

NAME	: Mr. N RAVI KUMAR	MR NO.	: 21071114
AGE/SEX	: 29 Yrs / Male	VISIT NO.	: 137257
REFERRED BY :		DATE OF COLLECTION	: 16-07-2021 at 10:17 AM
		DATE OF REPORT	: 16-07-2021 at 12:26 PM
REF CENTER	: MEDIWHEEL		



TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
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HAEMATOLOGY

COMPLETE BLOOD COUNT (CBC) WITH ESR

HAEMOGLOBIN <i>Colorimetric Method</i>	15.6 gm/dL	13 - 18 gm/dL
HEMATOCRIT (PCV) <i>Calculated</i>	48.2 %	40 - 54 %
RED BLOOD CELL (RBC) COUNT <i>Electrical Impedance</i>	5.7 million/cu.mm	4.5 - 5.9 million/cu.mm
PLATELET COUNT <i>Electrical Impedance</i>	4.8 Lakhs/cumm	1.5 - 4.5 Lakhs/cumm
MEAN CELL VOLUME (MCV) <i>Calculated</i>	85.3 fl	80 - 100 fl
MEAN CORPUSCULAR HEMOGLOBIN (MCH) <i>Calculated</i>	27.6 pg	26 - 34 pg
MEAN CORPUSCULAR HEMOGLOBIN CONCENTRATION (MCHC) <i>Calculated</i>	32.3 %	31 - 35 %
TOTAL WBC COUNT (TC) <i>Electrical Impedance</i>	10440 cells/cumm	4000 - 11000 cells/cumm

DIFFERENTIAL COUNT

NEUTROPHILS <i>VCS Technology/Microscopic</i>	73 %	40 - 75 %
LYMPHOCYTES <i>VCS Technology/Microscopic</i>	21 %	25 - 40 %
EOSINOPHILS <i>VCS Technology/Microscopic</i>	01 %	0 - 7 %
MONOCYTES <i>VCS Technology/Microscopic</i>	05 %	1 - 8 %
BASOPHILS <i>Electrical Impedance</i>	00 %	
ESR <i>Westergren Method</i>	35 mm/hr	0 - 15 mm/hr

Krishna M. Murthy



A. Vamseedhar

Dr. KRISHNA MURTHY

MD
BIOCHEMIST

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Lab Seal

Dr. VAMSEEDHAR.A

D.C.P, M.D
CONSULTANT PATHOLOGIST

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TEST PARAMETER

RESULT

REFERENCE RANGE

SPECIMEN

BLOOD GROUP & Rh TYPING
Tube Agglutination (Forward and Reverse)

"B" Positive

GLYCATED HAEMOGLOBIN (HbA1C)
HPLC

5.1 %

American Diabetic Association (ADA) recommendations:

Non diabetic adults : <5.7 %

At risk (Pre diabetic): 5.7 – 6.4%

Diabetic : \geq 6.5%

Therapeutic goal for glycemic control :

Goal for therapy: < 7.0%

Action suggested: > 8.0%

ESTIMATED AVERAGE GLUCOSE (eAG)

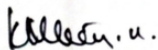
99.67 mg/dL

Calculation

Comments:

This assay is useful for diagnosing Diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks and is a better indicator of long term glycemic control as compared with blood and urine glucose measurements. This provides a additional criterion for assessing glucose control because glycated hemoglobin values are free of day-to-day glucose fluctuation and are unaffected by exercise or food ingestion.

After a sudden alteration in blood glucose concentration, the rate of change of HbA1c is rapid during initial 2 months, followed by more gradual change approaching steady state 3 months later.




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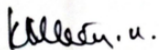
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CLINICAL BIOCHEMISTRY

BLOOD UREA <i>UREASE-GLUTAMATE DEHYDROGENASE (GLDH)</i>	17.4 mg/dL	15 - 50 mg/dL
CREATININE <i>Jaffe Kinetic</i>	0.77 mg/dL	0.4 - 1.4 mg/dL
URIC ACID <i>Uricase-Peroxidase</i>	5.2 mg/dL	3 - 7.2 mg/dL
SERUM ELECTROLYTES		
SODIUM <i>Ion Selective Electrode (ISE)</i>	140 mmol/L	136 - 145 mmol/L
POTASSIUM <i>Ion Selective Electrode (ISE)</i>	4.3 mmol/L	3.5 - 5.2 mmol/L
CHLORIDE <i>Ion Selective Electrode (ISE)</i>	102 mmol/L	97 - 111 mmol/L



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TEST PARAMETER RESULT REFERENCE RANGE SPECIMEN

LIPID PROFILE TEST

TOTAL CHOLESTEROL
Cholesterol Oxidase-Peroxidase (CHOD-POD)

202 mg/dL up to 200 mg/dL
Border Line: 200 – 240 mg/dL
High: > 240 mg/dL

TRIGLYCERIDES
Glycerol Peroxidase-Peroxidase (GPO-POD)

196.7 mg/dL up to 150 mg/dL
Desirable: <150 mg/dL
Border Line: 150 – 200 mg/dL
High: >200 – 500 mg/dL
Very High: > 500 mg/dL

HDL CHOLESTEROL - DIRECT
PEG-Cholesterol Esterase

44.4 mg/dl 40 - 60 mg/dl
>= 60mg/dL - Excellent (protects against heart disease)
40-59 mg/dL - Higher the better
<40 mg/dL - Lower than desired (major risk for heart disease)

LDL CHOLESTEROL - DIRECT
Cholesterol Esterase-Cholesterol Oxidase

118.3 mg/dL up to 100 mg/dL
100-129 mg/dL- Near optimal/above optimal
130-159 mg/dL- Borderline High
160-189 mg/dL- High
190->190 mg/dL - Very High

