


NAME : MR. MALLIK AMBUJ KUMAR AGE : 36 YRS SEX : Male
 LAB REF NO. : 29228
 COLLECTED ON 13/11/2021 14:51 REGISTERED ON 13/11/2021 02:52 REPORTED ON 13/11/2021 16:16
 Report Status : Final REFERRED BY: CARE KILKARI (INSURANCE)

| Tests | Results | Biological Reference Range | Units |
|-------------------------------------|----------------|----------------------------|-------|
| ESR Report | | | |
| TEST NAME | FINDING | Normal | |
| First Hour | 15 | (M=up to 10,F=up to 20 mm) | mm |
| Second Hour | X | | mm |
| Average | X | | |
| ABO GROUPING & RH TYPING | | | |
| TEST NAME | FINDING | NORMAL VALUE | |
| ABO GROUP | "O" | | |
| RH TYPING | POSITIVE | | |
| HbA1c | 4.8 | | % |

HbA1c:
 Glycosylated hemoglobin (hemoglobin A1c, HbA1c, A1c, or Hb1c; sometimes also HbA1c) is a form of hemoglobin used primarily to identify the average plasma Glucose concentration over prolonged periods of time. It is formed in a non-enzymatic pathway by hemoglobin's normal exposure to high plasma levels of glucose. Glycation of hemoglobin has been associated with cardiovascular disease, nephropathy and retinopathy in diabetes mellitus. Monitoring the HbA1c in type-1 diabetic patients may improve treatment. HbA1c is a weighted average of blood glucose levels during the preceding 120 days, which is the average life span of red blood cells. A large change in mean blood glucose can increase HbA1c levels within 1-2 weeks. Sudden changes in HbA1c may occur because recent changes in blood glucose levels contribute relatively more to the final HbA1c levels than earlier events. For instance mean blood glucose levels in the 30 days immediately preceding blood sampling contribute 50% to the HbA1c level, whereas glucose levels in the preceding 90-120 day period contribute only 10%. Thus, it does not take 120 days to detect a clinically meaningful change in HbA1c following a significant change in mean plasma glucose level.

Reference Rang:

Non-Diabetic 4-6% , Control Diabetic 6-8 % , Morethan,Uncontrol Diabetic more than 8%
 BLOOD SUGAR (R) 82.0 (60-180 mg/dl) mg/dl


 Dr. R. N. Prasad
 M.B.B.S. M.D(Patho)



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- MRI
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- DIAGNOSTICS
(FULL RANGE OF PATHOLOGY)

VIP ROAD, ALLALPATTI, OPPOSITE URO STONE RESEARCH CENTER, DARBHANGA - 846003

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| COMPLETE BLOOD COUNT(CBC) | | | |
| Haemoglobin | 14.6 | (M=12-16,F=11-15 gm%) | gm% |
| W.B.C Count | 6,300 | (4000-11000 cmm) | cmm |
| DIFFERENTIAL COUNT OF W.B.C | | | |
| Neutrophil | 57 | 40-75 % | % |
| Lymphocytes | 33 | 20-50 % | % |
| Eosinophils | 07 | 01-06 % | % |
| Monocytes | 03 | 02-08 % | % |
| Basophils | 00 | 00-01 % | % |
| R.B.C | 4.77 | (3.5-5.5 mill./cumm) | mill./cumm |
| P.C.V/HCT | 43.4 | (34-47%) | % |
| M.C.V | 91.1 | (80-96/cu µm) | /cu µm |
| M.C.H | 30.6 | (27.5-33.2 Pg) | Pg |
| M.C.H.C | 33.6 | (33.4-35.5%) | % |
| R.D.W.(CV) | 14.4 | (11.0-16.0 %) | % |
| R.D.W.(SD) | 53.1 | (35.0-56.0 fL) | fL |
| MPV | 12.6 | (6.5-12.0 fL) | fL |
| Platelets Counts | 1,53,000 | (1,50,000-4,50,000/µl) | /µl |

