

DEPARTMENT OF LABORATORY MEDICINE

Patient Name : Mr. YELLAPPA	Order No : 1000093033
UHID : UHJA24004427	Registered On : 10/08/2024 09:02:50 AM
Age/Sex : 56/Years Male	Collected On : 10/08/2024 09:25:22 AM
Ward / Bed No :	Reported On : 10/08/2024 01:43:48 PM
Reference : Dr. Preventive Health Check Up	Bill No : OPBJA240006174
Station : At Hospital	Mobile No : 9972102192
Payer Name : Mediwheel	Report Status : Final Report

Test Name	Result	Unit	Bio. Ref. Interval
<u>BIOCHEMISTRY</u>			
FASTING GLUCOSE (Method: Hexokinase)	169	mg/dL	ADA Guidelines < 100 mg/dl - Normal 100 to 125 mg/dl - Prediabetes ≥ 126 mg/dl - Diabetes
POST PRANDIAL GLUCOSE (Method: Hexokinase)	259	mg/dL	70-140
GLYCOSYLATED HAEMOGLOBIN (HBA1C)			Sample: Whole blood (EDTA)
HBA1C (Method: HPLC)	9.5	%	ADA Guidelines < 5.7% - Normal 5.7 to 6.4% - Prediabetes ≥ 6.5% - Diabetes
Estimated Average Glucose (eAG) (Method: Calculated)	226	mg/dL	
THYROID PROFILE (TOTAL T3, TOTAL T4 & TSH)			Sample: Serum
TOTAL T3 (Method: CLIA)	1.13	ng/mL	0.87-1.78
TOTAL T4 (Method: CLIA)	9.75	µg/dL	5.1-14.1
THYROID STIMULATING HORMONE (TSH) (Method: CLIA: Ultra-sensitive)	0.88	µIU/mL	0.38-5.33
LIPID PROFILE			Sample: Serum
TOTAL CHOLESTEROL (Method: CHOD-POD)	217	mg/dL	ATP III Guidelines < 200 - Desirable 200-239 - Borderline high ≥ 240 - High
TRIGLYCERIDES (Method: Enzymatic GPO-POD)	246	mg/dL	< 150 - Normal 150-199 - Borderline High 200-499 - High ≥ 500 - Very High
HDL CHOLESTEROL (Method: ENZYMATIC METHOD)	42.8	mg/dL	< 40 - Low ≥ 60 - High

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LDL CHOLESTEROL (Method: Calculated)	125	mg/dL	<100 - Optimal 100-129 - Near or above optimal 130-159 - Borderline high 160-189 - High ≥190 - Very high
VLDL CHOLESTEROL (Method: Calculated)	49.20	mg/dL	< 30
TOTAL CHOLESTEROL : HDL RATIO (Method: Calculated)	5.0		Low Risk: 3.3 - 4.4 Average Risk: 4.5 - 7.1 Moderate Risk: 7.2 - 11.0
LDL/HDL CHOLESTEROL RATIO (Method: Calculated)	2.9		< 2.5 Optimal
NON HDL CHOLESTEROL (Method: Calculated)	174.2	mg/dL	< 130
URIC ACID (Method:Uricase - POD(Enzymatic))	2.9	mg/dL	3.5-7.2
BUN/CREATININE RATIO			
BLOOD UREA NITROGEN(BUN) (Method:Urease GLDH - Kinetic)	11	mg/dL	7.93-20.07
CREATININE (Method:Modified Jaffe, Kinetic)	0.76	mg/dL	0.9-1.3
BUN/CRE-RATIO (Method: Calculated)	14.47		12-20 : 1
LIVER FUNCTION TEST			
TOTAL BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.65	mg/dL	0.3-1.2
DIRECT BILIRUBIN (Method:Dichlorophenyl Diazotization)	0.13	mg/dL	0.0-0.2
INDIRECT BILIRUBIN (Method: Calculated)	0.53	mg/dL	0.2-1.0
TOTAL PROTEIN (Method:BIURET)	6.9	g/dL	6.6-8.3

Sample: Serum

Sample: Serum

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ALBUMIN (Method:BCG)	4.15	g/dL	3.5-5.2
GLOBULIN (Method: Calculated)	2.75	g/dL	2.3-3.5
AG RATIO (Method: Calculated)	1.50		2:1
SERUM SGOT (Method:IFCC without P5P)	59	U/L	< 50
SERUM SGPT (Method:IFCC without P5P)	69	U/L	< 50
ALKALINE PHOSPHATASE, SERUM (Method:PNPP AMP Buffer)	74	U/L	50-116
GGT (Method:IFCC)	59	U/L	< 55
PROSTATE SPECIFIC ANTIGEN (PSA) (Method:CLIA)	0.20	ng/mL	< 4.0

Interpretation Notes

Serum PSA concentrations should not be interpreted as absolute evidence for the presence or absence of malignant disease nor should serum PSA be used alone as a screening test for malignant disease. For diagnostic purposes, the results obtained by immunometric assay should always be used in combination with the clinical examinations, patient medical history and other findings. The concentration of PSA in a given specimen, determined with assays from different manufacturers, may not be comparable due to differences in assay methods, calibration, and reagent specificity.