VLDL CHOLESTEROL
Calculation

39.3 mg/dL 2 - 30 mg/dL

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TOTAL CHOLESTROL/HDL RATIO <i>Calculation</i>	4.5	up to 3.5 3.5-5.0 - Moderate >5.0 - High	
LDL/HDL RATIO <i>Calculation</i>	2.7	up to 2.5 2.5-3.3 - Moderate >3.3 - High	
FASTING BLOOD SUGAR <i>Hexokinase</i>	99.8 mg/dl	70 - 110 mg/dl	

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LIVER FUNCTION TEST (LFT)

TOTAL BILIRUBIN <i>Colorimetric Diazo Method</i>	0.43 mg/dL	0.2 - 1.2 mg/dL	
DIRECT BILIRUBIN <i>Colorimetric Diazo Method</i>	0.18 mg/dL	0 - 0.4 mg/dL	
INDIRECT BILIRUBIN <i>Calculation</i>	0.25 mg/dl		
S G O T (AST) <i>IFCC Without Pyridoxal Phosphates</i>	15.6 U/L	up to 35 U/L	
S G P T (ALT) <i>IFCC Without Pyridoxal Phosphates</i>	32.2 U/L	up to 50 U/L	
ALKALINE PHOSPHATASE <i>p-Nitrophenyl Phosphate</i>	67 U/L	36 - 113 U/L	
SERUM GAMMA GLUTAMYLTRANSFERASE (GGT) <i>GCNA-IFCC</i>	27.1 U/L	15 - 85 U/L	
TOTAL PROTEIN <i>Biuret Colorimetric</i>	6.28 g/dl	6.2 - 8 g/dl	
S.ALBUMIN <i>Bromocresol Green (BCG)</i>	4.08 g/dl	3.5 - 5.2 g/dl	
S.GLOBULIN <i>Calculation</i>	2.2 g/dl	2.5 - 3.8 g/dl	
A/G RATIO <i>Calculation</i>	1.9	1 - 1.5	
CREATININE <i>Jaffe Method</i>	0.77 mg/dL	0.8 - 1.4 mg/dL	
POST PRANDIAL BLOOD SUGAR <i>Hexokinase</i>	137.9 mg/dl	80 - 150 mg/dl	

CLINICAL PATHOLOGY

URINE ROUTINE & MICROSCOPIC

PHYSICAL EXAMINATION

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TEST PARAMETER	RESULT	REFERENCE RANGE	SPECIMEN
Colour <i>Visual Method</i>	Pale Yellow	Pale yellow- yellow	
Appearance <i>Visual Method</i>	Clear	Clear/Transparent	
Specific Gravity <i>Strips Method</i>	1.020	1.005-1.035	
pH	6.0	4.6-8.5	

CHEMICAL EXAMINATION (DIPSTICK)

Protein <i>Strips Method</i>	Nil	Nil -Trace
Glucose <i>Strips Method</i>	Nil	Nil
Blood <i>Strips Method</i>	Negative	Negative
Ketone Bodies <i>Strips Method</i>	Absent	Negative
Urobilinogen <i>Strips Method</i>	Normal	Normal
Bile Salt <i>Strips Method</i>	Negative	Negative
Bilirubin <i>Strips Method</i>	Negative	Negative
Bile Pigments	Negative	NIL

MICROSCOPY

Pus Cells (WBC) <i>Light Microscopic</i>	3 - 4 /hpf	0-5/hpf
Epithelial Cells <i>Light Microscopic</i>	1 - 2 /hpf	0-4/hpf
RBC <i>Light Microscopic</i>	Not Seen /hpf	0-2/hpf
Cast <i>Light Microscopic</i>	NIL	NIL

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Crystal <i>Light Microscopic</i>	NIL	Nil	
FASTING URINE SUGAR (FUS)	NIL	NIL	
POSTPRANDIAL URINE SUGAR	NIL	NIL	

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IMMUNOASSAY

THYROID PROFILE

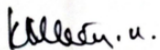
TOTAL TRIIODOTHYRONINE (T3) CMIA	1.36 ng/mL	0.87 - 1.78 ng/mL
TOTAL THYROXINE (T4) CMIA	8.75 µg/dL	6.09 - 12.23 µg/dL
THYROID STIMULATING HORMONE (TSH) CMIA	0.338 µIU/mL	0.38 - 5.33 µIU/mL 1st Trimester: 0.05 - 3.70 2nd Trimester: 0.31 - 4.35 3rd Trimester: 0.41 - 5.18

Note:

- TSH levels are subject to circadian variation, reaching peak levels between 2 - 4.a.m. and at a minimum between 6-10 pm. The variation is of the order of 50%, hence time of the day has influence on the measured serum TSH concentrations.
- Recommended test for T3 and T4 is unbound fraction or free levels as it is metabolically active.
- Physiological rise in Total T3 / T4 levels is seen in pregnancy and in patients on steroid therapy.

Clinical Use:

- Primary Hypothyroidism
- Hyperthyroidism
- Hypothalamic - Pituitary hypothyroidism
- Inappropriate TSH secretion
- Nonthyroidal illness
- Autoimmune thyroid disease
- Pregnancy associated thyroid disorders
- Thyroid dysfunction in infancy and early childhood




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PROSTATIC SPECIFIC ANTIGEN (PSA)

PROSTATIC SPECIFIC ANTIGEN (PSA)
CMIA

0.43 ng/mL

Up to 4ng/mL: Normal
4-10 ng/mL Hypertrophy &
benign genito urinary
conditions.
>10 ng/mL Suspicious of
malignancy.

PSA is used for monitoring patients with a history of prostate cancer and as an early indicator of recurrence and response to treatment. The test is commonly used for Prostate cancer screening.

Dispatched by: Sumalatha

**** End of Report ****

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