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| LIVER FUNCTION TEST | | | |
| TEST NAME | RESULT | NORMAL VALUE | |
| Serum Bilirubin Total | 1.30 | 0.3-1.2mg/dl | mg/dl |
| Serum Bilirubin Direct | 0.50 | 0.1-0.4mg/dl | mg/dl |
| Serum Bilirubin Indirect | 0.80 | 0.2-0.8mg/dl | mg/dl |
| S.G.P.T.(ALT) | 32.0 | 5-40 lu/L | lu/L |
| S.G.O.T.(AST) | 29.0 | 5-40 lu/L | lu/L |
| Alkaline Phosphatase | 95.0 | 25-130 lu/L | lu/L |
| Serum Protein Total | 7.66 | 5.5-8.0gm/dl | gm/dl |
| Serum Albumin | 4.38 | 3.5-5.5gm/dl | gm/dl |
| Serum Globulin | 3.28 | 2.0-3.5gm/dl | gm/dl |
| A:G Ratio | 1.34 | 2:1 | |

INTERPRETATION: This is intended to discuss a useful way of thinking about liver tests. It emphasizes limitations of and alternative explanations for isolated abnormalities of common liver test results. It also provides information on the initial screening test to be chosen, their interpretation, and the tests needed to confirm the diagnosis of common liver disorders based on current recommendations. Information in this chapter should be combined with discussions of specific liver diseases in the Disease Management. A final caveat relates to terminology. Tests done in clinical laboratories do not measure any functional capacity of the liver. Hence, the commonly used term liver function test is inaccurate, and the term liver tests. Guidelines on the interpretation and evaluation of abnormal liver test results have been published. Useful algorithms are presented that parallel the recommendations.


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| URINE-ROUTINE EXAMINATION | | | |
| PHYSICAL EXAMINATION | | | |
| Quantity | 40ml | | ml |
| Colour | Straw | | |
| Odour | Aromatic | | |
| Appearance | Clear | | |
| Sediment | Nil | | |
| Specific Gravity | 1.005 | (1.005-1.030) | |
| CHEMICAL EXAMINATION | | | |
| Reaction | Acidic | | |
| Sugar | NEG | | |
| Albumin | NEG | | |
| Excess of Mucin | Nil | | |
| *Acetone Bodies | NEG | | |
| *Blood Pigment | X | | |
| *Bile Salt | Absent | | |
| *Bile Pigment | Absent | | |
| *Urobilinogen | Normal | | |
| Excess of Phosphates | Nil | | |
| Ph | 6.0 | (5.5-8.5) | |
| Nitrite | NEG | | |
| MICROSCOPIC EXAMINATION | | | |
| Leucocytes | NEG | | |
| Erythrocytes | NEG | | |
| Epithelial Cells | A Few | | |
| Casts | Nil | | |
| Crystall | Nil | | |

*** End of Report ***


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| KIDNEY PROFILE | | | |
| TEST NAME | FINDING | NORMAL VALUE | |
| Blood Urea | 24.0 | (10-40 mg/dl) | mg/dl |
| Serum Creatinine | 0.78 | (0.5-1.5 mg/dl) | mg/dl |
| Blood Urea Nitrogen(BUN) | 11.21 | (8-20 mg/dl) | mg/dl |
| Serum Uric Acid | 5.80 | (1.5-7.0 mg/dl) | mg/dl |
| Sodium(Na) | 141.32 | (135 to 147 mEq/L) | mEq/L |
| Potassium(K) | 4.39 | (3.5 to 5.5 mEq/L) | mEq/L |
| Calcium(Ca) | 9.92 | (9-11 mg/dl) | mg/dl |
| Chloride(Cl) | 102.14 | (98 to 108 mEq/L) | mEq/L |

INTERPRETATION

KFT are simple tests that measure certain substances in you blood and urine. These substances are related to filtration in kidneys. Which give an idea of kidney function. These tests mainly detect levels of serum creatinine and blood urea nitrogen, Which are done through a blood test. A 24-hour urine sample may be taken to detect creatinin clearance from the body and filtration rate of the kidneys. There are other parameters like protein, albumin, minerals, electrolytes etc.. Which may also be checked. depending on the type of kidney tests.



