Patient Name : MRS. C. PARVATHI

Age / Gender : 40 years / Female

Patient ID : 10569

Source : MEDI WHEEL

Referral : SELF

Collection Time : Sep 29, 2022, 11:51 a.m.

Reporting Time : Sep 29, 2022, 01:26 p.m.

Sample ID :

669326114

Test Description	Value(s)	Reference Range	Unit

Esr, Erythrocyte Sedimentation Rate

Esr, Erythrocyte Sedimentation Rate (Westergren)	15	0-30	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.

Fasting - Glucose

Glucose Fasting* **Method : Plasma, Hexokinase**	71	Normal: 70-110 Impaired Fasting Glucose (IFG): 110-125 Diabetes Mellitus: >= 126 (On more than one occasion) (American Diabetes Association guidelines 2017)	mg/dL

Lipid Profile

Cholesterol-Total Method : Serum, Cholesterol oxidase esterase, peroxidase	110	Desirable: <= 200 Borderline High: 201-239 High: > 239 Ref: The National Cholesterol Education Program (NCEP) Adult Treatment Panel III Report.	mg/dL

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Test Description	Value(s)	Reference Range	Unit
Triglycerides Method : Serum, Enzymatic, endpoint	100	Normal: < 150 Borderline High: 150-199 High: 200-499 Very High: >= 500	mg/dL
Cholesterol-HDL Direct Method : Serum, Direct measure-PEG	43	Normal: > 40 Major Heart Risk: < 40	mg/dL
LDL Cholesterol Method : Serum	47	Optimal: < 100 Near optimal/above optimal: 100-129 Borderline high: 130-159 High: 160-189 Very High: >= 190	mg/dL
Non - HDL Cholesterol, Serum Method : calculated	67	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	20	6 - 38	mg/dL
CHOL/HDL RATIO Method : calculated	**2.5**	3.5 - 5.0	ratio
LDL/HDL RATIO Method : calculated	1.0	Desirable / low risk - 0.5 -3.0 Low/ Moderate risk - 3.0- 6.0 Elevated / High risk - > 6.0	ratio
HDL/LDL RATIO Method : calculated	0.9	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

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Test Description	Value(s)	Reference Range	Unit
Bilirubin - Total	0.5	Adults and Children: < 1.2	mg/dL
Method : Serum, Diazotization			
Bilirubin - Direct	0.2	Adults and Children: < 0.5	mg/dL
Method : Serum, Diazotization			
Bilirubin - Indirect	0.3	0.1 - 1.0	mg/dL
Method : Serum, Calculated			
SGOT	19	< 50	U/L
Method : Serum, UV with P5P, IFCC 37 degree			
SGPT	13	< 50	U/L
Method : Serum, UV with P5P, IFCC 37 degree			
Alkaline Phosphatase-ALPI	85	30-120	U/L
Method : Serum, PNPP, AMP Buffer, IFCC 37 degree			
Total Protein	6.7	6.6 - 8.3	g/dL
Method : Serum, Biuret, reagent blank end point			
Globulin	2.9	1.8 - 3.6	g/dL
Method : Calculated			
Albumin	3.8	Adults: 3.5 - 5.2	g/dL
Method : Serum, Bromcresol purple			
A/G Ratio	1.3	1.2 - 2.2	ratio
Method : Calculated			
GGT-Gamma Glutamyl Transpeptidae	25	< 55	U/L
Method : Serum, G-glutamyl-carboxy-nitoanilide			

KIDNEY FUNCTION TEST

Test Description	Value(s)	Reference Range	Unit
Urea *	17	15- 50	mg/dL
Method : Serum			
Blood Urea Nitrogen-BUN*	7.9	7 - 24	mg/dL
Method : Serum, Urease			
Uric Acid*	3.5	3.5 - 7.2	mg/dL
Method : Serum, Uricase/POD			

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Age / Gender : 40 years / Female	**Collection Time :** Sep 29, 2022, 11:51 a.m.	
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Source : MEDI WHEEL	**Sample ID :**	669326114

Test Description	Value(s)	Reference Range	Unit
Creatinine* Method : Serum, Jaffe IDMS	0.6	0.6 - 1.1	mg/dL

HBA1C (Glycosylated Haemoglobin)

Glyco Hb (HbA1C) Method : EDTA Whole blood,HPLC	5.0	Non-Diabetic: <=5.9 Pre Diabetic:6.0-6.4 Diabetic: >=6.5	%
Estimated Average Glucose :	96		mg/dL

Interpretations

1. HbA1C has been endorsed by clinical groups and American Diabetes Association guidelines 2017 for diagnosing diabetes using a cut off point of 6.5%

2. 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.

3. 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 %

   Unsatisfactory control – 8 to 10 %

   Poor Control – More than 10 %

Thyroid Function Test (TFT)

THYROID STIMULATING HORMONE (TSH) Method : CLIA	1.6	**0.46 – 8.10 : 1 Yrs – 5 Yrs** **0.36 – 5.80 : 6 Yrs – 18 Yrs** **0.35 – 5.50 : 18 Yrs – 55 Yrs** **0.50 – 8.90 : >55 Yrs** **Pregnancy Ranges::::** **Ist Tri :0.1 - 2.5** **IInd Tri :0.2 - 3.0** **IIIrd Tri:0.3 - 3.0**	uIU/mL

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Test Description	Value(s)	Reference Range	Unit
TOTAL TRIIODOTHYRONINE (T3) Method : CLIA	235	**126 – 258 : 1 Yr – 5 Yr** **96 – 227 : 6 Yr – 15 Yr** **91 – 164 : 16 Yr – 18 Yr** **60 – 181 : > 18 Years** **Pregnancy :** **1st Trimester : 81 - 190** **2nd & 3rd Trimester:100 - 260**	ng/dl
TOTAL THYROXINE (T4) Method : CLIA	8.2	**4.6 - 10.9** **Pregnancy:** **4.6 – 16.5 : 1st Trimester** **4.6 – 18.5 : 2nd & 3rd Tri**	µg/dL
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.	

Post Prandial Blood Sugar

Test Description	Value(s)	Reference Range	Unit
Blood Glucose-Post Prandial* **Method : Plasma - P, Hexokinase**	88	70-140	mg/dL

END OF REPORT

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