

LPL - PSC-SHAKTI NGR 24/26,Ground Floor, Shakti Nagar, Adj. G ovt. Girls School No. 1, New Delhi-11000 DELHI









Name : Mrs. RITU GOEL

156664184

Age: 48 Years

Gender: Female

Collected Received Reported : 24/4/2021 11:00:00AM : 24/4/2021 11:18:23AM : 24/4/2021 6:43:55PM

A/c Status : P Ref By : MCD Report Status : Final

Test Name	Results	Units	Bio. Ref. Interval
D - DIMER, QUANTITATIVE	0.41	mg/L FEU	<0.50
(Immunoturbidimetry)			

Note

Lab No.

- Degree of D-dimer increase does not definitely correlate with the clinical severity of associated disease state
- 2. Increased levels have a high probability of Venous thromboembolism (VTE) and require clinical correlation
- 3. Lipemia falsely decreases D-dimer levels
- 4. Test conducted on Citrated plasma.

Comments

D-Dimer is one of the measurable byproducts of activation of the fibrinolytic system. It assesses fibrinolytic activation and intravascular thrombosis. D-dimer assays are characteristic for Disseminated Intravascular Coagulation (DIC) as this test demonstrates simultaneous presence of thrombin and plasmin formation. It can also be elevated in individuals with large vessel thrombosis, soft tissue hematomas, Pulmonary embolism, recent surgery, active or recent bleeding, pregnancy, liver disease, malignancy and hypercoagulable states. D-Dimer is of particular value in excluding the diagnosis of venous thromboembolism among patients at high risk.

C-REACTIVE PROTEIN; CRP, SERUM	109.91	mg/L	<5.00	
(Immunoturbidimetry)				

Comments

CRP is an acute phase reactant which is used in inflammatory disorders for monitoring course and effect of therapy. It is most useful as an indicator of activity in Rheumatoid arthritis, Rheumatic fever, tissue injury or necrosis and infections. As compared to ESR, CRP shows an earlier rise in inflammatory disorders which begins in 4-6 hrs, the intensity of the rise being higher than ESR and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, Polycythemia etc.

FERRITIN, SERUM	358.20	ng/mL	10.00 - 291.00
(CLIA)			

Note: Increase in serum ferritin due to inflammatory conditions (Acute phase response) can mask a diagnostically low result

Comments

Serum ferritin appears to be in equilibrium with tissue ferritin and is a good indicator of storage iron in normal



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Test Name Results Units Bio. Ref. Interval hepatocellular diseases, subjects in most disorders. In patients with some malignancies inflammatory diseases, serum ferritin is a disproportionately high estimate of storage iron because serum ferritin is an acute phase reactant. In such disorders iron deficiency anemia may exist with a normal serum ferritin concentration. In the presence of inflammation, persons with low serum ferritin are likely to respond to iron therapy.

Increased Levels

Lab No.

- Iron overload Hemochromatosis, Thalassemia & Sideroblastic anemia
- Malignant conditions Acute myeloblastic & Lymphoblastic leukemia, Hodgkin's disease & Breast carcinoma
- Inflammatory diseases Pulmonary infections, Osteomyelitis, Chronic UTI, Rheumatoid arthritis, SLE, burns
- Acute & Chronic hepatocellular disease

Decreased Levels

Iron deficiency anemia

LDH;LACTATE DEHYDROGENASE, SERUM	350.00	U/L	<247.00
(IFCC)			

Comments

Lactate dehydrogenase (LDH) is a nonspecific enzyme found in most organs. Highest concentrations are found in liver, heart, kidney and blood cells. LDH measurements are used in the diagnosis and treatments of liver diseases like Acute viral hepatitis, Cirrhosis & Metastatic carcinoma; Cardiac diseases like Myocardial infarction; Tumors of lungs / kidneys & Hematologic disorders like Megaloblastic anemia & Hemolytic anemia.





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A/c Status

Dr Himangshu Mazumdar MD, Biochemistry Senior Consultant - Clinical Chemistry & Biochemical Genetics NRL - Dr Lal PathLabs Ltd Dr.Kamal Modi MD, Biochemistry Consultant Biochemist NRL - Dr Lal PathLabs Ltd

Dr Nimmi Kansal MD, Biochemistry National Head - Clinical Chemistry & Biochemical Genetics

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NRL - Dr Lal PathLabs Ltd

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Dr Anil Arora
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NRL - Dr Lal PathLabs Ltd

Granitains

Dr Gurleen Oberoi DM(Hematopathology), MD, DNB, MNAMS Consultant & Technical Lead -Hematopathology NRL - Dr Lal PathLabs Ltd

Dr Sunanda MD, Pathology Consultant

NRL - 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.*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.



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