Name	: **Mr. VISHAL NAGPAL**		
Lab No.	: **489949917**	**Age**	: **41 Years**
Ref By	: **Self**	**Gender**	: **Male**
Collected	: **20/7/2025 6:56:00AM**	**Reported**	: **20/7/2025 1:15:08PM**
A/c Status	: **P**	**Report Status**	: **Interim**
Collected at	: **PREET VIHAR HOME VISIT DELHI**	**Processed at**	: **LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**

Test Report

HEALTH PRIME RIDER PHC

Test Name	Results	Units	Bio. Ref. Interval
HEMOGRAM			
Hemoglobin (Photometry)	14.90	g/dL	13.00 - 17.00
Packed Cell Volume (PCV) (Calculated)	42.00	%	40.00 - 50.00
RBC Count (Electrical impedence)	5.14	mill/mm3	4.50 - 5.50
MCV (Derived from RBC histogram)	**81.70**	fL	83.00 - 101.00
Mentzer Index (Calculated)	15.9		
MCH (Calculated)	29.00	pg	27.00 - 32.00
MCHC (Calculated)	**35.40**	g/dL	31.50 - 34.50
Red Cell Distribution Width (RDW) (Derived from RBC histogram)	13.50	%	11.60 - 14.00
Total Leukocyte Count (TLC) (Electrical Impedence)	7.80	thou/mm3	4.00 - 10.00
Differential Leucocyte Count (DLC)			
Segmented Neutrophils (VCS Technology)	45.00	%	40.00 - 80.00
Lymphocytes (VCS Technology)	**40.40**	%	20.00 - 40.00
Monocytes (VCS Technology)	8.00	%	2.00 - 10.00
Eosinophils (VCS Technology)	**6.10**	%	1.00 - 6.00
Basophils (VCS Technology)	0.50	%	<2.00
Absolute Leucocyte Count			
Neutrophils (Calculated)	3.51	thou/mm3	2.00 - 7.00
Lymphocytes (Calculated)	**3.15**	thou/mm3	1.00 - 3.00
Monocytes (Calculated)	0.62	thou/mm3	0.20 - 1.00

Name	: **Mr. VISHAL NAGPAL**		
Lab No.	: **489949917**	**Age**	: **41 Years**
Ref By	: **Self**	**Gender**	: **Male**
Collected	: **20/7/2025 6:56:00AM**	**Reported**	: **20/7/2025 1:15:08PM**
A/c Status	: **P**	**Report Status**	: **Interim**
Collected at	: **PREET VIHAR HOME VISIT DELHI**	**Processed at**	: **LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**

Test Report

Test Name	Results	Units	Bio. Ref. Interval
Eosinophils (Calculated)	0.48	thou/mm3	0.02 - 0.50
Basophils (Calculated)	0.04	thou/mm3	0.02 - 0.10
Platelet Count (Electrical impedence)	150	thou/mm3	150.00 - 410.00
Mean Platelet Volume (Derived from Platelet histogram)	**13.1**	fL	6.5 - 12.0
E.S.R. (Automated, Modified Westergren)	2	mm/hr	0.00 - 15.00

Comment

In anaemic conditions Mentzer index is used to differentiate Iron Deficiency Anaemia from Beta- Thalassemia trait. If Mentzer Index value is >13, there is probability of Iron Deficiency Anaemia. A value <13 indicates likelihood of Beta- Thalassemia trait and Hb HPLC is advised to rule out the Thalassemia trait.

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 blood
2. Test conducted on EDTA whole blood

microcytic hypochromic RBCs+,
WBC is normal in number.

There is mild lymphocytosis
Platelets are adequate.

Name	: **Mr. VISHAL NAGPAL**		**Age**	: **41 Years**	
Lab No.	: **489949917**		**Gender**	: **Male**	
Ref By	: **Self**		**Reported**	: **20/7/2025 1:15:26PM**	
Collected	: **20/7/2025 6:56:00AM**		**Report Status**	: **Interim**	
A/c Status	: **P**				
Collected at	: **PREET VIHAR HOME VISIT DELHI**		**Processed at**	: **LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**	

Test Report

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE, BASIC, SERUM			
Cholesterol Total (CHO-POD)	193	mg/dL	<200.00
Triglycerides (GPO)	**309**	mg/dL	<150.00
HDL Cholesterol (Enzymatic Immunoinhibition)	40	mg/dL	>40.00
LDL Cholesterol,Direct (Enzymatic Selective Protection)	**120**	mg/dL	<100.00
VLDL Cholesterol (Calculated)	**62**	mg/dL	<30.00
Non-HDL Cholesterol (Calculated)	**153**	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