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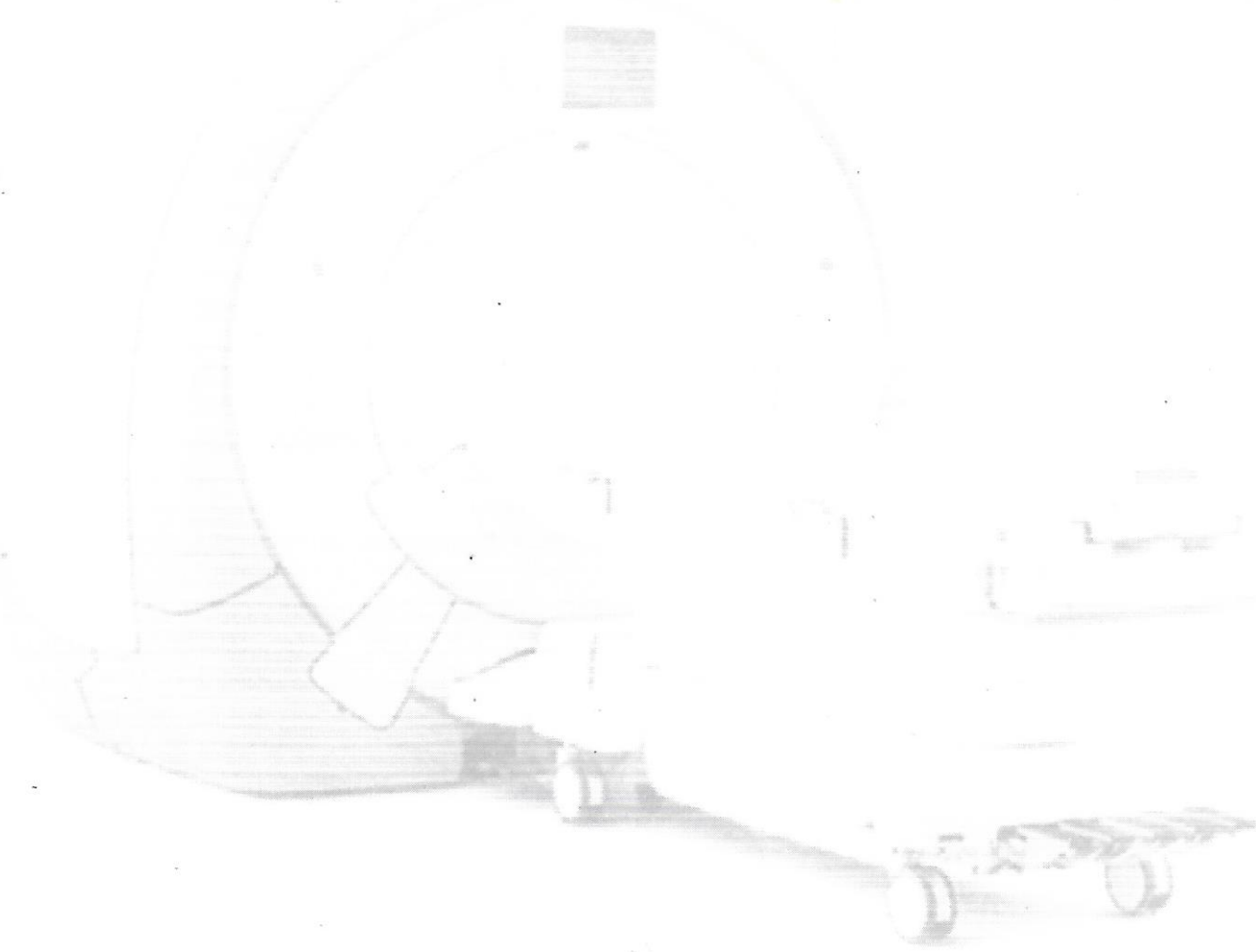
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| LIPID PROFILE | | | |
| TEST NAME | RESULT | NORMAL VALUE | |
| Total Cholesterol | 125.0 | (0-200 mg/dl) | mg/dl |
| Triglycerides | 72.0 | (0-161 mg/dl) | mg/dl |
| HDL-Cholesterol(Direct) | 41.0 | (30-80 mg/dl) | mg/dl |
| LDL-Cholesterol(Direct) | 69.60 | (80-145 mg/dl) | mg/dl |
| VLDL-Cholesterol | 14.40 | (13-33 mg/dl) | mg/dl |
| Ratio of Tot-Cholestro/HDL | 3.05 | (Up To 4.5:1) | :1 |



[Signature]
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