

# Tests you can trust

Name : Manish Kumar Sinha(36Y/M)

Date : 19 May 2024

**Test Asked**: Executive Health Checkup Below 40 Yrs With Utsh



9 out of 10 Doctors trust that Thyrocare reports are accurate & reliable\*













Daily





# Accredited by





ISO 9001: 2015 - From 2015



CAP From 2007

### **Thyrocare**

Chouhatta, Opp Darbhanga house, Ashok Rajpath Rd, Patna-800 004





**TEST ASKED** 

♥ Thyrocare Technologies Limited, D-37/3, TTC MIDC, Turbhe, Navi Mumbai - 400703 📡 98706 66333 🖼 wellness@thyrocare.com

: EXECUTIVE HEALTH CHECKUP BELOW 40 YRS WITH UTSH

# 9 out of 10 Doctors Trust that Thyrocare Reports are Accurate & Reliable

: MANISH KUMAR SINHA(36Y/M) NAME

**HOME COLLECTION:** 

: SELF **REF. BY** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF GATE

NO 41 PATNA- PATNA BIHAR INDIA 800001-800001

**MOBILE NO** : 8910205855 PAN ID : 457035

DOB : 10/13/1987

## **Summary Report**

	<u> </u>						
Tests outside reference range							
TEST NAME OBSERVED VALUE UNITS Bio. Ref. Interval.							
COMPLETE HEMOGRAM							
MEAN CORP.HEMO.CONC(MCHC)	29.9	g/dL	31.5-34.5				
MEAN CORPUSCULAR VOLUME(MCV)	103.4	fL	83.0-101.0				
MONOCYTES - ABSOLUTE COUNT	0.18	X 10³ / μL	0.2 - 1.0				
PLATELET COUNT	120	X 10³ / μL	150-410				
TOTAL RBC	4.4	X 10^6/μL	4.5-5.5				
LIPID							
HDL / LDL RATIO	0.33	Ratio	> 0.40				
HDL CHOLESTEROL - DIRECT	39	mg/dL	40-60				
LDL CHOLESTEROL - DIRECT	119	mg/dL	< 100				
TRIG / HDL RATIO	4.71	Ratio	< 3.12				
TRIGLYCERIDES	184	mg/dL	< 150				
LIVER							
ALANINE TRANSAMINASE (SGPT)	47.5	U/L	< 45				
RENAL							
BUN / SR.CREATININE RATIO	27.9	Ratio	9:1-23:1				
CREATININE - SERUM	0.61	mg/dL	0.72-1.18				
UREA / SR.CREATININE RATIO	59.71	Ratio	< 52				

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# 9 out of 10 Doctors Trust that Thyrocare Reports are Accurate & Reliable

NAME : MANISH KUMAR SINHA(36Y/M)

**REF. BY** 

**TEST ASKED** : EXECUTIVE HEALTH CHECKUP BELOW 40 YRS WITH

UTSH

**HOME COLLECTION:** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF

GATE NO 41 PATNA- PATNA BIHAR INDIA

800001-800001

**MOBILE NO** : 8910205855

DOB : 10/13/1987 **PAN ID** : 457035

**VALUE TEST NAME TECHNOLOGY** UNITS HbA1c - (HPLC) H.P.L.C 5.3 %

Bio. Ref. Interval.:

Bio. Ref. Interval.: As per ADA Guidelines

Below 5.7% : Normal 5.7% - 6.4% : Prediabetic >=6.5% : Diabetic

**Guidance For Known Diabetics** 

Below 6.5%: Good Control 6.5% - 7% : Fair Control

7.0% - 8% : Unsatisfactory Control

>8% : Poor Control

Method: Fully Automated H.P.L.C method

AVERAGE BLOOD GLUCOSE (ABG) **CALCULATED** 105 mg/dL

Bio. Ref. Interval. :

90 - 120 mg/dl : Good Control 121 - 150 mg/dl : Fair Control

151 - 180 mg/dl: Unsatisfactory Control

> 180 mg/dl : Poor Control Method: Derived from HBA1c values

Please correlate with clinical conditions.

