Patient Name : Ms Annepu PapammaMRN : 20110000013941Gender/Age : FEMALE , 31y (18/05/1991)Collected On : 26/11/2022 09:39 AMReceived On : 26/11/2022 12:54 PMReported On : 26/11/2022 01:23 PMBarcode : 022211260477Specimen : Whole BloodConsultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

	HEMATOL		
Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	14.7	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.94 H	million/µl	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	43.8	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	88.5	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	29.7	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	33.6	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	13.0	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	309	$10^3/\mu L$	150.0-450.0
Total Leucocyte Count(WBC) (Electrical Impedance)	7.8	10 <sup>3</sup> /µL	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	64.3	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	26.1	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	6.2	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	3.0	%	1.0-6.0
Basophils (VCS Technology Plus Microscopy)	0.4	%	0.0-2.0

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Absolute Neutrophil Count (Calculated)	5.1	x10 <sup>3</sup> cells/µl	2.0-7.0
Absolute Lympocyte Count (Calculated)	2.1	x10 <sup>3</sup> cells/µl	1.0-3.0
Absolute Monocyte Count (Calculated)	0.5	x10 <sup>3</sup> cells/µl	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.3	x10 <sup>3</sup> cells/µl	0.02-0.5
Absolute Basophil Count (Calculated)	0.1	-	-

As per the recommendation of International Council for Standardization in Hematology, the differential counts are additionally being reported as absolute numbers.

--End of Report-

Henra S

Dr. Hema S MD, DNB, Pathology Associate Consultant

## Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





 Patient Name : Ms Annepu Papamma
 MRN : 20110000013941
 Gender/Age : FEMALE , 31y (18/05/1991)

 Collected On : 26/11/2022 09:39 AM
 Received On : 26/11/2022 12:54 PM
 Reported On : 26/11/2022 02:21 PM

 Barcode : 022211260476
 Specimen : Whole Blood - ESR
 Consultant : EXTERNAL(EXTERNAL)

 $\label{eq:sample adequacy: Satisfactory $$Visit No: OP-001 Patient Mobile No: 9908204432$$ 

HEMATOLOGY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
Erythrocyte Sedimentation Rate (ESR)	4	mm/1hr	0.0-12.0	
(Westergren Method)				

--End of Report-

Shal

Dr. Shalini K S DCP, DNB, Pathology Consultant

## Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name : Ms Annepu Papamma MRN : 20110000013941 Gender/Age : FEMALE , 31y (18/05/1991)

Collected On : 26/11/2022 09:39 AM Received On : 26/11/2022 12:54 PM Reported On : 26/11/2022 01:29 PM

Barcode : 012211260937 Specimen : Whole Blood Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
HBA1C				
HbA1c (HPLC NGSP Certified)	5.2	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020	
Estimated Average Glucose (Calculated)	102.54	-	-	

#### Interpretation:

1. HbA1C above 6.5% can be used to diagnose diabetes provided the patient has symptoms. If the patient does not have symptoms with HbA1C>6.5%, repeat measurement on further sample. If the repeat test result is <6.5%, consider as diabetes high risk and repeat measurement after 6 months.

2. HbA1C measurement is not appropriate in diagnosing diabetes in children, suspicion of type 1 diabetes, symptoms of diabetes for less than 2 months, pregnancy, hemoglobinopathies, medications that may result sudden increase in glucose, anemia, renal failure, HIV infection, malignancies, severe chronic hepatic, and renal disease.

3. Any sample with >15% should be suspected of having a haemoglobin variant.

## --End of Report-

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry





Patient Name : Ms Annepu Papamma MRN : 20110000013941 Gender/Age : FEMALE , 31y (18/05/1991)

Collected On : 26/11/2022 09:39 AM Received On : 26/11/2022 12:54 PM Reported On : 26/11/2022 02:08 PM

Barcode : 012211260936 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

BIOCHEMISTRY				
Test	Result	Unit	<b>Biological Reference Interval</b>	
Fasting Blood Sugar (FBS) (Colorimetric - Glucose Oxidase Peroxidase)	77	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020	

--End of Report-

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically. (Fasting Blood Sugar (FBS) -> autoAuthorised)

m

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry





Patient Name : Ms Annepu Papamma MRN : 20110000013941 Gender/Age : FEMALE , 31y (18/05/1991)

Collected On : 26/11/2022 11:44 AM Received On : 26/11/2022 09:00 PM Reported On : 26/11/2022 09:16 PM

Barcode : 012211261429 Specimen : Plasma Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

	BIOCHEMI	STRY	
Test	Result	Unit	<b>Biological Reference Interval</b>
Post Prandial Blood Sugar (PPBS) (Colorimetric -	90	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes
Glucose Oxidase Peroxidase)			=>200 : Diabetes

--End of Report-

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.

