



SID No : 121002196

Branch : INDOCARE -DELHI Mrs. MINAKSHI MISHRA Age / Sex: 37 Y / Female

Ref. By : INDOCARE PATHOLOGY LABS Pvt Ltd.,

Patient ID : A210016321

Collected Date: 13/08/2024 / 15:47

Received Date: 13/08/2024 / 18:34

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Final Test Report

Page 1 of 10

Specimen	Test Name	Result	Units	Reference Range / Method
HAEMATOLO	OGY			
Full Body He	ealth Checkup Package			
Complete blo	ood count			
EDTA BLOOD	Haemoglobin	12.7	g/dL	12.0 - 15.0 (Colorimetric)
EDTA BLOOD	Total WBC count	7370	cells/cum m	4000 - 10000 (Electrical Impedance)
Differential	Count			
EDTA BLOOD	NEUTROPHILS	67.30	%	40 - 70 (DHSS)
EDTA BLOOD	LYMPHOCYTES	22.30	%	20 - 45 (DHSS)
EDTA BLOOD	EOSINOPHILS	4.20	%	1.00 - 7.00 (DHSS)
EDTA BLOOD	MONOCYTES	5.30	%	2.00 - 7.00 (DHSS)
EDTA BLOOD	BASOPHILS	0.90	%	0 - 1 (DHSS)
EDTA BLOOD	PCV	38.1	%	37.0 - 47.0 (Calculated)
EDTA BLOOD	Red Blood Cell (RBC) Count	4.65	million/cu mm	3.80 - 4.80 (Electrical Impedance)
EDTA BLOOD	MCV	81.8	fl	83.0 - 101.0 (Electrical Impedance)
EDTA BLOOD	MCH	27.3	%	27.0 - 32.0 (Calculated)
EDTA BLOOD	MCHC	33.3	%	31.5 - 34.5 (Calculated)
EDTA BLOOD	Platelet count	184000	cells/cum m	150000 - 410000 (Electrical Impedance)

Verified By Dr.Nisha Singh Dr.R.Karthick Prabhu MD., (Path)

Consultant Pathologist









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Page 2 of 10

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EDTA BLOOD	Absolute Neutrophils	4920	cells/cum m	2000 - 7000 (Calculated)
EDTA BLOOD	Absolute Lymphocytes	1630	cells/cum m	1000 - 3000 (Calculated)
EDTA BLOOD	Absolute Eosinophils	300	cells/cum m	20 - 500 (Calculated)
EDTA BLOOD	Absolute Monocytes	390	cells/cum m	200 - 1000 (Calculated)
EDTA BLOOD	Absolute Basophils	70	cells/cum m	20 - 100 (Calculated)
EDTA BLOOD	RDW - CV	13.8	%	11.0 - 16.0 (Calculated)
EDTA BLOOD	RDW - SD	41.2	fl	37.0 - 54.0 (Automated)
EDTA BLOOD	PDW	17.4	fl	9.0 - 17.0 (Automated)
EDTA BLOOD	MPV	10.1	fl	9.0 - 13.0 (Electrical Impedance)
EDTA BLOOD	PCT	0.19	%	0.17 - 0.38 (Automated)
EDTA BLOOD	ESR	25	mm	0 - 12 (Westergran Method)

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Page 3 of 10

Specimen	Test Name	Result	Units	Reference Range / Method			
BIOCHEM	BIOCHEMISTRY						
Full Body	Health Checkup Package						
Lipids Pro	file						
Serum	Cholesterol, Total	160.7	mg/dL	Desirable: <200 Borderline high: 200 - 239 High: >239 (Enzymatic: CHOD-PAP)			
Note: Above	Biological interval is based on 9 to 12 hou	urs fasting.					
Serum	Triglycerides	107.60	mg/dL	Normal: <150 High: 150 - 199 Hypertriclyceridemic: 200 - 499 Very High: >499 (Enzymatic Colorimetric: GPO-PAP)			
Note: Above	Biological interval is based on 9 to 12 hou	urs fasting					
Serum	Cholesterol, HDL	37.3	mg/dL	Low : < 40 High : >=60 (Enzymatic-Colorimetric)			
Serum	Cholesterol, LDL	101.9	mg/dL	$\begin{array}{llllllllllllllllllllllllllllllllllll$			
Serum	Cholesterol, VLDL	21.5	mg/dL	Less than 30 (NCEP ATP-III) (Calculation)			
Serum	Cholesterol/HDL Ratio	4.3		Castelli's Risk Index -I Ideal : <3.5			

