



Shree Ram Multispeciality Hospital (SRMH)

Lokah Samasta Sukhino Bhavantu



PT. NAME : MR. LUCKY CHHALWANI
 MOBILE NO : 8291377376 TEST NO 1259
 DOCTOR : DR. AJIT KUMAR
 REFERED BY : SELF

AGE / SEX : 33Y/MALE
 UH ID NO. : SRMH-25011894
 COLLECTION : 30-01-2025
 REPORTING : 30-Jan-2025

18

HAEMATOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD GROUPING AND RH TYPING			
BLOOD GROUP	"O"		-
RH FACTOR	POSITIVE		-

CBC (COMPLETE BLOOD COUNT)

HAEMOGLOBIN (Hb)	11.3	gm%	13.5 - 17.5
TOTAL RBC COUNT	4.94	Million/cumm	4.5 - 5.9
HAEMATOCRIT (PCV)	33.9	%	41.5 - 50.4
RBC INDICES			
MCV	83.2	fl	78 - 96
MCH	22.9	pg	27 - 32
MCHC	27.5	%	33 - 37
RDW	13.2	%	11 - 16
TOTAL WBC COUNT (TLC)	5,300	/cumm	4000 - 11000
DIFFERENTIAL COUNT			
NEUTROPHILS	55	%	40 - 70
LYMPHOCYTES	40	%	22 - 48
EOSINOPHILS	02	%	0 - 6
MONOCYTES	03	%	0 - 8
BASOPHILS	00	%	00 -
PLATELET COUNT	2.60	/cumm	1.50 - 4.50
PCT	0.23	%	0.10 - 0.28
MPV(MEAN PLATELET VOLUME)	9.2	µm3	8 - 11
PDW	15.7	%	11 - 18

-- End Of Report --

LAB TECHNICIAN

Dr. Dhananjay Prasad
MBBS, MD (Pathologist)

Note : This Report is not for medicolegal purpose

Near Railway Under Bridge, Basant Vihar Gate No. 1, Gondwara Chowk,
Gudhiyari, Raipur (Chhattisgarh)

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1259

BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BLOOD SUGAR - RANDOM (BSR/RBS)			
BLOOD SUGAR RANDOM	92.4	mg / dl	70 - 120
HbA1c -Glycosylated hemoglobin			
HbA1c -Glycosylated hemoglobin	5.72	%	Normal Range : <6% Good Control : 6-7% fair Control : 7-8% Unsatisfactory Control : 8-10% Poor Control : >10% - 80 - 120
Estimated average plasma glucose	126.332	mg/dl	

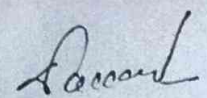
CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE SUGAR FASTING AND PP			
URINE SUGAR RANDOM	Absent		Absent -

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HAEMATOLOGY

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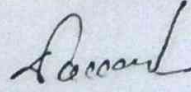
ESR (ERYTHROCYTE SEDIMENTATION RATE)

ESR	16	mm at end of 1 h	0 - 20
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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
BUN (BLOOD UREA NITROGEN)			
BUN	10.3	mg / dl	7.00 - 20.00
Serum Creatinine	0.95	mg / dl	0.55 - 1.20
BUN / Creatinine Ratio	10.8		10.1 - 20.1

RENAL FUNCTION TEST (RFT)

SERUM CREATININE	0.95	mg/dL	0.6 - 1.2
SERUM URIC ACID	6.23	mg/dL	3.6 - 7.7

Clinical Significance

SERUM UREA

Serum urea concentration reflects the balance between urea production in the liver and urea elimination by the kidneys, in urine; so increased serum urea can be caused by increased urea production, decreased urea elimination, or a combination of the two.

CREATININE

Creatinine is a nitrogenous waste product formed in muscle from creatine phosphate. Endogenous production of creatinine is proportional to muscle mass and body weight.

Exogenous creatinine (from ingestion of meat) has little effect on daily creatinine excretion. Serum creatinine is inversely correlated with glomerular filtration rate (GFR).

Increased levels of Serum Creatinine is associated with renal dysfunction.

URIC ACID

The uric acid blood test is used to detect high levels of this compound in the blood in order to help diagnose gout. The test is also used to monitor uric acid levels in people

undergoing chemotherapy or radiation treatment for cancer. Rapid cell turnover from such treatment can result in an increased uric acid level. The uric acid urine test is used to

help diagnose the cause of recurrent kidney stones and to monitor people with gout for stone formation.

SODIUM

It may also be elevated in the urine when the body is losing too much sodium; in this case, the blood level would be normal to low. Decreased urinary sodium levels may

indicate dehydration, congestive heart failure, liver disease, or nephrotic syndrome. Increased urinary sodium levels may indicate diuretic use or Addison disease.

POTASSIUM

If blood potassium levels are low due to insufficient intake, then urine concentrations will also be low. Decreased urinary potassium levels may be due to certain drugs and disorders such as anorexia, or muscle damage.

