

TEST REPORT

Reg. No. : 312100245	Reg. Date : 09-Dec-2023 09:54	Ref.No :	Approved On : 09-Dec-2023 10:07
Name : Mrs. TAHERA FATEMA MOMIN			Collected On : 09-Dec-2023 09:59
Age : 26 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
Complete Blood Count			
<u>Specimen: EDTA blood</u>			
Hemoglobin			
Hemoglobin(SLS method)	L 10.3	g/dL	12.0 - 15.0
Hematocrit (calculated)	L 32.6	%	36 - 46
RBC Count(Ele.Impedence)	4.00	X 10 ¹² /L	3.8 - 4.8
MCV (Calculated)	L 81.5	fL	83 - 101
MCH (Calculated)	L 25.8	pg	27 - 32
MCHC (Calculated)	31.6	g/dL	31.5 - 34.5
RDW (Calculated)	14.0	%	11.5 - 14.5
Differential WBC count (Impedance and flow)			
Total WBC count	6400	/μL	4000 - 10000
Neutrophils	59	%	38 - 70
Lymphocytes	34	%	21 - 49
Monocytes	04	%	3 - 11
Eosinophils	03	%	0 - 7
Basophils	00		
Platelet			
Platelet Count (Ele.Impedence)	350000	/cmm	150000 - 410000
MPV	10.20	fL	6.5 - 12.0
EDTA Whole Blood			

Note: All abnormal hemograms are reviewed and confirmed microscopically. Peripheral blood smear and malarial parasite examination are not part of CBC report.

Test done from collected sample.

This is an electronically authenticated report.



Approved by: **Dr. Swati Shah**

M.B.D.C.P.
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TEST REPORT

Reg. No. : 312100245 Reg. Date : 09-Dec-2023 09:54 Ref.No : Approved On : 09-Dec-2023 10:52
Name : Mrs. TAHERA FATEMA MOMIN Collected On : 09-Dec-2023 09:59
Age : 26 Years Gender: Female Pass. No. : Dispatch At :
Ref. By : APOLLO Tele No. :
Location :

Test Name	Results	Units	Bio. Ref. Interval
BLOODGROUP & RH			
<u>Specimen: EDTA and Serum; Method: Gel card system</u>			
Blood Group "ABO" <i>Agglutination</i>	"AB"		
Blood Group "Rh" <i>Agglutination</i>	Positive		
EDTA Whole Blood			

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TEST REPORT

Reg. No. : 312100245	Reg. Date : 09-Dec-2023 09:54	Ref.No :	Approved On : 09-Dec-2023 10:19
Name : Mrs. TAHERA FATEMA MOMIN			Collected On : 09-Dec-2023 09:59
Age : 26 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
PERIPHERAL BLOOD SMEAR EXAMINATION			
<u>Specimen: Peripheral blood smear & EDTA blood, Method:Microscopy</u>			
RBC Morphology	RBCs are normocytic normochromic.		
WBC Morphology	WBCs are normal in count,morphology & distribution.		
Differential Count	.		
Platelets	Platelets are adequate in number & normal in morphology.		
Parasite	Malarial parasite is not detected.		
EDTA Whole Blood			

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TEST REPORT

Reg. No. : 312100245 Reg. Date : 09-Dec-2023 09:54 Ref.No : Approved On : 09-Dec-2023 12:40
Name : Mrs. TAHERA FATEMA MOMIN Collected On : 09-Dec-2023 09:59
Age : 26 Years Gender: Female Pass. No. : Dispatch At :
Ref. By : APOLLO Tele No. :
Location :

Test Name	Results	Units	Bio. Ref. Interval
FASTING PLASMA GLUCOSE Specimen: Fluoride plasma			
Fasting Plasma Glucose <i>Hexokinase</i>	85.00	mg/dL	Normal: <=99.0 Prediabetes: 100-125 Diabetes :>=126

Fluoride Plasma

Criteria for the diagnosis of diabetes:

- HbA1c >= 6.5 *
- Or
- Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs.
- Or
- Two hour plasma glucose >= 200mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water.
- Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose >= 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011;34;S11.

Test done from collected sample.