Sample Collected on (SCT)

Sample Received on (SRT) Report Released on (RRT)

**Sample Type** 

Labcode **Barcode** 

:19 May 2024 07:28

: 19 May 2024 15:19

: 19 May 2024 19:24

: EDTA Whole Blood

:1905086712/HCL01

:CG953784

Dr T Priyanka MD(Path)

Dr R Kumar MD (Path)

Page: 1 of 10

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**TEST ASKED** 

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: MANISH KUMAR SINHA(36Y/M) NAME

**REF. BY** : SELF

: EXECUTIVE HEALTH CHECKUP BELOW 40 YRS WITH

UTSH

**HOME COLLECTION:** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF GATE NO 41 PATNA- PATNA BIHAR INDIA

800001-800001

**MOBILE NO** : 8910205855 **PAN ID** : 457035

DOB : 10/13/1987

TEST NAME	METHODOLOGY	VALUE	UNITS	Bio. Ref. Interva
HEMOGLOBIN	SLS-Hemoglobin Method	13.6	g/dL	13.0-17.0
HEMATOCRIT(PCV)	CPH Detection	45.5	%	40.0-50.0
TOTAL RBC	HF & EI	4.4	X 10^6/μL	4.5-5.5
MEAN CORPUSCULAR VOLUME(MCV)	Calculated	103.4	fL	83.0-101.0
MEAN CORPUSCULAR HEMOGLOBIN(MCH)	Calculated	30.9	pq	27.0-32.0
MEAN CORP.HEMO.CONC(MCHC)	Calculated	29.9	g/dL	31.5-34.5
RED CELL DISTRIBUTION WIDTH (RDW-CV)	Calculated	13.1	%	11.6-14
TOTAL LEUCOCYTES COUNT (WBC)	HF & FC	6.28	X 10 <sup>3</sup> / μL	4.0 - 10.0
NEUTROPHILS	Flow Cytometry	53.8	%	40-80
LYMPHOCYTE	Flow Cytometry	36.9	%	20-40
EOSINOPHILS	Flow Cytometry	5.7	%	1-6
MONOCYTES	Flow Cytometry	2.9	%	2-10
BASOPHILS	Flow Cytometry	0.3	%	0-2
NEUTROPHILS - ABSOLUTE COUNT	Calculated	3.38	X 10 <sup>3</sup> / μL	2.0-7.0
LYMPHOCYTES - ABSOLUTE COUNT	Calculated	2.32	X 10 <sup>3</sup> / μL	1.0-3.0
EOSINOPHILS - ABSOLUTE COUNT	Calculated	0.36	X 10 <sup>3</sup> / μL	0.02 - 0.5
MONOCYTES - ABSOLUTE COUNT	Calculated	0.18	X 10 <sup>3</sup> / μL	0.2 - 1.0
BASOPHILS - ABSOLUTE COUNT	Calculated	0.02	X 10 <sup>3</sup> / μL	0.02 - 0.1
PLATELET COUNT	HF & EI	120	X 10 <sup>3</sup> / μL	150-410
IMMATURE GRANULOCYTES(IG)	Calculated	0.03	X 10 <sup>3</sup> / μL	0-0.3
IMMATURE GRANULOCYTE PERCENTAGE(IG%)	Flow Cytometry	0.4	%	0-0.5
NUCLEATED RED BLOOD CELLS	Calculated	0.01	X 10 <sup>3</sup> / μL	0.0-0.5
NUCLEATED RED BLOOD CELLS %	Flow Cytometry	0.1	%	0.0-5.0

Please Correlate with clinical conditions.

Method: Fully automated bidirectional analyser (6 Part Differential SYSMEX XN-1000)

(Reference: \*FC- flowcytometry, \*HF- hydrodynamic focussing, \*EI- Electric Impedence, \*Hb- hemoglobin, \*CPH- Cumulative pulse height)

Sample Collected on (SCT)

.19 May 2024 07:28

Sample Received on (SRT)

. 19 May 2024 15:19

Report Released on (RRT)

. 19 May 2024 19:24

**Sample Type** Labcode

. EDTA Whole Blood

: 1905086712/HCL01

Dr T Priyanka MD(Path)

Dr R Kumar MD (Path)

**Barcode** : CG953784

Page: 2 of 10

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NAME : MANISH KUMAR SINHA(36Y/M)