Treatment Goals for Lipid lowering therapy (as per Lipid Association of India 2023)

ASCVD RISK CATEGORY	TREATMENT GOAL	
	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

Name	: **Mr. VISHAL NAGPAL**		
Lab No.	: **489949917**	**Age**	: **41 Years**
Ref By	: **Self**	**Gender**	: **Male**
Collected	: **20/7/2025 6:56:00AM**	**Reported**	: **20/7/2025 1:15:26PM**
A/c Status	: **P**	**Report Status**	: **Interim**
Collected at	: **PREET VIHAR HOME VISIT DELHI**	**Processed at**	: **LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**

Test Report

Test Name	Results	Units	Bio. Ref. Interval

ASCVD Risk Stratification & Treatment goals 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.

CSI Clinical Practice guidelines (2024) recommends in the absence of formal risk calculator for Indian population, only risk factors can be used for risk assessment. Standard Risk factors are:

1. Smoking/tobacco use
2. Hypertension
3. Diabetes
4. Family h/o Premature CAD (Men <55 years and women <60 years)

Risk Assessment*

Low Risk	Moderate Risk	High Risk	Very High Risk	Extremely High Risk
No standard risk factor	Presence of any one standard risk factor	•Presence of 2 or more standard factors with no manifest ASCVD •DM with 1 or more risk factor •Heterozygous Familial Hypercholesterole-mia (HeFH) with no risk factor •Hypertension with one or more risk factor or with Target organ damage (TOD) •CKD- eGFR 30-59 ml/min	•ASCVD-CAD/PVD/CeVD •Imaging->50%lesion in any two major vessels •DM>20 years or multiple risk factors, TOD •HeFH-with ASCVD or RF •CKD-eGFR <30 ml/min	•ASCVD with recurrent vascular events •ASCVD with HeFH & High Lp(a)

* A more formal risk assessment may be used by clinicians according to their personal preferences and familiarity with the risk scores .

Name	: **Mr. VISHAL NAGPAL**				
Lab No.	: **489949917**		**Age**	: **41 Years**	
Ref By	: **Self**		**Gender**	: **Male**	
Collected	: **20/7/2025 6:56:00AM**		**Reported**	: **20/7/2025 1:15:43PM**	
A/c Status	: **P**		**Report Status**	: **Interim**	
Collected at	: **PREET VIHAR HOME VISIT DELHI**		**Processed at**	: **LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**	

Test Report

Test Name	Results	Units	Bio. Ref. Interval
UREA, SERUM			
Urea (Calculated)	27.00	mg/dL	13.00 - 43.00
BUN; Blood Urea Nitrogen (Urease UV)	12.61	mg/dL	7.00 - 20.00
THYROID PROFILE,TOTAL, SERUM (CLIA)			
T3, Total	1.37	ng/mL	0.60 - 1.81
T4, Total	9.00	µg/dL	4.50 - 11.60
TSH	3.36	µIU/mL	0.550 - 4.780

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

Name	: Mr. VISHAL NAGPAL		Age	: 41 Years
Lab No.	: 489949917		Gender	: Male
Ref By	: Self		Reported	: 20/7/2025 1:15:57PM
Collected	: 20/7/2025 6:56:00AM		Report Status	: Interim
A/c Status	: P		Processed at	: LPL-PREET VIHAR
Collected at	: PREET VIHAR HOME VISIT DELHI			Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092

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

Interpretation as per American Diabetes Association (ADA) Guidelines

Reference Group	Non diabetic adults >=18 years	At risk (Prediabetes)	Diagnosing Diabetes	Therapeutic goals for glycemic control
HbA1c in %	4.0-5.6	5.7-6.4	>= 6.5	<7.0

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 MEASUREMENT	FACTORS THAT AFFECT INTERPRETATION 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 HbA1c test results regardless of the assay method used.Iron deficiency anemia is associated with higher HbA1c

Name	:	**Mr. VISHAL NAGPAL**			
Lab No.	:	**489949917**	**Age**	:	**41 Years**
Ref By	:	**Self**	**Gender**	:	**Male**
Collected	:	**20/7/2025 6:56:00AM**	**Reported**	:	**20/7/2025 1:16:16PM**
A/c Status	:	**P**	**Report Status**	:	**Interim**
Collected at	:	**PREET VIHAR HOME VISIT DELHI**	**Processed at**	:	**LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**