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TEST REPORT

Reg. No. : 312100245 Reg. Date : 09-Dec-2023 09:54 Ref.No : Approved On : 09-Dec-2023 13:46
Name : Mrs. TAHERA FATEMA MOMIN Collected On : 09-Dec-2023 11:37
Age : 26 Years Gender: Female Pass. No. : Dispatch At :
Ref. By : APOLLO Tele No. :
Location :

Test Name	Results	Units	Bio. Ref. Interval
POST PRANDIAL PLASMA GLUCOSE Specimen: Fluoride plasma			
Post Prandial Plasma Glucose <i>Hexokinase</i>	L 90.46	mg/dL	Normal: <=139 Prediabetes : 140-199 Diabetes: >=200
Flouride Plasma			

Test done from collected sample.

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Approved by: Dr. Keyur Patel

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Generated On : 09-Dec-2023 15:01

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TEST REPORT

Reg. No. : 312100245 **Reg. Date** : 09-Dec-2023 09:54 **Ref.No** : **Approved On** : 09-Dec-2023 12:25
Name : Mrs. TAHERA FATEMA MOMIN **Collected On** : 09-Dec-2023 09:59
Age : 26 Years **Gender:** Female **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** :
Location :

Test Name	Results	Units	Bio. Ref. Interval
GGT <i>L-Y-Glutamyl-3 Carboxy-4-Nitroanilide, Enzymetic Colorimetric</i> Serum	17.4	U/L	6 - 42

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TEST REPORT

Reg. No. : 312100245	Reg. Date : 09-Dec-2023 09:54	Ref.No :	Approved On : 09-Dec-2023 12:07
Name : Mrs. TAHERA FATEMA MOMIN			Collected On : 09-Dec-2023 09:59
Age : 26 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE			
CHOLESTEROL	136.00	mg/dL	Desirable <=200 Borderline high risk 200 - 240 High Risk >240
Triglyceride <i>Enzymatic Colorimetric Method</i>	56.00	mg/dL	<150 : Normal, 150-199 : Border Line High, 200-499 : High, >=500 : Very High
Very Low Density Lipoprotein(VLDL) <i>Calculated</i>	11	mg/dL	0 - 30
Low-Density Lipoprotein (LDL) <i>Calculated Method</i>	83.00	mg/dL	< 100 : Optimal, 100-129 : Near Optimal/above optimal, 130-159 : Borderline High, 160-189 : High, >=190 : Very High
High-Density Lipoprotein(HDL)	42.00	mg/dL	<40 >60
CHOL/HDL RATIO <i>Calculated</i>	3.24		0.0 - 3.5
LDL/HDL RATIO <i>Calculated</i>	1.98		1.0 - 3.4
TOTAL LIPID <i>Calculated</i>	L 344.00	mg/dL	400 - 1000
Serum			

As a routine test to determine if your cholesterol level is normal or falls into a borderline-, intermediate- or high-risk category.
 To monitor your cholesterol level if you had abnormal results on a previous test or if you have other risk factors for heart disease.
 To monitor your body's response to treatment, such as cholesterol medications or lifestyle changes.
 To help diagnose other medical conditions, such as liver disease.
 Note : biological reference intervals are according to the national cholesterol education program (NCEP) guidelines.

Test done from collected sample.

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Age : 26 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>LIVER FUNCTION TEST</u>			
TOTAL PROTEIN	6.65	g/dL	6.6 - 8.8
ALBUMIN	4.86	g/dL	3.5 - 5.2
GLOBULIN <i>Calculated</i>	L 1.79	g/dL	2.4 - 3.5
ALB/GLB <i>Calculated</i>	H 2.72		1.2 - 2.2
SGOT	25.50	U/L	<31
SGPT	24.30	U/L	<31
Alkaline Phosphatase <i>ENZYMATIC COLORIMETRIC IFCC, PNP, AMP BUFFER</i>	L 33.40	U/L	40 - 130
TOTAL BILIRUBIN	0.56	mg/dL	0.1 - 1.2
DIRECT BILIRUBIN	0.16	mg/dL	<0.2
INDIRECT BILIRUBIN <i>Calculated</i>	0.40	mg/dL	0.0 - 1.00
Serum			

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TEST REPORT

Reg. No. : 312100245 **Reg. Date** : 09-Dec-2023 09:54 **Ref.No** : **Approved On** : 09-Dec-2023 12:06
Name : Mrs. TAHERA FATEMA MOMIN **Collected On** : 09-Dec-2023 09:59
Age : 26 Years **Gender:** Female **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** :
Location :

Test Name	Results	Units	Bio. Ref. Interval
KIDNEY FUNCTION TEST			
Urea	23.0	mg/dL	
Uric Acid (UA) <i>Uricase</i>	2.61	mg/dL	2.4 - 5.7
Creatinine	0.70	mg/dL	0.51 - 1.5
Serum			

Test done from collected sample.