**REF. BY** : SELF

: EXECUTIVE HEALTH CHECKUP BELOW 40 YRS **TEST ASKED** 

WITH UTSH

**HOME COLLECTION:** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF

GATE NO 41 PATNA- PATNA BIHAR INDIA

457035

800001-800001

**MOBILE NO** : 8910205855 **PAN ID** 

: 10/13/1987 DOB

> **VALUE UNITS TECHNOLOGY**

FASTING BLOOD SUGAR(GLUCOSE) **PHOTOMETRY** 98 mg/dL

#### Bio. Ref. Interval. :-

**TEST NAME** 

As per ADA Guideline: Fasting Plasma Glucose (FPG)			
Normal 70 to 100 mg/dl			
Prediabetes 100 mg/dl to 125 mg/dl			
Diabetes	126 mg/dl or higher		

#### Note:

The assay could be affected mildly and may result in anomalous values if serum samples have heterophilic antibodies, hemolyzed, icteric or lipemic. The concentration of Glucose in a given specimen may vary due to differences in assay methods, calibration and reagent specificity. For diagnostic purposes results should always be assessed in conjunction with patients medical history, clinical findings and other findings.

Please correlate with clinical conditions.

Method:-**GOD-PAP METHOD** 

Sample Collected on (SCT)

: 19 May 2024 07:28

Sample Received on (SRT)

: 19 May 2024 15:23

Report Released on (RRT)

: 19 May 2024 16:12

. FLUORIDE

: 1905087400/HCL01

Dr T Priyanka MD(Path)

Dr R Kumar MD (Path)

**Barcode** 

Labcode

Sample Type

: CF038487

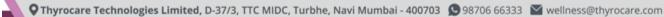
Page: 3 of 10

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**TEST ASKED** 

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NAME : MANISH KUMAR SINHA(36Y/M) **REF. BY** 

: SELF

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UTSH

**HOME COLLECTION:** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF

GATE NO 41 PATNA- PATNA BIHAR INDIA

800001-800001

**MOBILE NO** : 8910205855 **PAN ID** 457035

DOB : 10/13/1987

TEST NAME	METHODOLOGY	VALUE	UNITS	Bio. Ref. Interva
Complete Urinogram				
Physical Examination				
VOLUME	Visual Determination	>=5	mL	-
COLOUR	Visual Determination	PALE YELLOW	-	Pale Yellow
APPEARANCE	Visual Determination	CLEAR	-	Clear
SPECIFIC GRAVITY	pKa change	1.025	-	1.003-1.030
PH	pH indicator	6	-	5-8
<b>Chemical Examination</b>				
URINARY PROTEIN	PEI	ABSENT	mg/dL	Absent
URINARY GLUCOSE	GOD-POD	ABSENT	mg/dL	Absent
URINE KETONE	Nitroprusside	ABSENT	mg/dL	Absent
URINARY BILIRUBIN	Diazo coupling	ABSENT	mg/dL	Absent
UROBILINOGEN	Diazo coupling	Normal	mg/dL	<=0.2
BILE SALT	Hays sulphur	ABSENT	-	Absent
BILE PIGMENT	Ehrlich reaction	ABSENT	-	Absent
URINE BLOOD	Peroxidase reaction	ABSENT	-	Absent
NITRITE	Diazo coupling	ABSENT	-	Absent
LEUCOCYTE ESTERASE	Esterase reaction	ABSENT	-	Absent
Microscopic Examination				
MUCUS	Microscopy	ABSENT	-	Absent
RED BLOOD CELLS	Microscopy	ABSENT	cells/HPF	0-5
URINARY LEUCOCYTES (PUS CELLS)	Microscopy	ABSENT	cells/HPF	0-5
EPITHELIAL CELLS	Microscopy	ABSENT	cells/HPF	0-5
CASTS	Microscopy	ABSENT	-	Absent
CRYSTALS	Microscopy	ABSENT	-	Absent
BACTERIA	Microscopy	ABSENT	-	Absent
YEAST	Microscopy	ABSENT	-	Absent
PARASITE	Microscopy	ABSENT	-	Absent

(Reference: \*PEI - Protein error of indicator, \*GOD-POD - Glucose oxidase-peroxidase)

Sample Collected on (SCT)

