



CID : 2208700976  
Name : MRS.SAJITHA JANARDHAN  
Age / Gender : 35 Years / Female  
Consulting Dr. : -  
Reg. Location : Vashi (Main Centre)

Collected : 28-Mar-2022 / 09:33  
Reported : 28-Mar-2022 / 12:38

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

**CBC (Complete Blood Count), Blood**

| <u>PARAMETER</u>  | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u>      |
|---|----------------|-----------------------------|--------------------|
| <b><u>RBC PARAMETERS</u></b>  |                |                             |                    |
| Haemoglobin   | 12.0           | 12.0-15.0 g/dL              | Spectrophotometric |
| RBC   | 4.11           | 3.8-4.8 mil/cmm             | Elect. Impedance   |
| PCV   | 37.4           | 36-46 %                     | Measured           |
| MCV   | 91             | 80-100 fl                   | Calculated         |
| MCH   | 29.2           | 27-32 pg                    | Calculated         |
| MCHC  | 32.1           | 31.5-34.5 g/dL              | Calculated         |
| RDW   | 13.6           | 11.6-14.0 %                 | Calculated         |
| <b><u>WBC PARAMETERS</u></b>  |                |                             |                    |
| WBC Total Count   | 5580           | 4000-10000 /cmm             | Elect. Impedance   |
| <b><u>WBC DIFFERENTIAL AND ABSOLUTE COUNTS</u></b>                  |                |                             |                    |
| Lymphocytes   | 37.3           | 20-40 %                     |                    |
| Absolute Lymphocytes  | 2081.3         | 1000-3000 /cmm              | Calculated         |
| Monocytes   | 6.3            | 2-10 %                      |                    |
| Absolute Monocytes  | 351.5          | 200-1000 /cmm               | Calculated         |
| Neutrophils   | 52.1           | 40-80 %                     |                    |
| Absolute Neutrophils  | 2907.2         | 2000-7000 /cmm              | Calculated         |
| Eosinophils   | 3.2            | 1-6 %                       |                    |
| Absolute Eosinophils  | 178.6          | 20-500 /cmm                 | Calculated         |
| Basophils   | 1.1            | 0.1-2 %                     |                    |
| Absolute Basophils  | 61.4           | 20-100 /cmm                 | Calculated         |
| Immature Leukocytes   | -              |                             |                    |
| WBC Differential Count by Absorbance & Impedance method/Microscopy. |                |                             |                    |
| <b><u>PLATELET PARAMETERS</u></b>                                   |                |                             |                    |
| Platelet Count  | 289000         | 150000-400000 /cmm          | Elect. Impedance   |
| MPV   | 8.2            | 6-11 fl                     | Calculated         |
| PDW   | 11.8           | 11-18 %                     | Calculated         |
| <b><u>RBC MORPHOLOGY</u></b>  |                |                             |                    |
| Hypochromia   | -              |                             |                    |
| Microcytosis  | -              |                             |                    |



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Macrocytosis -  
Anisocytosis -  
Poikilocytosis -  
Polychromasia -  
Target Cells -  
Basophilic Stippling -  
Normoblasts -  
Others Normocytic, Normochromic  
WBC MORPHOLOGY -  
PLATELET MORPHOLOGY -  
COMMENT -

Specimen: EDTA Whole Blood

ESR, EDTA WB 9 2-20 mm at 1 hr. Westergren

\*Sample processed at SUBURBAN DIAGNOSTICS (INDIA) PVT. LTD Panvel Lab, Panvel East  
\*\*\* End Of Report \*\*\*