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**Approved by: Dr. Swati Shah**M.B.D.C.P.
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TEST REPORT

Reg. No. : 312100245 **Reg. Date** : 09-Dec-2023 09:54 **Ref.No** : **Approved On** : 09-Dec-2023 13:26
Name : Mrs. TAHERA FATEMA MOMIN **Collected On** : 09-Dec-2023 09:59
Age : 26 Years **Gender:** Female **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** :
Location :

Test Name	Results	Units	Bio. Ref. Interval
HEMOGLOBIN A1C (HBA1C) <i>High Performance Liquid Chromatography (HPLC)</i>	6.00	%	Normal: ≤ 5.6 Prediabetes: 5.7-6.4 Diabetes: ≥ 6.5 Diabetes Control Criteria : 6-7 : Near Normal Glycemia <7 : Goal 7-8 : Good Control >8 : Action Suggested
Mean Blood Glucose <i>(Calculated)</i>	125	mg/dL	

Sample Type: EDTA Whole Blood

Criteria for the diagnosis of diabetes

- HbA1c ≥ 6.5 * Or Fasting plasma glucose >126 gm/dL. Fasting is defined as no caloric intake at least for 8 hrs. Or
- Two hour plasma glucose ≥ 200 mg/dL during an oral glucose tolerance test by using a glucose load containing equivalent of 75 gm anhydrous glucose dissolved in water. Or
- In a patient with classic symptoms of hyperglycemia or hyperglycemic crisis, a random plasma glucose ≥ 200 mg/dL. *In the absence of unequivocal hyperglycemia, criteria 1-3 should be confirmed by repeat testing. American diabetes association. Standards of medical care in diabetes 2011. Diabetes care 2011:34:S11.

Limitation of HbA1c

- In patients with Hb variants even analytically correct results do not reflect the same level of glyemic control that would be expected in patients with normal population.
- Any cause of shortened erythrocyte survival or decreased mean erythrocyte survival or decreased mean erythrocyte age eg. hemolytic diseases, pregnancy, significant recent/chronic blood

loss etc. will reduce exposure of RBC to glucose with consequent decrease in HbA1c values.

- Glycated HbF is not detected by this assay and hence specimens containing high HbF ($>10\%$) may result in lower HbA1c values than expected. Importance of HbA1C (Glycated Hb.) in Diabetes Mellitus

- HbA1C, also known as glycated hemoglobin, is the most important test for the assessment of long term blood glucose control(also called glyemic control).
- HbA1C reflects mean glucose concentration over past 6-8 weeks and provides a much better indication of longterm glyemic control than blood glucose determination.
- HbA1c is formed by non-enzymatic reaction between glucose and Hb. This reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy (Eye-complications), nephropathy (kidney-complications) and neuropathy (nerve complications), are potentially serious and can lead to blindness, kidney failure, etc.
- Glyemic control monitored by HbA1c measurement using HPLC method (GOLD STANDARD) is considered most important. (Ref. National Glycohaemoglobin Standardization Program - NGSP)

Note : Biological reference intervals are according to American Diabetes Association (ADA) Guidelines.

Test done from collected sample.

This is an electronically authenticated report.



Approved by: **Dr. Hiral Arora**

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Generated On : 09-Dec-2023 15:01

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TEST REPORT

Reg. No. : 312100245	Reg. Date : 09-Dec-2023 09:54	Ref.No :	Approved On : 09-Dec-2023 13:26
Name : Mrs. TAHERA FATEMA MOMIN			Collected On : 09-Dec-2023 09:59
Age : 26 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Bio-Rad CDM System
Bio-Rad Variant V-II Instrument #1

PATIENT REPORT
V2TURBO_A1c_2.0

Patient Data

Sample ID: 131203500198
 Patient ID:
 Name:
 Physician:
 Sex:
 DOB:

Analysis Data

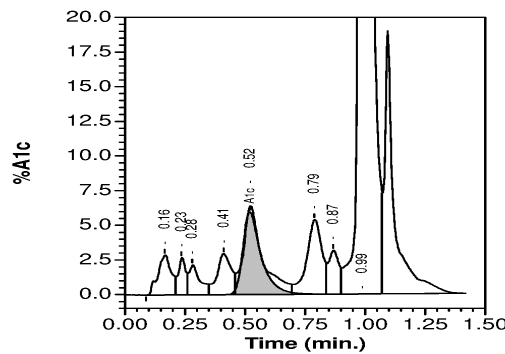
Analysis Performed: 09/12/2023 13:16:39
 Injection Number: 7101
 Run Number: 311
 Rack ID:
 Tube Number: 5
 Report Generated: 09/12/2023 13:19:29
 Operator ID:

