Patient Detail : Muzzafar Ali

NIC #:

Registration Location:

Lahore: Awasia Society College Road

Age/Sex: Registration Date: 62 (Y) / M

35202-9813284-1

08-Oct-2022 09:14

Patient Number:

Blue Card - Diabetes Care Pro 46901-20-6868946

Consultant: Case Number:

46903-08-10

Reporting Time: 08-Oct-2022 16:16



# **Department of Hematology**

# **Blood C/E (Complete, CBC)**

Test	Reference Value	Unit	46903-01-08 01-Aug-2021 09:22	46915-07-01 07-Jan-2022 10:29	46938-11-02 11-Feb-2022 15:33	46903-08-10 08-Oct-2022 09:14
Hb	13 - 18	g/dl	14.4	14.5	13.9	13.7
Total RBC	4.5 - 6.5	x10^12/l	4.9	5.0	4.6	5.1
нст	38 - 52	%	42	44	42	44
MCV	75 - 95	fl	86	87	91	88
MCH	26 - 32	pg	29	29	30	27
мснс	30 - 35	g/dl	34	33	33	31
RDW CV %	11.5 - 14.5	%	15.2	15.4	19.8	16.5
Platelet Count	150 - 400	x10^9/l	891	1186	505	1085
MPV fl	7 - 11	fl	9.7	9.4	11.1	9.1
WBC Count (TLC)	4 - 11	x10^9/l	7.8	8.3	5.4	8.8
Neutrophils	40.0 - 75.0	%	58	60.9	54.6	62.0
Lymphocytes	20.0 - 50.0	%	30	27.8	32.2	26.7
Monocytes	2.0 - 10.0	%	08	6.9	10.4	7.6
Eosinophils	1.0 - 6.0	%	04	3.9	2.4	3.2
Basophils	Less Than 1.0	%	-	0.5	0.4	0.5
Abs. Neutrophils	2.00 - 7.00	x10^9/l	4.51	5.07	2.95	5.44
Abs. Lymphocytes	1.00 - 3.00	x10^9/l	2.37	2.31	1.74	2.34
Abs. Monocytes	0.20 - 1.00	x10^9/l	0.62	0.57	0.56	0.67
Abs. Eosinophils	0.02 - 0.50	x10^9/l	0.27	0.32	0.13	0.28
Abs. Basophils	0.02 - 0.10	x10^9/l	-	0.04	0.02	0.04

## **Peripheral Smear**

### **RBC Morphology:**

Normocytic normochromic

#### WBC Morphology:

White Blood Cells show normal morphology. No Atypical cells are seen

### **Platelet Morphology:**

Thrombocytosis with marked anisocytosis

## Advised:

Clinical correlation

	Dr. Mavra Fatima Consultant Hematologist		Dr. Mavra Fatima Consultant Hematologist			
Dr. N. A. Malik M.B.B.S. (Pb), M. Phil. Consultant Haematologist	Dr. Ayisha Imran M.B.B.S., F.C.P.S. Consultant Haematologist	Dr. M. Dilawar Khan M.B.B.S., M.C.P.S., F.C.P.S. Consultant Chemical Pathologist	Dr. Omar Chughtai M.B.B.S., M.D., F.C.A.P. Diplomate American Board of Anatomic and Clinical Pathology Consultant Pathologist	Dr. A . S. Chughtai M.B.B.S., M.I.A.C., M.Phil. F.C.P.S., F.C.P.P.Consultant Pathologist		



Patient Detail

NIC #:

Muzzafar Ali Lahore: Awasia Society College Road

Age/Sex: 62 (Y) / M 08-Oct-2022 09:14

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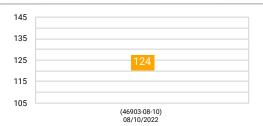


# **Department of Chemical Pathology**

## Plasma Glucose (Fasting)

A blood sample requires fasting of 12 hours. High blood glucose level can be found in people with diabetes, critical medical conditions, as well as pregnant women with gestational diabetes. Low blood glucose level commonly affects people with diabetes,

rarely it can also occur as a result of other underlying conditions.



**Prediabetes** 

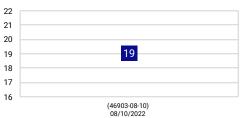
■ Hypoglycemia (<70) Prediabetes (100 - 126) Normal (70 - 99)</p>

Reporting Time: 08-Oct-2022 13:44

Note: Change in reference values is effective from 24 August 2021.

Reference: American Diabetes Association (ADA). Standards of medical care in diabetes - 2017

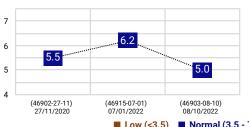
## Serum ALT (SGPT)



Normal

■ Normal (<45) ■ High (>45)

#### Serum Uric Acid

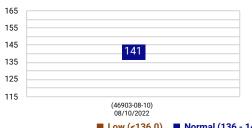


**Normal** 

■ Normal (3.5 - 7.2)

■ High (>7.2)

#### Serum Sodium



Normal

■ Normal (136 - 145)

■ High (>145.01)

Dr. Hijab Batool

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Dr. Ayisha Imran M.B.B.S., F.C.P.S. Consultant Haematologist