*Sonia Kher*  
**Dr.SONIA KHER**  
**M.D (PATH)**  
**Pathologist**



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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**

| <u>PARAMETER</u>                         | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u>   | <u>METHOD</u>    |
|--|----------------|---|------------------|
| GLUCOSE (SUGAR) FASTING, Fluoride Plasma | 88.0           | Non-Diabetic: < 100 mg/dl<br>Impaired Fasting Glucose: 100-125 mg/dl<br>Diabetic: >/= 126 mg/dl | Hexokinase       |
| BILIRUBIN (TOTAL), Serum                 | 0.3            | 0.1-1.2 mg/dl   | Colorimetric     |
| BILIRUBIN (DIRECT), Serum                | 0.13           | 0-0.3 mg/dl   | Diazo            |
| BILIRUBIN (INDIRECT), Serum              | 0.17           | 0.1-1.0 mg/dl   | Calculated       |
| TOTAL PROTEINS, Serum                    | 7.2            | 6.4-8.3 g/dL  | Biuret           |
| ALBUMIN, Serum                           | 4.8            | 3.5-5.2 g/dL  | BCG              |
| GLOBULIN, Serum                          | 2.4            | 2.3-3.5 g/dL  | Calculated       |
| A/G RATIO, Serum                         | 2.0            | 1 - 2   | Calculated       |
| SGOT (AST), Serum                        | 10.7           | 5-32 U/L  | NADH (w/o P-5-P) |
| SGPT (ALT), Serum                        | 8.7            | 5-33 U/L  | NADH (w/o P-5-P) |
| GAMMA GT, Serum                          | 10.1           | 3-40 U/L  | Enzymatic        |
| ALKALINE PHOSPHATASE, Serum              | 95.3           | 35-105 U/L  | Colorimetric     |
| BLOOD UREA, Serum                        | 16.9           | 12.8-42.8 mg/dl   | Kinetic          |
| BUN, Serum                               | 7.9            | 6-20 mg/dl  | Calculated       |
| CREATININE, Serum                        | 0.61           | 0.51-0.95 mg/dl   | Enzymatic        |
| eGFR, Serum                              | 119            | >60 ml/min/1.73sqm  | Calculated       |
| URIC ACID, Serum                         | 4.2            | 2.4-5.7 mg/dl   | Enzymatic        |
| Urine Sugar (Fasting)                    | Absent         | Absent  |                  |
| Urine Ketones (Fasting)                  | Absent         | Absent  |                  |

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Dr. TEJASWINI DHOTE  
M.D. (PATH)  
Pathologist



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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**GLYCOSYLATED HEMOGLOBIN (HbA1c)**

| PARAMETER                                     | RESULTS | BIOLOGICAL REF RANGE  | METHOD     |
|---|---------|---|------------|
| Glycosylated Hemoglobin (HbA1c), EDTA WB - CC | 5.3     | Non-Diabetic Level: < 5.7 %<br>Prediabetic Level: 5.7-6.4 %<br>Diabetic Level: >= 6.5 % | HPLC       |
| Estimated Average Glucose (eAG), EDTA WB - CC | 105.4   | mg/dl   | Calculated |

**Intended use:**

- In patients who are meeting treatment goals, HbA1c test should be performed at least 2 times a year
- In patients whose therapy has changed or who are not meeting glycemic goals, it should be performed quarterly
- For microvascular disease prevention, the HbA1C goal for non pregnant adults in general is Less than 7%.

**Clinical Significance:**

- HbA1c, Glycosylated hemoglobin or glycated hemoglobin, is hemoglobin with glucose molecule attached to it.
- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of glycosylated hemoglobin in the blood.

**Test Interpretation:**

- The HbA1c test evaluates the average amount of glucose in the blood over the last 2 to 3 months by measuring the percentage of Glycosylated hemoglobin in the blood.
- HbA1c test may be used to screen for and diagnose diabetes or risk of developing diabetes.
- To monitor compliance and long term blood glucose level control in patients with diabetes.
- Index of diabetic control, predicting development and progression of diabetic micro vascular complications.

**Factors affecting HbA1c results:**

**Increased in:** High fetal hemoglobin, Chronic renal failure, Iron deficiency anemia, Splenectomy, Increased serum triglycerides, Alcohol ingestion, Lead/opiate poisoning and Salicylate treatment.

