

**PATHOLOGY DEPARTMENT**

Reception ID: 14-001-0085394

PR No: 14-05-001005

Entered: (06, May 14. 0:04)

Patient Name: Ms. Sharafat Bibi (Female : 60 Year(s))

Printed: 07, May, 14. 15:00

Referred By: Prof.Niaz Ali

Ward: ICU

**Blood Gases**

Processed at	00:28		Base Excess (ecf)	-0.1 mmol/L	
pH	7.521	(7.35 - 7.45)	Base Excess (b)	1.2 mmol/L	(( -2) - (+3))
pCO2	28.5 mmHg	(40 - 46)	Std bicarbonate	25.4 mmol/l	
pO2	130.3 mmHg	(83 - 108)	HCO3 <sup>-</sup>	22.8 mmol/L	(22 - 28)
SO2%	99.3 %	(95 - 100)	Total CO2	19.3 mmol/l	
PCV	21.7 %	(35 - 45)	Anoin gap	20.2 mmol/l	(15 - 25)
Na <sup>+</sup>	154.4 mmol/L	(135 - 148)	Osmolality	305.8 mosmol/l	(280 - 295)
K <sup>+</sup>	4.56 mmol/L	(3.5 - 5.2)	Alveolar PO2	130.3 mmHg	
Cl <sup>-</sup>	116.0 mmol/l	(98 - 108)	Alveolar-arterial O2	0.0 mmHg	
Ca <sup>++</sup> (Ionized)	4.68 mg/dL	(4.4 - 5.2)	gradient		

**Interpretation**

- 1.PCV and Hb are measured by ISE for standardization of ABG values. These are not intended for clinical use.
- 2.Osmolarity calculation is only valid for normal plasma urea and glucose concentration.
- 3.Osmometer is now available for accurate measurement of plasma/urine osmolarity.

Notes: Electronically verified report, signatures not required. Identity of the patient not verified. Any query about this report may be addressed within twenty four hours of reporting, the duration for which the samples are preserved.

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