• Kindly correlate clinically.

(Post Prandial Blood Sugar (PPBS) -> autoAuthorised)

m

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry





ADA standards 2020

 Patient Name : Ms Annepu Papamma
 MRN : 20110000013941
 Gender/Age : FEMALE , 31y (18/05/1991)

 Collected On : 26/11/2022 09:39 AM
 Received On : 26/11/2022 12:54 PM
 Reported On : 26/11/2022 01:46 PM

Barcode : 012211260938 Specimen : Serum Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

BIOCHEMISTRY						
Test	Result	Unit	<b>Biological Reference Interval</b>			
SERUM CREATININE						
<b>Serum Creatinine</b> (Two Point Rate - Creatinine Aminohydrolase)	0.55 L	mg/dL	0.6-1.0			
eGFR (Calculated)	129.0	mL/min/1.73m <sup>2</sup>	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodyamically unstable patients eGFR is not applicable for less than 18 years of age.			
<b>Blood Urea Nitrogen (BUN)</b> (Endpoint /Colorimetric – Urease)	7.3	mg/dL	7.0-17.0			
Serum Uric Acid (Colorimetric - Uricase, Peroxidase)	4.9	mg/dL	2.5-6.2			
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)						
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	137	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240			
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	115	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500			
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	31 L	mg/dL	40.0-60.0			
Non-HDL Cholesterol (Calculated)	106.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220			
LDL Cholesterol (Colorimetric)	94 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190			
VLDL Cholesterol (Calculated)	23.0	mg/dL	0.0-40.0			

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Cholesterol /HDL Ratio (Calculated)	4.5	-	0.0-5.0
THYROID PROFILE (T3, T4, TSH)			
Tri lodo Thyronine (T3) (Enhanced Chemiluminesence)	1.26	ng/mL	0.97-1.69
Thyroxine (T4) (Enhanced Chemiluminesence)	6.64	μg/dl	5.53-11.0
TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminesence)	2.045	μIU/mL	> 18 Year(s) : 0.4 -4.5 Pregnancy: 1st Trimester: 0.129-3.120 2nd Trimester: 0.274-2.652 3rd Trimester: 0.312-2.947
LIVER FUNCTION TEST(LFT)			
Bilirubin Total (Colorimetric -Diazo Method)	0.60	mg/dL	0.2-1.3
Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.10	mg/dL	0.0-0.4
Unconjugated Bilirubin (Indirect) (Calculated)	0.5	mg/dL	0.0-1.1
Total Protein (Colorimetric - Biuret Method)	7.60	gm/dL	6.3-8.2
Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.60	gm/dL	3.5-5.0
Serum Globulin (Calculated)	3.0	gm/dL	2.0-3.5
Albumin To Globulin (A/G)Ratio (Calculated)	1.54	-	1.0-2.1
SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal- 5-phosphate))	21	U/L	14.0-36.0
<b>SGPT (ALT)</b> (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	18	U/L	<35.0
Alkaline Phosphatase (ALP) (Multipoint-Rate - P- nitro Phenyl Phosphate, AMP Buffer)	99	U/L	38.0-126.0
Gamma Glutamyl Transferase (GGT) (Multipoint Rate - L-glutamyl-p-nitroanilide (Szasz Method))	20	U/L	12.0-43.0

## Interpretation Notes

Indirect Bilirubin result is a calculated parameter (Indirect Bilirubin = Total Bilirubin - Direct Bilirubin). Indirect bilirubin result includes the delta bilirubin fraction also. Delta Bilirubin is the bilirubin which is covalently bound to albumin. Delta Bilirubin is not expected to be present in healthy adults or neonates.

