



MAXWELL AKPADZI

PID NO: P36240007130

Age: 56 Year(s) Sex: Male



Reference:

Sample Collected At:

Nuffield Clinic
8, Sunkwa Road, Osu Re, Accra
Processing Location:- MHGL Accra –
Pyramid Building, Ring Road central.
Digital Address: GA-027-1443

VID: 36240105615

Registered On:

17/05/2024 07:28 PM

Collected On:

17/05/2024

Reported On:

18/05/2024 10:34 AM

Investigation	Observed Value	Unit	Biological Reference Interval
<u>Bun Creatinine Report</u>			
<u>Urea, Serum</u>			
(Serum,Urease)			
Urea Serum	4.65	mmol/L	1.7-8.3
<u>Electrolytes</u>			
(Serum,ISE)			
Sodium	142.9	mmol/L	135-155
Potassium	4.59	mmol/L	3.6-5.5
Chlorides	107	mmol/L	98-107
<u>GFR With Creatinine</u>			
(Serum,Jaffe)			
Creatinine	94.78	µmol/L	30-120
eGFR (CKD-EPI)	81.2	ml/min/1.73 sq m	Normal -OR mild decrease in GFR: > 59 Moderate decrease GFR: 30-59 Severe decrease in GFR: 15-29 End stage Kidney failure: < 15

Note: Equation is not valid for patients below 18 years of age.Calculated by IDMS-Traceable CKD-EPI creatinine equation.

Liver Function Test-2(Mini)

Proteins

Total Protein	71.05	g/L	64-83
(Serum,Colorimetry)			
Albumin	38.36	g/L	38-50
(Serum,Bromocresol green)			
Globulin	32.69	g/L	29-33
(Serum)			
A/G Ratio	1.17		1.0-2.3
(Serum)			

BilirubinTotal, Direct, IndirectSerum

Bilirubin-Total	15.41	µmol/L	3.42-20.52
(Serum,Diazo)			
Bilirubin-Direct	4.23	umol/l	<= 4.3
(Serum,Diazo)			
Bilirubin- Indirect	11.18	µmol/L	1.71-17.1
(Serum,Calculated)			
SGPT (ALT)	24.80	U/L	0-42
(Serum,Enzymatic)			

EDWARD.CLARKE
Medical Laboratory Scientist



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SGOT (AST)

(Serum, Enzymatic)

23.13

U/L

0-40

Alkaline Phosphatase

(Serum, PNPP, AMP Buffer)

105.45

U/L

32-111

Gamma GT (GGTP)

(Serum, Catalytic activity - multiple point rate)

62.29

U/L

12-64

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Investigation	Observed Value	Unit	Biological Reference Interval
<u>Prothrombin Time (PT)</u> (Citratd plasma)			
Prothrombin Time	14.8	sec	11-16
Control (MNPT)	13	sec	--
Ratio	1.1		--
Index	87.84	%	--
PT(INR) Value	1.1	--	Normal Population : 0.8 - 1.2 Standard Therapy: 2.0-3.0 High Dose Therapy: 3.0-4.5

Semiautomated Coagulometer

Interpretation :

The prothrombin time (PT) and international normalized ratio (INR) are measures of the extrinsic pathway of coagulation.

The INR is used only for patients on stable oral anticoagulant therapy. It makes no significant contribution to the diagnosis or treatment of patients whose PT is prolonged for other reasons.

Increased PT times may be due to:

Factor deficiencies(X , II , V , I), Coumadin (warfarin) therapy, Liver Diseases (Bile duct obstruction, Cirrhosis , Hepatitis), Hemorrhagic Disease of the newborn, DIC, Malabsorption, Fibrinolysis, Vitamin K deficiency.

Interference in PT/INR

Alcohol,antibiotics, aspirin, cimetidine,thrombin Inhibitors(Increase PT) Barbiturates, oral contraceptives, hormone-replacement therapy (HRT), and vitamin K (Decrease PT).

-- End of Report --

EDWARD.CLARKE
Medical Laboratory Scientist