**Decreased in:** Shortened RBC lifespan (Hemolytic anemia, blood loss), following transfusions, pregnancy, ingestion of large amount of Vitamin E or Vitamin C and Hemoglobinopathies

**Reflex tests:** Blood glucose levels, CGM (Continuous Glucose monitoring)

**References:** ADA recommendations, AACC, Wallach's interpretation of diagnostic tests 10th edition.

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*Sonia Kher*

**Dr.SONIA KHER**  
**M.D (PATH)**  
**Pathologist**





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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**URINE EXAMINATION REPORT**

| <u>PARAMETER</u>                      | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u> | <u>METHOD</u>      |
|---------------------------------------|----------------|-----------------------------|--------------------|
| <b><u>PHYSICAL EXAMINATION</u></b>    |                |                             |                    |
| Color                                 | Pale yellow    | Pale Yellow                 | -                  |
| Reaction (pH)                         | Acidic (6.5)   | 4.5 - 8.0                   | Chemical Indicator |
| Specific Gravity                      | 1.010          | 1.001-1.030                 | Chemical Indicator |
| Transparency                          | Clear          | Clear                       | -                  |
| Volume (ml)                           | 50 ml          | -                           | -                  |
| <b><u>CHEMICAL EXAMINATION</u></b>    |                |                             |                    |
| Proteins                              | Absent         | Absent                      | pH Indicator       |
| Glucose                               | Absent         | Absent                      | GOD-POD            |
| Ketones                               | Absent         | Absent                      | Legals Test        |
| Blood                                 | Absent         | Absent                      | Peroxidase         |
| Bilirubin                             | Absent         | Absent                      | Diazonium Salt     |
| Urobilinogen                          | Normal         | Normal                      | Diazonium Salt     |
| Nitrite                               | Absent         | Absent                      | Griess Test        |
| <b><u>MICROSCOPIC EXAMINATION</u></b> |                |                             |                    |
| Leukocytes(Pus cells)/hpf             | 1-2            | 0-5/hpf                     |                    |
| Red Blood Cells / hpf                 | Absent         | 0-2/hpf                     |                    |
| Epithelial Cells / hpf                | 2-3            |                             |                    |
| Casts                                 | Absent         | Absent                      |                    |
| Crystals                              | Absent         | Absent                      |                    |
| Amorphous debris                      | Absent         | Absent                      |                    |
| Bacteria / hpf                        | 10-12          | Less than 20/hpf            |                    |

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*J. Thakker*

**Dr. JYOT THAKKER**  
**M.D. (PATH), DPB**  
**Pathologist & AVP( Medical Services)**

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**LIPID PROFILE**

| PARAMETER                        | RESULTS | BIOLOGICAL REF RANGE  | METHOD       |
|----------------------------------|---------|---|--------------|
| CHOLESTEROL, Serum               | 151.9   | Desirable: <200 mg/dl<br>Borderline High: 200-239mg/dl<br>High: >/=240 mg/dl  | Enzymatic    |
| TRIGLYCERIDES, Serum             | 117.6   | Normal: <150 mg/dl<br>Borderline-high: 150 - 199 mg/dl<br>High: 200 - 499 mg/dl<br>Very high:>/=500 mg/dl                                     | Enzymatic    |
| HDL CHOLESTEROL, Serum           | 48.5    | Desirable: >60 mg/dl<br>Borderline: 40 - 60 mg/dl<br>Low (High risk): <40 mg/dl   | Enzymatic    |
| NON HDL CHOLESTEROL, Serum       | 103.4   | Desirable: <130 mg/dl<br>Borderline-high:130 - 159 mg/dl<br>High:160 - 189 mg/dl<br>Very high: >/=190 mg/dl                                   | Calculated   |
| LDL CHOLESTEROL, Serum           | 79.0    | Optimal: <100 mg/dl<br>Near Optimal: 100 - 129 mg/dl<br>Borderline High: 130 - 159 mg/dl<br>High: 160 - 189 mg/dl<br>Very High: >/= 190 mg/dl | Colorimetric |
| VLDL CHOLESTEROL, Serum          | 24.4    | < /= 30 mg/dl   | Calculated   |
| CHOL / HDL CHOL RATIO, Serum     | 3.1     | 0-4.5 Ratio   | Calculated   |
| LDL CHOL / HDL CHOL RATIO, Serum | 1.6     | 0-3.5 Ratio   | Calculated   |