J. Fathima N_

Dr.Fathima Nasreen MD.,

Consultant Biochemist







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Final Test Report

Page 4 of 10

Specimen	Test Name	Result	Units	Reference Range / Method
				Good: 3.5-5.0 High: >=5 (Calculation)
Serum	HDL/LDL Ratio	0.4	Ratio	Optimal: >0.4 Moderate: 0.3-0.4 High: <0.3 (Calculation)
Serum	LDL/HDL Ratio	2.7	Ratio	Castelli's Risk Index -II Ideal: <2.0 Good: 2.0-5.0 High: >=5 (Calculation)
Serum	Non - HDL Cholesterol	123.4	mg/dL	Adult (NCEP ATP-III) Optimal : <130 Near or above optimal : 130-159 Borderline high : 160-189 High : 190-219 Very high : >220 (Calculation)
Kidney Fu	nction.			
Serum	Blood Urea Nitrogen (BUN)	12.8	mg/dL	6.9-18.0 (Enzymatic)
Serum	Urea	27.40	mg/dL	16.60 - 48.50 (Urease/GLDH)
Serum	Creatinine.	0.72	mg/dL	0.60 - 1.10 (Jaffe)
Serum	Uric Acid.	2.90	mg/dL	2.60 - 6.00 (Enzymatic-Colorimetric)
Serum	Sodium.	139	mmol/L	136 - 145 (ISE Indirect)
Serum	Potassium.	4.4	mmol/L	3.5 - 5.1 (ISE Indirect)
Serum	Chloride.	99	mmol/L	98 - 107 (ISE Indirect)
Serum	Urea Creatinine Ratio	38.1	Ratio	(Calculation)

J. FathimaN_

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Page 5 of 10

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Bun Creatinine Ratio	17.80	Ratio	(Calculated)
Liver Fund	ction			
Serum	Bilirubin, Total	0.25	mg/dL	Premature: Cord : < 2.0 0 - 1 day : 1.0 - 8.0 1 - 2 days : 6.0 - 12.0 3 - 5 days : 10.0 - 14.0 Full term: Cord : < 2.0 0 - 1 day : 2.0 - 6.0 1 - 2 days : 6.0 - 10.0 3 - 5 days : 4.0 - 8.0 Adult : 0.0 - 2.0 (Colorimetric : Diazo)
Serum	Bilirubin, Direct	0.19	mg/dL	0.0 - 2.0 (Colorimetric : Diazo)
Serum	Bilirubin, Indirect	0.06	mg/dL	0.1 - 1.0 (Calculated)
Serum	Aspartate aminotransferase (AST/SGOT)	25.20	U/L	Adult Male: <35 Female: <31 (IFCC without P5P)
Serum	Alanine aminotransferase (ALT/SGPT)	10.90	U/L	Less than 33 (IFCC without P5P)
Serum	SGOT/SGPT	2.3	Ratio	Upto 1.7 (Calculation)
Serum	Gamma Glutamyl-Transferase (GGT)	12.0	U/L	5.0 - 36.0 (IFCC)
Serum	Total Protein.	7.30	g/dL	6.40 - 8.30 (Colorimetric-Biuret)

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Page 6 of 10

Specimen	Test Name	Result	Units	Reference Range / Method
Serum	Albumin.	3.99	g/dL	3.50 - 5.20 (Colorimetric: Bromocresol Green)
Serum	Globulin.	3.31	g/dL	2.0-3.9 (Calculated)
Serum	Albumin/Globulin	1.2	Ratio	(Calculated)
Serum	Alkaline phosphatase	97.0	U/L	40.0 - 129.0 (Colorimetric : p- Nitrophenyl Phosphate-AMP Buffer)
Bone Health				
Serum	Calcium	9.2	mg/dL	8.6 - 10.2 (Colorimetric : 5-nitro-5'-methyl-BAPTA)
Serum	Phosphorous	6.75	mg/dL	2.50 - 4.50 (Phosphomolybdate-UV)
Remarks: Re	quested the physician to interpret the resu	ılts with clinical sig	gnificance	
Serum	IRON	51.2	ug/dl	33.0 - 193.0 (FerroZine)
HbA1c				
EDTA BLOOD	Glycosylated Haemoglobin (HbA1c)	5.7	%	Adult Normal : < 5.7% Prediabetic : 5.7-6.4% Diabetic : >= 6.5% A1C Goals Reasonable Goal : <7% More stringent goal : <6.5% Less stringent goal : <8.0% (Immunoturbidimetry) (Ref: ADA, 2018) (Immunoturbidimetry)

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Page 7 of 10

Specimen	Test Name	Result	Units	Reference Range / Method
EDTA BLOOD	Estimated Average Glucose (eAG)	116.9	mg/dL	
Fluoride	Glucose, Fasting	110.0	mg/dL	Healthy Adult or children: less than 100 Pre diabetic: 100 - 125 Diabetic: 126 or above (ADA 2019) (Hexokinase)

