

DEPARTMENT OF LABORATORY MEDICINE

Final Report

Patient Name : V Atshayaa MRN : 20130000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 28/10/2023 08:40 AM Received On : 28/10/2023 03:36 PM Reported On : 28/10/2023 04:29 PM

Barcode : 012310280656 Specimen : Serum Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
SERUM CREATININE			
Serum Creatinine (Two Point Rate - Creatinine Aminohydrolase)	0.58	mg/dL	0.52-1.04
eGFR (Calculated)	125.7	mL/min/1.73m ²	Indicative of renal impairment < 60 Note:eGFR is inaccurate for Hemodynamically unstable patients eGFR is not applicable for less than 18 years of age.
Blood Urea Nitrogen (BUN) (Endpoint /Colorimetric – Urease)	4 L	mg/dL	7.0-17.0
Serum Uric Acid (Colorimetric - Uricase,Peroxidase)	4.2	mg/dL	2.5-6.2
LIPID PROFILE (CHOL,TRIG,HDL,LDL,VLDL)			
Cholesterol Total (Colorimetric - Cholesterol Oxidase)	159	mg/dL	Desirable: < 200 Borderline High: 200-239 High: > 240
Triglycerides (Colorimetric - Lip/Glycerol Kinase)	89	mg/dL	Normal: < 150 Borderline: 150-199 High: 200-499 Very High: > 500
HDL Cholesterol (HDLC) (Colorimetric: Non HDL Precipitation Phosphotungstic Acid Method)	45	mg/dL	40.0-60.0
Non-HDL Cholesterol (Calculated)	114.0	mg/dL	Desirable: < 130 Above Desirable: 130-159 Borderline High: 160-189 High: 190-219 Very High: => 220
LDL Cholesterol (Colorimetric)	104 L	mg/dL	Optimal: < 100 Near to above optimal: 100-129 Borderline High: 130-159 High: 160-189 Very High: > 190
VLDL Cholesterol (Calculated)	17.8	mg/dL	0.0-40.0

Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Cholesterol /HDL Ratio (Calculated)	3.6	-	0.0-5.0
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THYROID PROFILE (T3, T4, TSH)

Tri Iodo Thyronine (T3) (Enhanced Chemiluminescence)	1.35	ng/mL	0.97-1.69
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Thyroxine (T4) (Enhanced Chemiluminescence)	8.20	µg/dl	5.53-11.0
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TSH (Thyroid Stimulating Hormone) (Enhanced Chemiluminescence)	4.330 H	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
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Interpretation Notes

- TSH levels are subjected 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. Alteration in concentration of Thyroid hormone binding protein can profoundly affect Total T3 and/or Total T4 levels especially in pregnancy and in patients on steroid therapy. Unbound fraction (Free,T4 /Free,T3) of thyroid hormone is biologically active form and correlate more closely with clinical status of the patient than total T4/T3 concentration.

LIVER FUNCTION TEST(LFT)

Bilirubin Total (Colorimetric -Diazo Method)	0.36	mg/dL	0.2-1.3
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Conjugated Bilirubin (Direct) (Dual Wavelength - Reflectance Spectrophotometry)	0.00	mg/dL	0.0-0.3
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Unconjugated Bilirubin (Indirect) (Calculated)	0.36	mg/dL	0.0-1.1
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Total Protein (Colorimetric - Biuret Method)	7.80	gm/dL	6.3-8.2
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Serum Albumin (Colorimetric - Bromo-Cresol Green)	4.30	gm/dL	3.5-5.0
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Serum Globulin (Calculated)	3.5	gm/dL	2.0-3.5
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Albumin To Globulin (A/G)Ratio (Calculated)	1.23	-	1.0-2.1
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SGOT (AST) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	18	U/L	14.0-36.0
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SGPT (ALT) (Multipoint-Rate With P-5-P (pyridoxal-5-phosphate))	14	U/L	<35.0
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Alkaline Phosphatase (ALP) (Multipoint-Rate - P-nitro Phenyl Phosphate, AMP Buffer)	120	U/L	38.0-126.0
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Gamma Glutamyl Transferase (GGT) (Multipoint 13 U/L 12.0-43.0
Rate - L-glutamyl-p-nitroanilide (Szasz Method))

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--



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, -> Auto Authorized)
(CR, -> Auto Authorized)
(LFT, -> Auto Authorized)
(Uric Acid -> Auto Authorized)



Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 28/10/2023 08:40 AM Received On : 28/10/2023 03:35 PM Reported On : 28/10/2023 05:07 PM

Barcode : 012310280655 Specimen : Whole Blood Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
HBA1C			
HbA1c (HPLC NGSP Certified)	5.6	%	Normal: 4.0-5.6 Prediabetes: 5.7-6.4 Diabetes: => 6.5 ADA standards 2020
Estimated Average Glucose (Calculated)	114.02	-	-

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



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 MBBS,MD, Biochemistry
 Consultant Biochemistry

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Final Report

Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 31/10/2023 11:22 AM Received On : 31/10/2023 02:33 PM Reported On : 31/10/2023 05:04 PM