: 19 May 2024 07:28

Sample Received on (SRT)

: 19 May 2024 15:49

Report Released on (RRT)

: 19 May 2024 17:10

**Sample Type** 

**Barcode** 

: URINE

: BT586814

Labcode : 1905089356/HCL01

Dr T Priyanka MD(Path)

Priyanka

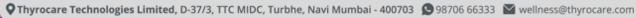
Dr R Kumar MD (Path)

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# 9 out of 10 Doctors Trust that Thyrocare Reports are Accurate & Reliable

NAME : MANISH KUMAR SINHA(36Y/M)

**REF. BY** : SELF

**TEST ASKED** : EXECUTIVE HEALTH CHECKUP BELOW 40 YRS WITH

**HOME COLLECTION:** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF GATE NO 41 PATNA- PATNA BIHAR INDIA 800001-800001

PAN ID : **MOBILE NO** :8910205855 457035

**DOB** . 10/13/1987

TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.	
PHOTOMETRY	152	mg/dL	< 200	
PHOTOMETRY	39	mg/dL	40-60	
PHOTOMETRY	119	mg/dL	< 100	
PHOTOMETRY	184	mg/dL	< 150	
CALCULATED	3.9	Ratio	3 - 5	
CALCULATED	4.71	Ratio	< 3.12	
CALCULATED	3	Ratio	1.5-3.5	
CALCULATED	0.33	Ratio	> 0.40	
CALCULATED	36.72	mg/dL	5 - 40	
	PHOTOMETRY PHOTOMETRY PHOTOMETRY PHOTOMETRY CALCULATED CALCULATED CALCULATED CALCULATED	PHOTOMETRY 152 PHOTOMETRY 39 PHOTOMETRY 119 PHOTOMETRY 184 CALCULATED 3.9 CALCULATED 4.71 CALCULATED 3 CALCULATED 0.33	PHOTOMETRY 152 mg/dL PHOTOMETRY 39 mg/dL PHOTOMETRY 119 mg/dL PHOTOMETRY 184 mg/dL CALCULATED 3.9 Ratio CALCULATED 4.71 Ratio CALCULATED 3 Ratio CALCULATED 0.33 Ratio	

### Please correlate with clinical conditions.

#### Method:

CHOL - Cholesterol Oxidase, Esterase, Peroxidase

HCHO - Direct Enzymatic Colorimetric

LDL - Direct Measure

TRIG - Enzymatic, End Point

TC/H - Derived from serum Cholesterol and Hdl values

TRI/H - Derived from TRIG and HDL Values

LDL/ - Derived from serum HDL and LDL Values

HD/LD - Derived from HDL and LDL values.

VLDL - Derived from serum Triglyceride values

### \*REFERENCE RANGES AS PER NCEP ATP III GUIDELINES:

TOTAL CHOLESTEROL	(mg/dl)	HDL	(mg/dl)	LDL	(mg/dl)	TRIGLYCERIDES	(mg/dl)
DESIRABLE	<200	LOW	<40	OPTIMAL	<100	NORMAL	<150
BORDERLINE HIGH	200-239	HIGH	>60	NEAR OPTIMAL	100-129	BORDERLINE HIGH	150-199
HIGH	>240			BORDERLINE HIGH	130-159	HIGH	200-499
				HIGH	160-189	VERY HIGH	>500
				VERY HIGH	>190		

Alert !!! 10-12 hours fasting is mandatory for lipid parameters. If not, values might fluctuate.

Sample Collected on (SCT)

: 19 May 2024 07:28

Sample Received on (SRT)

: 19 May 2024 15:26

Report Released on (RRT)

: 19 May 2024 19:12

**Sample Type** 

: SERUM

Labcode

: 1905087670/HCL01

Dr T Priyanka MD(Path)

Dr R Kumar MD (Path)

**Barcode** : CE474682

Page: 5 of 10

**Thyrocare** 

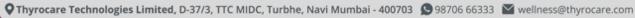
**REF. BY** 

**TEST ASKED** 

**MOBILE NO** 

Chouhatta, Opp Darbhanga house, Ashok Rajpath Rd, Patna-800 004





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NAME : MANISH KUMAR SINHA(36Y/M)