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Final Test Report

Page 8 of 1

Specimen	Test Name	Result	Units	Reference Range / Method				
IMMUNOLOGY								
Full Body	Full Body Health Checkup Package							
Serum	TSH	3.200	uIU/ml	Adult: 0.270 - 5.350 First Trimester: 0.1 - 2.5 Second Trimester: 0.2 - 3.0 Third Trimester: 0.2 - 3.0 (ECLIA)				
is occurring w other tests/fir medications n When a high s	of thin a dynamic system and for treatment pur nding for confirmation. Many multivitamins (su nay affect thyroid test results, and their use sl	pose, the results should b ich as Vit B7), supplement nould be discussed with th	e accessed in conjug ts (especially hair, sk e healthcare practiti	dian variation. Hence thyroid test is only a snapshot of what gation with patient medical history, clinical examination & kin, and nail) and over-the-counter and prescription oner prior to testing. er along with thyroid antibodies after excluding nonthyroidal				
Serum	Т3	1.05	ng/ml	0.80 - 2.00 (ECLIA)				
Serum	T4	7.45	ug/dl	5.10 - 14.10 (ECLIA)				
Serum	25 Hydroxyvitamin D	17.4	ng/ml	Deficiency: <20.0 Insufficiency: 21 - 30 Sufficiency: >30 (ECLIA)				

Comments: Vitamin D is a fat-soluble steroid hormone precursor that is mainly produced in the skin by exposure to sunlight. Vitamin D is biologically inert and must undergo two successive hydroxylations in the liver and kidney to become the biologically active 1,25 - dihydroxyvitamin D. It is commonly agreed that 25-hydroxyvitamin D is the metabolite to determine the overall vitamin D status as it is the major storage form of vitamin D in the human body. This primary circulating form of vitamin D is present human body with levels approximately 1000 fold greater than the circulating 1,25-dihydroxyvitamin D. The half-life of circulating 25-hydroxyvitamin D is 2-3 weeks.

Vitamin D is essential for: Bone health. In children, severe deficiency leads to bone-malformation, known as rickets. Milder degrees of insufficiency are believed to cause reduced efficiency in the utilization of dietary calcium.

Vitamin D deficiency causes: Muscle weakness in elderly, the risk of falling has been attributed to the effect of vitamin D on muscle function. Vitamin D deficiency is a common cause of secondary hyperparathyroidism. Elevations of PTH levels, especially in elderly vitamin D deficient adults can result in osteomalacia, increased bone turnover, reduced bone mass and risk of bone fractures. Low vitamin D (25-OH) concentrations are also associated with lower bone mineral density. The results should always be assessed in conjunction with the patient's medical history, clinical examination and other findings.

Serum VITAMIN B 12 297 pg/ml 197 - 771 (ECLIA)

Note: Vitamin B12 or cyanocobalamin, is a complex corrinoid compound found exclusively from animal dietary sources, such as meat, eggs and milk. It is critical in normal DNA synthesis, which in turn affects erythrocyte maturation and in the formation of myelin sheath.

Vitamin-B12 is used to find out neurological abnormalities and impaired DNA synthesis associated with macrocytic anemias. The test results should always be assessed in conjunction with the patients medical history, clinical examination and other findings.

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Page 9 of 1

Specimen	Test Name	Result	Units	Reference Range / Method
CLINICAL PA	ATHOLOGY			
Full Body He	ealth Checkup Package			
Urine complet	te analysis			
URINE	COLOUR	Pale Yellow		Pale yellow (Naked Eye Examination) (Macroscopic)
URINE	SP. GRAVITY	1.005		1.016 - 1.022 (Automated strip - Ion concentration) (Reflectance photometry)
URINE	рН	8.0		4.8 - 7.4 (Reflectance photometry)
URINE	PROTEIN.	Not present		Not Present (Automated strip – protein error of a pH indicator/ Manual – Sulphosalicylic acid method (Reflectance photometry)
URINE	GLUCOSE	Not present		Not Present (Automated strip –GOD/POD/Manual – Benedicts test) (Reflectance photometry)
URINE	BILIRUBIN	Not present		Not Present (Automated strip –Diazonium salt/Manual – Fouchet's test) (Reflectance photometry)
URINE	UROBILINOGEN	Normal		Within normal limits (Automated strip –Diazonium salt/Manual – Ehrlich's aldehyde method) (Reflectance photometry)
URINE	KETONES	Not present		Not Present (Automated strip –Legal's test/Manual – Rothera's method) (Reflectance

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Page 10 of 1

Specimen	Test Name	Result	Units	Reference Range / Method
				photometry)
URINE	NITRITES	Negative		Negative (Automated strip –Griess test) (Reflectance photometry)
URINE	LEUCOCYTES	4 - 6	/hpf	3 – 5 (Manual - Light Microscopy)
URINE	RBCs	Not Present	/hpf	Occasional (Manual - Light Microscopy)
URINE	EPITHELIAL CELLS	3 - 4	/hpf	Few (Manual - Light Microscopy)
URINE	CAST	Not Present	/hpf	Not present (Manual - Light Microscopy)
URINE	CRYSTALS	Not Present	/hpf	Not present (Manual - Light Microscopy)

Verified By Mr.A.Babu Dr.R.Karthick Prabhu MD., (Path)

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