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIVER FUNCTION TEST (LFT)			
BILIRUBIN TOTAL	0.61	mg/dL	0.2 - 1
BILIRUBIN DIRECT	0.29	mg / dl	0.1 - 0.6
BILIRUBIN INDIRECT	0.32	mg / dl	0.1 - 0.4
SGOT	36.2	U / L	0 - 46
SGPT	32.6	U / L	0 - 40
ALKALINE PHOSPHATASE	220.5	U / L	0 - 240
TOTAL PROTEIN	5.78	g / dl	6 - 8
ALBUMIN	3.47	g/dl	3.5 - 5.0
GLOBULIN	2.31	g / dl	2 - 3.5
A/G RATIO	1.50		1 - 2.5

Clinical Significance

Alanine transaminase (ALT)

ALT is an enzyme found in the liver that helps your body metabolize protein. When the liver is damaged, ALT is released into the bloodstream and levels increase.

Aspartate transaminase (AST)

AST is an enzyme that helps metabolize alanine, an amino acid. Like ALT, AST is normally present in blood at low levels. A increase in AST levels may indicate liver damage or disease or muscle damage.

Alkaline phosphatase (ALP)

ALP is an enzyme in the liver, bile ducts and bone. Higher-than-normal levels of ALP may indicate liver damage or disease, such as a blocked bile duct, or certain bone diseases.

Albumin and total protein

Albumin is one of several proteins made in the liver. Your body needs these proteins to fight infections and to perform other functions. Lower-than-normal levels of albumin and total protein might indicate liver damage or disease.

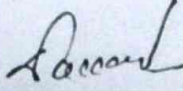
Bilirubin

Bilirubin is a substance produced during the normal breakdown of red blood cells. Bilirubin passes through the liver and is excreted in stool. Elevated levels of bilirubin (jaundice) might indicate liver damage or disease or certain types of anemia.

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BIOCHEMISTRY

TEST NAME	RESULT	UNIT	NORMAL VALUES
LIPID PROFILE			
CHOLESTEROL	193.2	mg / dl	150 - 220
SERUM TRYGLYCERIDE	98.5	mg / dl	60 - 165
HDL	35.9	mg / dl	35 - 80
LDL	157.3	mg/dL	90 - 160
VLDL	19.7	mg/dL	20 - 50
CHOLESTEROL / HDL RATIO	5.38	mg/dL	3.5 - 5.5
LDL/HDL Ratio	4.38	mg / dl	2.5 - 3.5

IMMUNOASSAY

TEST NAME	RESULT	UNIT	NORMAL VALUES
THYROID PROFILE (T3, T4, TSH)			
T3 (TRIIODOTHYRONINE)	1.79	ng/ml	0.8 - 2
T4 (THYROXINE)	8.80	ug/dl	5.13 - 14.06
TSH	1.92	uIU/ml	0.27 - 4.2

PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
GGT (GAMMA GLUTAMYL TRANSFERASE)			
GGT	14.6	U / L	12.00 - 18.00

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IMMUNOASSAY

TEST NAME	RESULT	UNIT	NORMAL VALUES
SERUM PSA TOTAL			
PSA (TOTAL)	1.83	ng/mL	0 - 4

Clinical Significance :

- An aid in the early detection of Prostate cancer when used in conjunction with Digital rectal examination in males more than 50 years of age and in those with two or more affected first degree relatives.
- Follow up and management of Prostate cancer patients.
- Detect metastatic or persistent disease in patients following surgical or medical treatment of prostate cancer.
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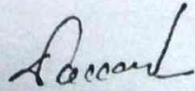
Increased Levels :

- Prostate cancer
- Benign Prostate Hyperplasia
- Prostatitis
- Genitourinary infections
- Prostate cancer
- Benign Prostate Hyperplasia
- Prostatitis
- Genitourinary infections

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 1259

CLINICAL PATHOLOGY

TEST NAME	RESULT	UNIT	NORMAL VALUES
URINE ROUTINE AND MICROSCOPY			
PHYSICAL EXAMINATION			
QUANTITY	20	ml	-
COLOUR	Pale Yellow		Pale Yellow -
APPEARANCE	Clear		Clear -
REACTION	Alkaline		Acitic -
CHEMICAL EXAMINATION			
ALBUMIN	Absent		Absent -
SUGAR	Absent		Absent -
KETONE	Absent		Absent -
BILE SALT	Absent		Absent -
BILE PIGMENT	Absent		-
MICROSCOPIC EXAMINATION			
PUS CELLS	2-3	/hpf	2 - 5
EPITHELIAL CELLS	1-2	/hpf	1 - 5
RBC	Nil	/hpf	0 - 3
CAST	Nil	/lpf	Nil -
YEAST	Nil		Nil -
CRYSTAL	Nil	/lpf	Nil -
BACTERIA	Nil		Nil -
OTHERS	-		-

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