:8910205855

: SELF

: EXECUTIVE HEALTH CHECKUP BELOW 40 YRS WITH

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF GATE NO 41 PATNA- PATNA BIHAR INDIA 800001-800001

PAN ID 457035

**HOME COLLECTION:** 

**DOB** : 10/13/1987

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
BLOOD UREA NITROGEN (BUN)	PHOTOMETRY	17.02	mg/dL	7.94 - 20.07
CREATININE - SERUM	PHOTOMETRY	0.61	mg/dL	0.72-1.18
BUN / SR.CREATININE RATIO	CALCULATED	27.9	Ratio	9:1-23:1
UREA (CALCULATED)	CALCULATED	36.42	mg/dL	Adult: 17-43
UREA / SR.CREATININE RATIO	CALCULATED	59.71	Ratio	< 52
URIC ACID	PHOTOMETRY	5.68	mg/dL	4.2 - 7.3

### Please correlate with clinical conditions.

### Method:

BUN - Kinetic UV Assay.

SCRE - Creatinine Enzymatic Method

B/CR - Derived from serum Bun and Creatinine values

UREAC - Derived from BUN Value.

UR/CR - Derived from UREA and Sr.Creatinine values.

URIC - Uricase / Peroxidase Method

Sample Collected on (SCT) : 19 May 2024 07:28

Report Released on (RRT) : 19 May 2024 19:12

: 19 May 2024 15:26

**Sample Type** : SERUM

Sample Received on (SRT)

: 1905087670/HCL01 Labcode

**Barcode** : CE474682

Dr T Priyanka MD(Path)

Dr R Kumar MD (Path)

Page: 6 of 10

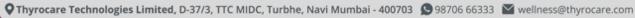
Thyrocare

**REF. BY** 

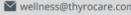
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236 SIDHESWAR NAGAR MAINPURA IN FRONT OF GATE NO 41 PATNA- PATNA BIHAR INDIA 800001-800001

**MOBILE NO** :8910205855 PAN ID 457035

**DOB** : 10/13/1987

TEST NAME	TECHNOLOGY	VALUE	UNITS	Bio. Ref. Interval.
BILIRUBIN - TOTAL	PHOTOMETRY	0.57	mg/dL	0.3-1.2
ASPARTATE AMINOTRANSFERASE (SGOT )	PHOTOMETRY	30.38	U/L	< 35
ALANINE TRANSAMINASE (SGPT)	PHOTOMETRY	47.5	U/L	< 45
SGOT / SGPT RATIO	CALCULATED	0.64	Ratio	< 2

### Please correlate with clinical conditions.

### Method:

BILT - Vanadate Oxidation

SGOT - IFCC\* Without Pyridoxal Phosphate Activation

SGPT - IFCC\* Without Pyridoxal Phosphate Activation

OT/PT - Derived from SGOT and SGPT values.

Sample Collected on (SCT)

Sample Received on (SRT)

Report Released on (RRT)

**Sample Type** 

Labcode

: SERUM

: 1905087670/HCL01

: 19 May 2024 07:28 : 19 May 2024 15:26

: 19 May 2024 19:12

Dr T Priyanka MD(Path)

Dr R Kumar MD (Path)

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**TEST ASKED** : EXECUTIVE HEALTH CHECKUP BELOW 40 YRS WITH

UTSH

: 8910205855

**PAN ID** : 457035

DOB : 10/13/1987

**TEST NAME TECHNOLOGY** Bio. Ref. Interval. **VALUE** UNITS 0.54-5.30 TSH - ULTRASENSITIVE E.C.L.I.A 3.61 µIU/mL

#### Comments:

The Biological Reference Ranges is specific to the age group. Kindly correlate clinically.

#### Method:

**MOBILE NO** 

USTSH - Fully Automated Electrochemiluminescence Sandwich Immunoassay

Disclaimer: Results should always be interpreted using the reference range provided by the laboratory that performed the test. Different laboratories do tests using different technologies, methods and using different reagents which may cause difference. In reference ranges and hence it is recommended to interpret result with assay specific reference ranges provided in the reports. To diagnose and monitor therapy doses, it is recommended to get tested every time at the same Laboratory.