Comments:

Peak Name	NGSP %	Area %	Retention Time (min)	Peak Area
A1a	---	1.6	0.164	16351
A1b	---	0.8	0.233	8473
F	---	1.0	0.280	10178
LA1c	---	1.6	0.411	16541
A1c	6.0	---	0.520	46784
P3	---	3.4	0.787	35132
P4	---	1.3	0.865	13911
Ao	---	85.8	0.987	893887

Total Area: 1,041,256

HbA1c (NGSP) = 6.0 %



Test done from collected sample.

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Approved by: **Dr. Hiral Arora**



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 Reg. No.: G-32999

Generated On : 09-Dec-2023 15:01

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TEST REPORT

Reg. No. : 312100245 **Reg. Date** : 09-Dec-2023 09:54 **Ref.No** : **Approved On** : 09-Dec-2023 15:01
Name : Mrs. TAHERA FATEMA MOMIN **Collected On** : 09-Dec-2023 09:59
Age : 26 Years **Gender:** Female **Pass. No. :** **Dispatch At** :
Ref. By : APOLLO **Tele No.** :
Location :

Test Name	Results	Units	Bio. Ref. Interval
THYROID FUNCTION TEST			
T3 (triiodothyronine), Total <small>CMIA</small>	1.25	ng/mL	0.70 - 2.04
T4 (Thyroxine), Total <small>CMIA</small>	9.20	µg/dL	5.5 - 11.0
TSH (Thyroid stimulating hormone) <small>CMIA</small>	1.579	µIU/mL	0.35 - 4.94

Sample Type: Serum

Comments:

Thyroid stimulating hormone (TSH) is synthesized and secreted by the anterior pituitary in response to a negative feedback mechanism involving concentrations of FT3 (free T3) and FT4 (free T4). Additionally, the hypothalamic tripeptide, thyrotropin-releasing hormone (TRH), directly stimulates TSH production. TSH stimulates thyroid cell production and hypertrophy, also stimulate the thyroid gland to synthesize and secrete T3 and T4. Quantification of TSH is significant to differentiate primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

TSH levels During Pregnancy :

- First Trimester : 0.1 to 2.5 µIU/mL
- Second Trimester : 0.2 to 3.0 µIU/mL
- Third trimester : 0.3 to 3.0 µIU/mL

Reference : Carl A.Burtis,Edward R.Ashwood,David E.Bruns. Tietz Textbook of Clinical Chemistry and Molecular Diagnostics. 5th Edition. Philadelphia: WB Saunders,2012:2170

Test done from collected sample.

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Approved by: Dr. Avani Patel

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TEST REPORT

Reg. No. : 312100245	Reg. Date : 09-Dec-2023 09:54	Ref.No :	Approved On : 09-Dec-2023 11:26
Name : Mrs. TAHERA FATEMA MOMIN			Collected On : 09-Dec-2023 09:59
Age : 26 Years	Gender: Female	Pass. No. :	Dispatch At :
Ref. By : APOLLO			Tele No. :
Location :			

Test Name	Results	Units	Bio. Ref. Interval
<u>URINE ROUTINE EXAMINATION</u>			
<u>Physical Examination</u>			
Colour	Pale Yellow		
Clarity	Clear		
<u>CHEMICAL EXAMINATION (by strip test)</u>			
pH	6.0		4.6 - 8.0
Sp. Gravity	1.020		1.002 - 1.030
Protein	Nil		Absent
Glucose	Nil		Absent
Ketone	Nil		Absent
Bilirubin	Nil		Nil
Nitrite	Negative		Nil
Leucocytes	Nil		Nil
Blood	Absent		Absent
<u>MICROSCOPIC EXAMINATION</u>			
Leucocytes (Pus Cells)	Nil		0 - 5/hpf
Erythrocytes (RBC)	Nil		0 - 5/hpf
Casts	Nil	/hpf	Absent
Crystals	Nil		Absent
Epithelial Cells	Nil		Nil
Monilia	Nil		Nil
T. Vaginalis	Nil		Nil
Urine			

----- End Of Report -----

Test done from collected sample.

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