Barcode : 012310311078 Specimen : Plasma Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
POST PRANDIAL BLOOD GLUCOSE (PPBG) (Colorimetric - Glucose Oxidase Peroxidase)	88	mg/dL	70 to 139 : Normal 140 to 199 : Pre-diabetes =>200 : Diabetes ADA standards 2020

--End of Report--

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

Dr. Anushre Prasad
MBBS,MD, Biochemistry
Consultant Biochemistry

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Final Report

Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 28/10/2023 08:40 AM Received On : 28/10/2023 03:36 PM Reported On : 28/10/2023 05:33 PM

Barcode : 022310280400 Specimen : Whole Blood - ESR Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
Erythrocyte Sedimentation Rate (ESR) (Westergren Method)	18 H	mm/1hr	0.0-12.0

Interpretation Notes

- ESR high - Infections, chronic disorders,, plasma cell dyscrasias.
- DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert**

--End of Report-

Dr. Shalini K S
DCP, DNB, Pathology
Consultant

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Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 28/10/2023 08:40 AM Received On : 28/10/2023 03:32 PM Reported On : 28/10/2023 04:09 PM

Barcode : 032310280100 Specimen : Urine Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY**PHYSICAL EXAMINATION**

Colour	Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (pH Indicator Method)	6.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.005	-	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	-	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	1.6	/hpf	0-5
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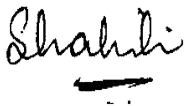
RBC	1.0	/hpf	0-4
Epithelial Cells	1.2	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.05	/hpf	0-1
Bacteria	79.4	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

Interpretation Notes

- Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

Urine For Sugar (Fasting) (Enzyme Method (GOD Not Present - -
POD))

--End of Report--



Dr. Shalini K S
DCP, DNB, Pathology
Consultant

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Collected On : 28/10/2023 08:40 AM Received On : 28/10/2023 05:23 PM Reported On : 28/10/2023 05:48 PM

Barcode : 1B2310280015 Specimen : Whole Blood Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

NARAYANA HRUDAYALAYA BLOOD CENTRE

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

--End of Report--

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

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Barcode : 032310280100 Specimen : Urine Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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URINE ROUTINE & MICROSCOPY**PHYSICAL EXAMINATION**

Colour	Yellow	-	-
Appearance	Clear	-	-

CHEMICAL EXAMINATION

pH(Reaction) (pH Indicator Method)	6.5	-	4.5-7.5
Sp. Gravity (Refractive Index)	1.005	-	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	-	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	1.6	/hpf	0-5
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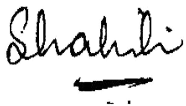
RBC	1.0	/hpf	0-4
Epithelial Cells	1.2	/hpf	0-6
Crystals	0.0	/hpf	0-2
Casts	0.05	/hpf	0-1
Bacteria	79.4	/hpf	0-200
Yeast Cells	0.0	/hpf	0-1
Mucus	Not Present	-	Not Present

Interpretation Notes

- Since the analytical methodology of Urine Microscopy is Flow cytometry based and FDA approved the results of automated urine microscopy which includes RBCs, WBCs Epithelial cells etc are being reported in decimal fraction. Rounding off the value to nearest whole number is suggested.

Urine For Sugar (Fasting) (Enzyme Method (GOD Not Present - -
POD))

--End of Report--



Dr. Shalini K S
DCP, DNB, Pathology
Consultant

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Final Report

Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 30/10/2023 08:12 PM Received On : 30/10/2023 09:42 PM Reported On : 30/10/2023 09:55 PM

Barcode : 032310300341 Specimen : Stool Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

CLINICAL PATHOLOGY

Test	Result	Unit	Biological Reference Interval
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STOOL ROUTINE EXAMINATION**PHYSICAL EXAMINATION**

Colour	Brownish	-	-
Consistency	Semi Solid	-	-
Mucus	Absent	-	-

CHEMICAL EXAMINATION

Stool For Occult Blood (Standard Guaiac Method)	Negative	-	-
Reaction	Alkaline	-	-
Reducing Substances	Absent	-	-

MICROSCOPE EXAMINATION

Ova	Not Seen	-	-
Cyst Of Protozoa	Not Seen	-	-
Pus Cells	1-2	/hpf	0-5

--End of Report--

Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Shalini

Dr. Shalini K S
DCP, DNB, Pathology
Consultant

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DEPARTMENT OF LABORATORY MEDICINE

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Patient Name : V Atshayaa MRN : 2013000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Collected On : 30/10/2023 08:55 PM Received On : 30/10/2023 09:43 PM Reported On : 02/11/2023 09:30 AM

Barcode : 072310300049 Specimen : Smear Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

CYTOLOGY

PAP SMEAR

LAB No.	P-8287/2023
MATERIAL RECEIVED	Received two unstained slides
CLINICAL DETAILS	LMP:28th August
SPECIMEN TYPE	Conventional smear.
SMEAR ADEQUACY	Satisfactory for evaluation with endocervical canal cells / Transformation zone component.
GENERAL CATEGORIZATION	CERVICAL CYTOLOGY PAP SMEAR REPORT (The 2014 Bethesda system) No epithelial cell abnormality seen. No evidence of fungal organisms, trichomonas vaginalis, bacterial vaginosis. Negative for intraepithelial lesion or malignancy.
IMPRESSION	Interpretation / Result : - Smear is negative for intraepithelial lesion or malignancy.
REMARKS	Note : The pap test is only a screening test for cervical cancer with inherent false negative results.