## --End of Report-

Anushre

Dr. Anushre Prasad MBBS,MD, Biochemistry Consultant Biochemistry

Mrs. Latha B S MSc, Mphil, Biochemistry Incharge, Consultant Biochemistry

#### Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.
   (Lipid Profile, -> autoAuthorised)
   (, -> autoAuthorised)
   (CR, -> autoAuthorised)
   (LFT, -> autoAuthorised)
   (Uric Acid, -> autoAuthorised)
   (Blood Urea Nitrogen (Bun) -> autoAuthorised)





Patient Name : Ms Annepu PapammaMRN : 20110000013941Gender/Age : FEMALE , 31y (18/05/1991)Collected On : 26/11/2022 09:39 AMReceived On : 26/11/2022 12:57 PMReported On : 26/11/2022 01:44 PMBarcode : 1B2211260018Specimen : Whole BloodConsultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

#### NARAYANA HRUDAYALAYA BLOOD CENTRE

Test	Result	Unit
BLOOD GROUP & RH TYPING		
Blood Group (Column Agglutination Technology)	А	-
RH Typing (Column Agglutination Technology)	Positive	-

--End of Report-

Dr. Prathip Kumar B R MBBS,MD, Immunohaematology & Blood Transfusion Consultant

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.



 Patient Name : Ms Annepu Papamma
 MRN : 20110000013941
 Gender/Age : FEMALE , 31y (18/05/1991)

 Collected On : 26/11/2022 09:39 AM
 Received On : 26/11/2022 12:45 PM
 Reported On : 26/11/2022 01:13 PM

Barcode : 032211260145 Specimen : Urine Consultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

	<b>CLINICAL PAT</b>	HOLOGY
Test	Result	Unit
Urine For Sugar (Post Prandial) (Enzyme Method (GOD POD))	Not Present	-
Urine For Sugar (Fasting) (Enzyme Method (GOD POD))	Not present	-

--End of Report-

Dr. Sudarshan Chougule MBBS, MD, Pathology Consultant & Head - Hematology & Flow Cytometry

Note

- Abnormal results are highlighted.
- Results relate to the sample only.
- Kindly correlate clinically.





Patient Name : Ms Annepu PapammaMRN : 20110000013941Gender/Age : FEMALE , 31y (18/05/1991)Collected On : 26/11/2022 09:39 AMReceived On : 26/11/2022 12:45 PMReported On : 26/11/2022 01:11 PMBarcode : 032211260145Specimen : UrineConsultant : EXTERNAL(EXTERNAL)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 9908204432

	CLINICAL PAT	HOLOGY	
Test	Result	Unit	<b>Biological Reference Interval</b>
URINE ROUTINE & MICROSCOPY			
PHYSICAL EXAMINATION			
Colour	Yellow	-	-
Appearance	Clear	-	-
CHEMICAL EXAMINATION			
pH(Reaction) (pH Indicator Method)	5.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.004	-	1.002 - 1.030
Protein (Automated Protein Error Or Ph Indicator)	Not Present	-	Not Present
Urine Glucose (Enzyme Method (GOD POD))	Not Present	-	Not Present
Ketone Bodies (Nitroprusside Method)	Not Present	-	Not Present
Bile Salts (Azo Coupling Method)	Not Present	-	-
Bile Pigment (Bilirubin) (Azo Coupling Method)	Not Present	-	Not Present
Urobilinogen (Azo Coupling Method)	Normal	-	Normal
Urine Leucocyte Esterase (Measurement Of Leukocyte Esterase Activity)	Not Present	-	Not Present
Blood Urine (Peroxidase Reaction)	Not Present	-	Not Present
Nitrite (Gries Method)	Not Present	-	Not Present
MICROSCOPIC EXAMINATION			
Pus Cells	0.0	/hpf	0-5

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RBC	0.4	/hpf	0-4
Epithelial Cells	0.2	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.00	/hpf	0-1
Bacteria	7.7	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

--End of Report-

Hena S

Dr. Hema S MD, DNB, Pathology Associate Consultant

# Note

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- Results relate to the sample only.
- Kindly correlate clinically.