Test Report

Test Name	Results	Units	Bio. Ref. Interval
GLUCOSE, FASTING (F), PLASMA (Hexokinase)	91.00	mg/dL	70 - 100

Name	:	**Mr. VISHAL NAGPAL**			
Lab No.	:	**489949917**	**Age**	:	**41 Years**
Ref By	:	**Self**	**Gender**	:	**Male**
Collected	:	**20/7/2025 6:56:00AM**	**Reported**	:	**20/7/2025 1:16:34PM**
A/c Status	:	**P**	**Report Status**	:	**Interim**
Collected at	:	**PREET VIHAR HOME VISIT DELHI**	**Processed at**	:	**LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**

Test Report

Test Name	Results	Units	Bio. Ref. Interval
CREATININE, SERUM (Modified Jaffe, IDMS Traceable)			
Creatinine	0.85	mg/dL	0.70 - 1.30
GFR Estimated	111	mL/min/1.73m2	>59
GFR Category	G1		

Note

1. GFR, estimated (eGFR) calculated using the 2021 CKD-EPI creatinine equation and GFR Category reported as per KDIGO guideline 2012.
2. eGFR category G1 or G2 does not fulfil the criteria for CKD, in the absence of evidence of kidney damage

Name	: **Mr. VISHAL NAGPAL**		
Lab No.	: **489949917**	**Age**	: **41 Years**
Ref By	: **Self**	**Gender**	: **Male**
Collected	: **20/7/2025 6:56:00AM**	**Reported**	: **20/7/2025 1:16:51PM**
A/c Status	: **P**	**Report Status**	: **Interim**
Collected at	: **PREET VIHAR HOME VISIT DELHI**	**Processed at**	: **LPL-PREET VIHAR Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092**

MC-5532

Test Report

Test Name	Results	Units	Bio. Ref. Interval
URINE EXAMINATION, ROUTINE; URINE, R/E			
Gross Examination			
Colour (Naked Eye Examination)	Pale Yellow		Pale yellow
Specific Gravity (pKa Change)	**1.035**		1.001 - 1.030
pH (Double indicator method)	5.5		5.0 - 8.0
Proteins (Tetra bromophenol Blue method)	Negative		Negative
Glucose (Glucose Oxidase Peroxidase Method)	Negative		Negative
Ketones (Nitroprusside Method)	Negative		Negative
Bilirubin (Diazotized Dichloroaniline Method)	Negative		Negative
Urobilinogen (Ehrlich Method)	Normal		Normal
Blood (Strip Test)	Negative		Negative
Leucocyte Esterase (Strip Test)	Negative		Negative
Nitrite (Diazonium Compound coupling)	Negative		Negative
Microscopy			
R.B.C. (Microscopy)	Negative		0-2 RBC/hpf
Pus Cells (Microscopy)	Negative		0-5 WBC / hpf
Epithelial Cells (Microscopy)	0-1 Epi Cells/hpf		0-5 Epi cells/hpf
Casts (Microscopy)	None seen		None seen/Lpf
Crystals (Microscopy)	None seen		None seen
Others (Light Microscopy)	None seen		None seen

Name	: Mr. VISHAL NAGPAL	**Age**	: 41 Years
Lab No.	: 489949917	**Gender**	: Male
Ref By	: Self	**Reported**	: 20/7/2025 1:16:51PM
Collected	: 20/7/2025 6:56:00AM	**Report Status**	: Interim
A/c Status	: P	**Processed at**	: LPL-PREET VIHAR
Collected at	: PREET VIHAR HOME VISIT DELHI		Plot no. 33, Defence Enclave, Vikas Marg, Preet Vihar, New Delhi-110092

Test Report

Test Name	Results	Units	Bio. Ref. Interval

DMC NO. DMC/R/9414

Dr. Raghav Chohda
MD Microbiology
Consultant Microbiologist
Dr Lal PathLabs Ltd

DMC/R/8941

Dr Sakshi Virmani
MD ,Pathology
Consultant Pathologist
Dr Lal PathLabs Ltd

Sneha Kumari
DMC NO. 90439

Dr.Sneha Kumari
DNB, Pathology
Chief of Laboratory
Dr Lal PathLabs Ltd

Result/s to follow:
LIVER PANEL 1; LFT,SERUM

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