



**TIME DIAGNOSTICS**  
(A Unit of Time Health Care)

**Patient Name :** MRS. R. SOUNDARYA

**Age / Gender :** 30 years / Female

**Patient ID :** 21105

**Source :** MEDI WHEEL

**Referral :** SELF

**Collection Time :** May 13, 2023, 09:16 a.m.

**Reporting Time :** May 13, 2023, 11:39 a.m.

**Sample ID :**



R231330002

Test Description	Value(s)	Reference Range	Unit
<b>CBC; Complete Blood Count</b>			
Hemoglobin (Hb)* Method : Cynmeth Photometric Measurement	11.6	12.0 - 15.0	gm/dL
Erythrocyte (RBC) Count* Method : Electrical Impedence	4.24	3.8 - 4.8	mil/cu.mm
Packed Cell Volume (PCV)* Method : Calculated	34.4	36 - 46	%
Mean Cell Volume (MCV)* Method : Electrical Impedence	81	83 - 101	fL
Mean Cell Haemoglobin (MCH)* Method : Calculated	27.5	27 - 32	pg
Mean Corpuscular Hb Concn. (MCHC)* Method : Calculated	33.9	31.5 - 34.5	gm/dL
Red Cell Distribution Width (RDW)* Method : Electrical Impedence	14.3	11.6 - 14.0	%
Total Leucocytes (WBC) Count* Method : Electrical Impedence	5800	4000-10000	cell/cu.mm
Neutrophils* Method : VCSn Technology	61	40 - 80	%
Lymphocytes* Method : VCSn Technology	34	20 - 40	%
Monocytes* Method : VCSn Technology	4	2 - 10	%
Eosinophils* Method : VCSn Technology	1	1 - 6	%
Basophils	0	0 - 1	
Platelet Count* Method : Electrical Impedence	2.51	1.5 - 4.5	Lakhs/cu.mm
Mean Platelet Volume (MPV)* Method : Electrical Impedence	8	7.2 - 11.7	fL

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Test Description	Value(s)	Reference Range	Unit
PCT*	0.2	0.2 - 0.5	%
Method : Calculated			
PDW*	16.7	9.0 - 17.0	%
Method : Calculated			

Tests done on Automated Three Part Cell Counter. (WBC, RBC, Platelet count by impedance method, colorimetric method for Hemoglobin, WBC differential by flow cytometry using laser technology other parameters are calculated). All Abnormal Haemograms are reviewed confirmed microscopically.

### Esr, Erythrocyte Sedimentation Rate

**Esr, Erythrocyte Sedimentation Rate (Westergren)**      **52**      0-20      mm/hr

#### **Interpretation:**

- It indicates presence and intensity of an inflammatory process. It does not diagnose a specific disease. Changes in the ESR are more significant than the abnormal results of a single test.
- It is a prognostic test and used to monitor the course or response to treatment of diseases like tuberculosis, bacterial endocarditis, acute rheumatic fever, rheumatoid arthritis, SLE, Hodgkins disease, temporal arteritis and polymyalgia rheumatica.
- It is also increased in pregnancy, multiple myeloma, menstruation, and hypothyroidism.

### Blood Group & Rh Type

**Blood Grouping & Rh Typing**      "AB" POSITIVE

Method : Forward and Reverse By Tube Method

#### **Methodology**

This is done by forward and reverse grouping by tube Agglutination method.

#### **Interpretation**

Newborn baby does not produce ABO antibodies until 3 to 6 months of age. So the blood group of the Newborn baby is done by ABO antigen grouping (forward grouping) only, antibody grouping (reverse grouping) is not required. Confirmation of the New-born's blood group is indicated when the A and B antigen expression and the isoagglutinins are fully developed (2-4 years).

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Test Description	Value(s)	Reference Range	Unit
<b><u>Fasting - Glucose</u></b>			
<b>Glucose Fasting*</b> Method : Plasma, Hexokinase	98.14	Normal: 70-100 Impaired Fasting Glucose (IFG): 101-125 Diabetes Mellitus: >125	mg/dL
<b><u>Post Prandial Blood Sugar</u></b>			
<b>Blood Glucose-Post Prandial*</b> Method : Plasma - P, Hexokinase	74.25	70-140	mg/dL
<b><u>Urine Routine</u></b>			
Colour*	Pale Yellow		
Transparency (Appearance)*	Clear	Clear	
Reaction (pH)*	6.0	4.5 - 8	
Specific Gravity*	1.020	1.010 - 1.030	
<b><u>Chemical Examination (Automated Dipstick Method) Urine</u></b>			
Urine Glucose*	Negative	Negative	
Urine Protein*	Negative	Negative	
Urine Ketone*	Negative	Negative	
Blood*	Negative	Negative	
Bilirubin*	Negative	Negative	
Nitrite*	Negative	Negative	
Leucocytes*	Negative	Negative	
Urobilinogen*	Normal	With in normal limits	
<b><u>Microscopic Examination Urine</u></b>			
Pus Cells (WBCs)*	2-3	0 - 5	/hpf

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Test Description	Value(s)	Reference Range	Unit
Epithelial Cells*	1-2	0 - 4	/hpf
Red blood Cells*	Absent	Absent	/hpf
Crystals*	Absent	Absent	
Cast*	Absent	Absent	
Bacteria*	Absent	Absent	

