3. High blood pressure*
4. Low HDL-C

High-risk features

1. Family history of premature ASCVD
2. CKD stage 3B or 4
3. Apolipoprotein B >130 mg/dL
4. Extreme elevation of a single risk factor†
5. Lipoprotein (a) ≥50 mg/dL
6. Metabolic syndrome
7. Non-alcoholic fatty liver disease with fibrosis grade 2 or 3 fibrosis
8. CACS 1-99 and <75th percentile

Risk modifiers

1. Lipoprotein (a) 20-49 mg/dL
2. Impaired fasting glucose (fasting blood glucose 100-125 mg/dL) ‡
3. Increased waist circumference (>90 cm in men, >80 cm in women) §
4. hsCRP >2 mg/L¶
5. Plasma triglycerides >150 mg/dL fasting or >175 mg/dL non-fasting
6. Rheumatoid arthritis, psoriasis, and spondyloarthropathies
7. Premature menopause, pre-eclampsia, gestational diabetes, PCOS
8. High polygenic risk score
9. Air pollution
10. Human immunodeficiency virus infection

Risk groups

Low risk

0-1 major ASCVD risk factor, and

LDL-C 100-129 mg/dL, and

Non-HDL-C 130-159 mg/dL, and

Life-time CVD risk <30%#

Moderate risk

- 2 major ASCVD risk factors, or
- LDL-C 130-159 mg/dL or
- Non-HDL-C 160-189 mg/dL or
- Low-risk group with ≥1 risk modifier or lifetime ASCVD risk >30%

High risk

- ≥3 major ASCVD risk factors, or
- LDL-C 160-189 mg/dL or
- Non-HDL-C 190-219 mg/dL or
- Diabetes with 0-1 major ASCVD risk factors or
- 2 major ASCVD risk factor + ≥1 risk modifier or
- Any 1 high-risk feature

Very high risk

- Diabetes with target organ damage
- Diabetes with ≥2 major ASCVD risk factors
- CACS 100-299 or >75th percentile if CACS 1-99
- ≥2 high risk features
- Established ASCVD (obstructive or non-obstructive)$
- Heterozygous FH or LDL-C ≥190 mg/dL

Extreme risk

Category A

- ASCVD with ≥1 feature of high-risk group
- CACS ≥300
- Homozygous FH

Category B

ASCVD with-
- ≥1 feature of very high-risk group, or
- Recurrent ACS, or
- Polyvascular disease, or
- Homozygous FH

Recurrent ASCVD event despite LDL-C around 30 mg/dL
These patients require special consideration, please see the text for more details- **Category C**

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Test Report

Test Name	Results	Units	Bio. Ref. Interval

Dr Rucha Desai
MD, Pathology
Consultant Pathologist
Dr Lal PathLabs Ltd

Dr Rushabh Patel
MD, Pathology
Consultant Pathologist
Dr Lal PathLabs Ltd

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

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.

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