--End of Report-

Patient Name : V Atshayaa MRN : 20130000001022 Gender/Age : FEMALE , 26y (22/12/1996)

Khushboo S

Dr. Sahetia Khushboo Mukesh
MD, DNB, Pathology
Junior Consultant Histopathology

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DEPARTMENT OF LABORATORY MEDICINE

Final Report

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Collected On : 28/10/2023 08:40 AM Received On : 28/10/2023 03:35 PM Reported On : 28/10/2023 03:49 PM

Barcode : 022310280401 Specimen : Whole Blood Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

HEMATOLOGY

Test	Result	Unit	Biological Reference Interval
COMPLETE BLOOD COUNT (CBC)			
Haemoglobin (Hb%) (Photometric Measurement)	12.3	g/dL	12.0-15.0
Red Blood Cell Count (Electrical Impedance)	4.71	million/ μ l	3.8-4.8
PCV (Packed Cell Volume) / Hematocrit (Calculated)	39.0	%	36.0-46.0
MCV (Mean Corpuscular Volume) (Derived)	82.9 L	fL	83.0-101.0
MCH (Mean Corpuscular Haemoglobin) (Calculated)	26.1 L	pg	27.0-32.0
MCHC (Mean Corpuscular Haemoglobin Concentration) (Calculated)	31.5	%	31.5-34.5
Red Cell Distribution Width (RDW) (Derived)	16.0 H	%	11.6-14.0
Platelet Count (Electrical Impedance Plus Microscopy)	417	$10^3/\mu$ L	150.0-450.0
Mean Platelet Volume (MPV)	8.5	fL	7.0-11.7
Total Leucocyte Count(WBC) (Electrical Impedance)	11.3 H	$10^3/\mu$ L	4.0-10.0
DIFFERENTIAL COUNT (DC)			
Neutrophils (VCS Technology Plus Microscopy)	65.4	%	40.0-75.0
Lymphocytes (VCS Technology Plus Microscopy)	20.7	%	20.0-40.0
Monocytes (VCS Technology Plus Microscopy)	5.9	%	2.0-10.0
Eosinophils (VCS Technology Plus Microscopy)	7.4 H	%	1.0-6.0

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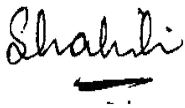
Basophils (VCS Technology Plus Microscopy)	0.6	%	0.0-2.0
Absolute Neutrophil Count (Calculated)	7.4 H	$\times 10^3$ cells/ μ l	2.0-7.0
Absolute Lymphocyte Count (Calculated)	2.34	$\times 10^3$ cells/ μ l	1.0-3.0
Absolute Monocyte Count (Calculated)	0.67	$\times 10^3$ cells/ μ l	0.2-1.0
Absolute Eosinophil Count (Calculated)	0.84 H	$\times 10^3$ cells/ μ l	0.02-0.5
Absolute Basophil Count (Calculated)	0.07	-	-

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

Interpretation Notes

- Haemoglobin , RBC Count and PCV: If below reference range, indicates Anemia. Further evaluation is suggested .
RBC Indices aid in typing of anemia.
WBC Count: If below reference range, susceptibility to infection.
If above reference range- Infection*
If very high in lakhs-Leukemia
Neutrophils -If above reference range-acute infection, mostly bacterial
Lymphocytes -If above reference range-chronic infection/ viral infection
Monocytes -If above reference range- TB,Typhoid,UTI
Eosinophils -If above reference range -Allergy,cough,Common cold,Asthma & worms
Basophils - If above reference range, Leukemia, allergy
Platelets: If below reference range- bleeding disorder, Dengue, drug- induced, malignancies
* In bacterial infection with fever total WBC count increases.
Eg Tonsillitis,Sinusitis,Bronchitis,Pneumonia,Appendicitis,UTI -12000-25000 cells/cumm.
In typhoid and viral fever WBC may be normal.
DISCLAIMER:All the laboratory findings should mandatorily interpreted in correlation with clinical findings by a medical expert.

--End of Report--



Dr. Shalini K S
DCP, DNB, Pathology
Consultant

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Barcode : 012310280654 Specimen : Plasma Consultant : Dr. Vimala R(GENERAL MEDICINE)

Sample adequacy : Satisfactory Visit No : OP-001 Patient Mobile No : 8122733151

BIOCHEMISTRY

Test	Result	Unit	Biological Reference Interval
FASTING BLOOD GLUCOSE (FBG) (Colorimetric - Glucose Oxidase Peroxidase)	100 H	mg/dL	70 to 99 : Normal 100 to 125 : Pre-diabetes =>126 : Diabetes ADA standards 2020

--End of Report--

Dr. Anushre Prasad
MBBS,MD, Biochemistry
Consultant Biochemistry

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

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- (FASTING BLOOD GLUCOSE (FBG) -> Auto Authorized)