UREA (Method:Urease GLDH - Kinetic)	23.7	mg/dL	17-43
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HAEMATOLOGY
COMPLETE BLOOD COUNT(CBC)

Sample: Whole blood (EDTA)

HAEMOGLOBIN (Method:Photometric Measurement: Oxyhemoglobin method)	15.22	g/dL	13.5-17.5
PACKED CELL VOLUME/HEMATOCRIT (PCV/HCT) (Method: Calculated)	45.3	%	42-52
TOTAL WBC COUNT (TLC) (Method:Coulter Principle)	5710	Cells/Cum	4000-11000
DIFFERENTIAL COUNT			
NEUTROPHILS (Method:Optical/Impedance)	45.40	%	40-75
LYMPHOCYTES (Method:Optical/Impedance)	40.80	%	20-45
EOSINOPHILS (Method:Optical/Impedance)	4.99	%	0-6
MONOCYTES (Method:Optical/Impedance)	8.38	%	2-10
BASOPHILS (Method:Optical/Impedance)	0.43	%	0-2
RED BLOOD CORPUSCLES(RBC) (Method:Coulter Principle)	5.25	million/cum	4.5-5.9
MCV (Method:Derived from RBC Histogram)	86.3	fL	78-100
MCH (Method: Calculated)	29.0	pg	27-31
MCHC (Method: Calculated)	33.6	g/dL	31-37
RDW - CV (Method: Calculated)	13.3	%	11.5-14.5
PLATELET COUNT (Method:Electrical Impedance)	1.99	Lakhs/Cum	1.5-4.5

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MEAN PLATELET VOLUME(MPV) (Method:Derived from PLT Histogram)	8.91	fl	9-13
PLATELET DISTRIBUTION WIDTH (PDW) (Method: Calculated)	17.9	fl	9-19
ERYTHROCYTE SEDIMENTATION RATE(ESR) (Method:Modified Westergren Method)	08	mm/hour	1-20
BLOOD GROUPING & RH TYPING			Sample: Whole blood (EDTA)
ABO Group (Method:Agglutination Method)	B		
Rh Factor (Method:Agglutination Method)	Positive		

Interpretation Notes

Note: Both forward and reverse grouping performed



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CLINICAL PATHOLOGY

URINE EXAMINATION, ROUTINE

Sample: Urine

PHYSICAL EXAMINATION

VOLUME	15	mL	
COLOUR	Pale Yellow		
APPEARANCE	Clear		
PH	5.0		5.0-8.0
SPECIFIC GRAVITY	1.025		1.005-1.030

CHEMICAL EXAMINATION

PROTEIN (Method:Protein Error of pH Indicator)	Absent		Absent
GLUCOSE (Method:GOD-POD)	Present (2.0%)		Absent
KETONE BODIES (Method:Nitroprusside method/ Rothera's test)	Absent		Absent
BILIRUBIN (Method:DIAZO/FOUCHET'S TEST)	Negative		Negative
BILE SALT (Method:Hay's sulfur test)	Absent		Absent
NITRITE (Method:Griess method)	Negative		Negative
UROBILINOGEN (Method:Azo coupling method)	Normal		
LEUKOCYTE ESTERASE (Method:Leukocyte Esterase activity)	Negative		Negative
BLOOD (Method:Peroxidase Reaction)	Negative		Negative

MICROSCOPIC EXAMINATION


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EPITHELIAL CELLS	2-4	/HPF	0-5
PUS CELLS	0-2	/HPF	0-5
RBCs	Nil	/HPF	0-2
CASTS	Nil	/LPF	
CRYSTALS	Nil		
OTHERS	Nil		
URINE SUGAR, FASTING (Method:GOD-POD)	Present (1.5%)		
URINE SUGAR (POST PRANDIAL)	Present (2.0%)		

Verified By
Dr Shobha Emmanuel

---End of Report---



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