Dr. M. Dilawar Khan M.B.B.S., M.C.P.S., F.C.P.S. Consultant Chemical Pathologist

Dr. Omar Chughtai M.B.B.S., M.D., F.C.A.P. and Clinical Pathology Consultant Pathologist

Dr. A . S. Chughtai M.B.B.S., M.I.A.C., M.Phil Diplomate American Board of Anatomic F.C.P.S., F.C.P.P.Consultant Pathologist



Patient Detail

Registration Location:

Muzzafar Ali Lahore: Awasia Society College Road

Age/Sex: 62 (Y) / M

Registration Date:

08-Oct-2022 09:14

NIC #: 35202-9813284-1 Reference: Patient Number:

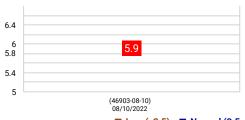
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#### Serum Potassium

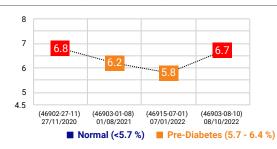


High

■ Low (<3.5) ■ Normal (3.5 - 5.1)

■ High (>5.1)

### Glycosylated Hemoglobin (HbA1C)



Diabetes

■ Diabetes (>6.4)

Interpretation: According to guidelines of the American Diabetes Association (ADA) patients already diagnosed with Diabetes Mellitus should monitor HbA1c level as an indicator of glycemic control over the previous 3 months time. The optimum HbA1c level is based on the health status of the individual.

In conditions associated with an altered relationship between AIC & glycemia, such as hemoglobinopathies including sickle cell discease, pregnancy (second, third trimesters & the postpartum period), glucose-6-phosphate dehydrogenase deficiency, HIV, haemdialysis, recent blood loss, transfusion or erthropoietin therapy, only plasma blood glucose criteria should be used to diagnose diabetes.

# **Cardiac Marker**

Plasma Troponin I (cTnI)



 $< 0.010_{ng/mL}$ Normal

■ Normal (0 - 0.034) ■ High (>0.034)

Note: Serial sampling to detect the temporal rise and fall of cTnl levels is recommended for the differentiation of acute cardiac events from chronic cardiac disease.

Methodology: Chemiluminescent Microparticle Immunoassay (CMIA)

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Dr. M. Dilawar Khan



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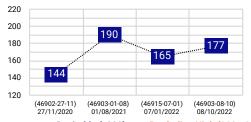
46903-08-10



# **Lipid Profile**

#### Serum Total Cholesterol

Cholesterol is essential substance for human body at normal levels. High cholesterol can block blood vessels and can increase the risk of heart disease or a stroke.



**177 Desirable** 

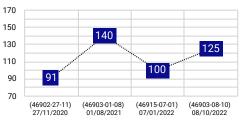
■ Desirable (<200)

■ Borderline High (200 - 240)

■ High (>240)

## Serum Triglycerides

Triglycerides are fats that are a flexible source of energy. High triglyceride levels can be treated by following a lower calorie diet, taking regular exercise and medication prescribed by physician.



Normal

■ Normal (<150)

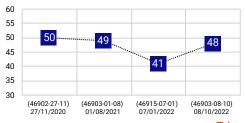
**■** Borderline High (150 - 199)

■ High (200 - 499)

■ Very High (≥500)

#### Serum HDL-Cholesterol

HDL Cholesterol is known as the "Good" cholesterol because it helps to remove other forms of cholesterol from bloodstream and associated with a lower risk of heart disease.



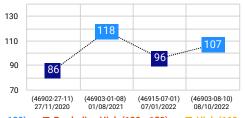
Normal

■ Low (<39)

■ Normal (>40)

#### Serum LDL-Cholesterol

LDL-Cholesterol is known as "Bad" Cholesterol because its high levels lead to accumulate in the blood vessesls.



**Above Desirable** 

■ Desirable (<100)

■ Above Desirable (100 - 129)

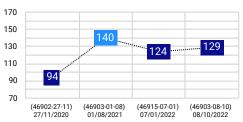
■ Borderline High (130 - 159)

■ High (160 - 189)

■ Very High (≥190)

#### Serum Non-HDL Cholesterol

Non-HDL Cholesterol is the difference between Total and HDL Cholestrol thus, represents Cholesterol carried on all of the potentially proatherogenic Apo-B containing particles (primarily LDL-Cholesterol, IDL-Cholesterol, and VLDL-Cholesterol) as well as Chylomicron remnants and Lipoprotein(a).



Desirable

■ Desirable (<129) ■ Above Desirable (130 - 159)

**■** Borderline High (160 - 189)

■ High (190 - 219)
■ Very High (≥220)

Dr. Hijab Batool

Dr. M. Dilawar Khan



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# **Renal Function Tests**





**Normal** 

■ Low (<8) ■ Normal (8 - 22) ■ High (>22)

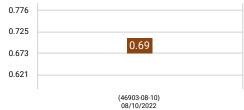
#### Serum Urea



**Normal** 

■ Low (<10) ■ Normal (10 - 50) ■ High (>50)

## Serum Creatinine



Low

■ Low (<0.73) ■ Normal (0.73 - 1.18)

■ High (>1.18)

Note: Change in reference values is effective from 7 June 2022.

Dr. Hijab Batool

Dr. M. Dilawar Khan

Pathologist