Sample Collected on (SCT) Sample Received on (SRT)

: 19 May 2024 07:28 : 19 May 2024 15:26

Report Released on (RRT)

: 19 May 2024 19:12

Sample Type

: SERUM

Labcode

: 1905087670/HCL01

Dr T Priyanka MD(Path)

**Barcode** : CE474682 Dr R Kumar MD (Path) Page: 8 of 10

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: EXECUTIVE HEALTH CHECKUP BELOW 40 YRS **TEST ASKED** 

WITH UTSH

**HOME COLLECTION:** 

236 SIDHESWAR NAGAR MAINPURA IN FRONT OF

GATE NO 41 PATNA- PATNA BIHAR INDIA

800001-800001

**MOBILE NO** : 8910205855 **PAN ID** 457035

**DOB** : 10/13/1987

**TEST NAME TECHNOLOGY VALUE UNITS** EST. GLOMERULAR FILTRATION RATE (eGFR) **CALCULATED** 129 mL/min/1.73 m2

Bio. Ref. Interval. :-

> = 90 : Normal 60 - 89 : Mild Decrease

45 - 59 : Mild to Moderate Decrease 30 - 44 : Moderate to Severe Decrease

15 - 29 : Severe Decrease

#### Clinical Significance

The normal serum creatinine reference interval does not necessarily reflect a normal GFR for a patient. Because mild and moderate kidney injury is poorly inferred from serum creatinine alone. Thus, it is recommended for clinical laboratories to routinely estimate glomerular filtration rate (eGFR), a "gold standard" measurement for assessment of renal function, and report the value when serum creatinine is measured for patients 18 and older, when appropriate and feasible. It cannot be measured easily in clinical practice, instead, GFR is estimated from equations using serum creatinine, age, race and sex. This provides easy to interpret information for the doctor and patient on the degree of renal impairment since it approximately equates to the percentage of kidney function remaining. Application of CKD-EPI equation together with the other diagnostic tools in renal medicine will further improve the detection and management of patients with CKD.

#### Reference

Levey AS, Stevens LA, Schmid CH, Zhang YL, Castro AF, 3rd, Feldman HI, et al. A new equation to estimate glomerular filtration rate. Ann Intern Med. 2009;150(9):604-12.

Please correlate with clinical conditions. Method:-**CKD-EPI Creatinine Equation** 

~~ End of report ~~

Sample Collected on (SCT)

Sample Received on (SRT)

Report Released on (RRT)

Sample Type

Labcode

**Barcode** 

: 19 May 2024 07:28

: 19 May 2024 15:26

: 19 May 2024 19:12

. SERUM

: 1905087670/HCL01 Dr T Priyanka MD(Path)

: CE474682

Dr R Kumar MD (Path)

Page: 9 of 10

#### CONDITIONS OF REPORTING

- The reported results are for information and interpretation of the referring doctor only.
- It is presumed that the tests performed on the specimen belong to the patient; named or identified.
- Results of tests may vary from laboratory to laboratory and also in some parameters from time to time for the same patient.
- Should the results indicate an unexpected abnormality, the same should be reconfirmed.
- Only such medical professionals who understand reporting units, reference ranges and limitations of technologies should interpret results.
- This report is not valid for medico-legal purpose.
- Neither Thyrocare, nor its employees/representatives assume any liability, responsibility for any loss or damage that may be incurred by any person as a result of presuming the meaning or contents of the report.

### **EXPLANATIONS**

- Majority of the specimen processed in the laboratory are collected by Pathologists and Hospitals we call them as "Clients".
- Name The name is as declared by the client and recored by the personnel who collected the specimen.
- Ref.Dr The name of the doctor who has recommended testing as declared by the client.
- Labcode This is the accession number in our laboratory and it helps us in archiving and retrieving the data.
- **Barcode** This is the specimen identity number and it states that the results are for the specimen bearing the barcode (irrespective of the name).
- **SCP** Specimen Collection Point This is the location where the blood or specimen was collected as declared by the client.
- SCT Specimen Collection Time The time when specimen was collected as declared by the client.
- SRT Specimen Receiving Time This time when the specimen reached our laboratory.
- \* RRT Report Releasing Time The time when our pathologist has released the values for Reporting.
- \* Reference Range Means the range of values in which 95% of the normal population would fall.

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