**Lipid Profile**

Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	170.10	Desirable: <= 200 Borderline High: 201-239 High: > 239 Ref: The National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.	mg/dL
Triglycerides Method : Serum, Enzymatic, endpoint	52.97	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	47.84	<40: Low 40 - 60: Optimal > 60: Desirable	mg/dL
LDL Cholesterol Method : Serum	111.67	Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very High: >= 190	mg/dL

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Test Description	Value(s)	Reference Range	Unit
Non - HDL Cholesterol, Serum Method : calculated	122.26	Desirable: < 130 mg/dL Borderline High: 130-159mg/dL High: 160-189 mg/dL Very High: > or = 190 mg/dL	mg/dL
VLDL Cholesterol Method : calculated	10.59	6 - 38	mg/dL
CHOL/HDL RATIO Method : calculated	3.56	3.5 - 5.0	ratio
LDL/HDL RATIO Method : calculated	2.33	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio

**Note:** 8-10 hours fasting sample is required.

#### Liver Function Test

Bilirubin - Total Method : Serum, Diazotization	0.87	Adults and Children: < 1.2	mg/dL
Bilirubin - Direct Method : Serum, Diazotization	0.38	Adults and Children: < 0.5	mg/dL
Bilirubin - Indirect Method : Serum, Calculated	0.49	0.1 - 1.0	mg/dL
SGOT Method : Serum, UV with P5P, IFCC 37 degree	14.63	< 50	U/L
SGPT Method : Serum, UV with P5P, IFCC 37 degree	15.91	< 50	U/L
Alkaline Phosphatase-ALPI Method : Serum, PNPP, AMP Buffer, IFCC 37 degree	73.01	30-120	U/L
Total Protein Method : Serum, Biuret, reagent blank end point	8.21	6.6 - 8.3	g/dL
Albumin Method : Serum, Bromocresol purple	4.47	Adults: 3.5 - 5.2	g/dL

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Test Description	Value(s)	Reference Range	Unit
Globulin Method : Calculated	3.74	1.8 - 3.6	g/dL
A/G Ratio Method : Calculated	1.20	1.2 - 2.2	ratio

### **KIDNEY FUNCTION TEST**

Urea * Method : Serum	23.30	15- 50	mg/dL
Blood Urea Nitrogen-BUN* Method : Serum, Urease	10.89	7 - 24	mg/dL
Uric Acid* Method : Serum, Uricase/POD	3.78	2.6 - 6.0	mg/dL
Creatinine* Method : Serum, Jaffe IDMS	0.6	0.6 - 1.1	mg/dL

### **HBA1C (Glycosylated Haemoglobin)**

Glyco Hb (HbA1C) Method : EDTA Whole blood,HPLC	5.5	Non-Diabetic: <=5.9 Pre Diabetic:6.0-6.4 Diabetic: >=6.5	%
Estimated Average Glucose :	111.15		mg/dL

#### Interpretations

- HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%
- Low glycated haemoglobin in a non diabetic individual are often associated with systemic inflammatory diseases, chronic anaemia (especially severe iron deficiency and haemolytic), chronic renal failure and liver diseases. Clinical correlation suggested.
- In known diabetic patients, following values can be considered as a tool for monitoring the glycemic control.  
Excellent control-6-7 %  
Fair to Good control – 7-8 %

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Test Description	Value(s)	Reference Range	Unit
Unsatisfactory control – 8 to 10 % Poor Control – More than 10 %			
<b>Thyroid Function Test ( TFT)</b>			
TRI-IODO THYRONINE (T3) Method : CLIA	1.021	0.60 - 1.81	ng/mL
TOTAL THYROXINE (T4) Method : CLIA	8.214	4.2 - 12.0	ug/dL
THYROID STIMULATING HORMONE (TSH) Method : CLIA	1.741	0.46 – 8.10 : 1 Yrs – 5 Yrs 0.36 – 5.80 : 6 Yrs – 18 Yrs 0.35 – 5.50 : >18 Yrs Pregnancy Ranges 1st Trimester :0.1 - 2.5 2nd Trimester :0.2 - 3.0 3rd Trimester:0.3 - 3.0	uIU/mL

**Comments:**

IF NOT ON DRUGS SUGGESTED FT3 & FT4 ESTIMATION

**Please correlate with clinical conditions.**

**Note :** Serum T3, T4 and TSH form the three components of thyroid screening panel, useful in diagnosing various disorders of the thyroid gland. Primary Hypothyroidism is accompanied by depressed serum T3 and T4 values and elevated serum TSH levels. Although elevated TSH levels are nearly always indicative of Primary Hypothyroidism, rarely they can from TSH secreting pituitary tumors (Secondary hyperthyroidism)To confirm diagnosis - evaluate FT3 and FT4.

**Pap Smear**

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Test Description	Value(s)	Reference Range	Unit
<b>IRON</b>			
Iron*	77	33 - 193	µg/dL

**Interpretation:**

Disease	Iron	TIBC	UIBC	%Transferrin Saturation	Ferritin
Iron Deficiency	Low	High	High	Low	Low
Hemochromatosis	High	Low	Low	High	High
Chronic Illness	Low	Low	Low/Normal	Low	Normal/High
Hemolytic Anemia	High	Normal/Low	Low/Normal	High	High
Sideroblastic Anemia	Normal/High	Normal/Low	Low/Normal	High	High
Iron Poisoning	High	Normal	Low	High	Normal

**\*\*END OF REPORT\*\***

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