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**AERFOCAMI HEALTHCARE BELOW 40 MALE/FEMALE**  
**THYROID FUNCTION TESTS**

| <u>PARAMETER</u>    | <u>RESULTS</u> | <u>BIOLOGICAL REF RANGE</u>   | <u>METHOD</u> |
|---------------------|----------------|---|---------------|
| Free T3, Serum      | 4.7            | 3.5-6.5 pmol/L  | ECLIA         |
| Free T4, Serum      | 15.2           | 11.5-22.7 pmol/L<br>First Trimester:9.0-24.7<br>Second Trimester:6.4-20.59<br>Third Trimester:6.4-20.59 | ECLIA         |
| sensitiveTSH, Serum | 3.13           | 0.35-5.5 microIU/ml<br>First Trimester:0.1-2.5<br>Second Trimester:0.2-3.0<br>Third Trimester:0.3-3.0   | ECLIA         |



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**Interpretation:**

A thyroid panel is used to evaluate thyroid function and/or help diagnose various thyroid disorders.

**Clinical Significance:**

- 1)TSH Values between 5.5 to 15 microIU/ml should be correlated clinically or repeat the test with new sample as physiological factors can give falsely high TSH.
- 2)TSH values may be transiently altered because of non thyroidal illness like severe infections,liver disease, renal and heart severe burns, trauma and surgery etc.

| TSH  | FT4 / T4 | FT3 / T3 | Interpretation  |
|------|----------|----------|---|
| High | Normal   | Normal   | Subclinical hypothyroidism, poor compliance with thyroxine, drugs like amiodarone, Recovery phase of non-thyroidal illness, TSH Resistance.   |
| High | Low      | Low      | Hypothyroidism, Autoimmune thyroiditis, post radio iodine Rx, post thyroidectomy, Anti thyroid drugs, tyrosine kinase inhibitors & amiodarone, amyloid deposits in thyroid, thyroid tumors & congenital hypothyroidism. |
| Low  | High     | High     | Hyperthyroidism, Graves disease, toxic multinodular goiter, toxic adenoma, excess iodine or thyroxine intake, pregnancy related (hyperemesis gravidarum, hydatiform mole)   |
| Low  | Normal   | Normal   | Subclinical Hyperthyroidism, recent Rx for Hyperthyroidism, drugs like steroids & dopamine), Non thyroidal illness.   |
| Low  | Low      | Low      | Central Hypothyroidism, Non Thyroidal Illness, Recent Rx for Hyperthyroidism.   |
| High | High     | High     | Interfering anti TPO antibodies, Drug interference: Amiodarone, Heparin, Beta Blockers, steroids & anti epileptics.   |

**Diurnal Variation:**TSH follows a diurnal rhythm and is at maximum between 2 am and 4 am , and is at a minimum between 6 pm and 10 pm. The variation is on the order of 50 to 206%. Biological variation:19.7%(with in subject variation)

**Reflex Tests:**Anti thyroid Antibodies,USG Thyroid ,TSH receptor Antibody. Thyroglobulin, Calcitonin

**Limitations:**Samples should not be taken from patients receiving therapy with high biotin doses (i.e. >5 mg/day) until atleast 8 hours following the last biotin administration.

**Reference:**

- 1.O.koulouri et al. / Best Practice and Research clinical Endocrinology and Metabolism 27(2013)
- 2.Interpretation of the thyroid function tests, Dayan et al. THE LANCET . Vol 357
- 3.Tietz ,Text Book of Clinical Chemistry and Molecular Biology -5th Edition
- 4.Biological Variation:From principles to Practice-Callum G Fraser (AACC Press)

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