



Name: PRIYANKA MAYANK PATEL	Ward: opd
Lab ID: 00000086	Registration on: 10/12/2022 11:02:00
Age & Sex: 32 Year Female	Reported on: 15:20:25
Reference: VELOCITY HOSPITAL	Sample Type: BLOOD & URINE

CBC ESR

Test	Observed Value	Unit	Biological Reference Interval
Haemoglobin	11.2	g/dL	11.0 - 13.7
Total RBC	5.66 H	mill./cm	4.00 - 5.20
Total WBC	9300	/cmm	4000 - 10000
Platelet Count	476000 H	/cmm	150000 - 450000
HCT	36.2	%	
MCV	64.0 L	fL	80.0 - 100.0
MCH	19.8 L	pg	27.0 - 32.0
MCHC	30.9 L	g/dL	31.5 - 36.0
DIFFERENTIAL COUNT			
Neutrophils	68	%	40 - 70
Lymphocytes	28	%	20 - 40
Eosinophils	02	%	02 - 05
Monocytes	02	%	01 - 07
Basophils	00	%	00 - 02
Band Cells	00	%	0.0 - 6.0
ABSOLUTE DIFFERENTIAL COUNT			
Neutrophils	6324	/cumm	2000.0-7000.0
Lymphocytes	2604	/cumm	1000.0-3000.0
Eosinophils	186	/cumm	20 - 500
Monocytes	186 L	/cumm	200 - 1000
Basophils	0	/cumm	0 - 100
GLR / NLR (Neutrophil/Lymphocyte Ratio)	2.4		
MENTZER INDEX			
RDW-CV	13.1	%	11.1 - 14.1
RDW-SD	33.5	fl	31.0-46.0
MPV	7.9	fl	7.00 - 11.00
PCT	0.38 H	%	0.10-0.30

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Reference: **VELOCITY HOSPITAL**Sample Type: **BLOOD & URINE**

PDW

16.7

%

10.0-18.00

PERIPHERAL SM EAR EXAMINATIONRBC Morphology
WBC Morphology
Platelets in Smear**Microcytosis (+), Anisocytosis (+),
Appear normal, Immature cells are not seen .
Thrombocytosis.****Malarial Parasites**

Not Detected.

Note

Hb electrophoresis is advised to rule out thalassemia as Mentzer index is <13. (low HB, high RBC count and low MCV) .

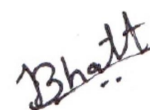
ESR

AFTER 1 HOUR

32 H

mm/hr

0.0 - 20.0

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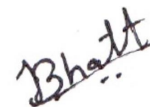
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Sample Type: **BLOOD & URINE**

BLOOD GROUP

<u>Test</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>Blood Group</u>	"A"		
Rh Factor	POSITIVE		



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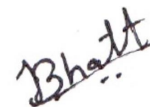
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Reference: **VELOCITY HOSPITAL**Sample Type: **BLOOD & URINE****BLOOD GLUCOSE TEST**

<u>Test</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Sample	FLOURIDE PLASMA		
<u>FASTING (FBS)</u>			
Blood Sugar-F	84.52	mg/dL	70.00-110.00
Urine Sugar-F	Absent		
<u>POST PRANDIAL (PPBS)</u>			
Blood Sugar-PP	116.5	mg/dL	110.0 - 140.0
Urine Sugar-PP	Absent		

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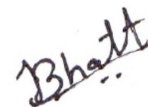
Reference: **VELOCITY HOSPITAL**Sample Type: **BLOOD & URINE**

HEMOGLOBIN A1c TEST

Test	Observed Value	Unit	Biological Reference Interval
HbA1c	6.2	%	> 8 : Action Suggested 7-8 : Good control < 7 : Goal 6.2-7 : Near Normal Glycemia < 6.2 : Non-diabetic Level
Mean Blood Glucose	131.2	mg/dL	80.0 - 140.0

Importance of HbA1c - Glycated Hb. in Diabetes Mellitus

- HbA1c, also known as Glycated Hemoglobin is the most important test for the assessment of long term blood glucose control (also called glycemic control)
- HbA1c reflects mean blood glucose concentration over past 6-8 weeks and provides a much better indication of long term glycemic control than blood glucose determination
- HbA1c is formed by non-enzymatic reaction between glucose and Hb. , this reaction is irreversible and therefore remains unaffected by short term fluctuations in blood glucose levels.
- Long term complications of diabetes such as retinopathy-eye complications, nephropathy-kidney complications and neuropathy-nerve complications, are potentially serious and can lead to blindness, kidney failure etc.
- Glycemic control monitored by HbA1c measurement using HPLC method-(Gold Standard) is considered most important. (Ref. National Glycohemoglobin Standardization Program -NGSP).



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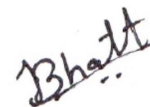
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LIPID PROFILE

<u>Test</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Sample	Fasting Blood Serum		
Cholesterol	208.4	mg/dL	UP TO 220
Triglyceride	121.5	mg/dL	40.0 - 140.0
HDL Cholesterol	50.88	mg/dL	42.0 - 88.0
VLDL	24.30	mg/dL	0.00 - 30.00
LDL Cholesterol	133.22 H	mg/dL	< 130 : Optimal 130 - 159 : Borderline High 160 - 189 : High >= 190 : Very High
Cholesterol / HDL Chol. Ratio	2.62		0 - 3.5
Total Lipid	4.1 L	mg/dl	400.0 - 1000.0
NOTE	656.9		

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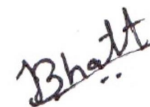
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Reference: **VELOCITY HOSPITAL**Sample Type: **BLOOD & URINE****RENAL FUNCTION TEST**

<u>Test</u>		<u>Unit</u>	
S. Creatinine	0.85	mg/dL	0.5-1.30
Bl. Urea	18.0	mg/dL	10.0 - 40.0
BUN	8.4	mg/dl	6.0 - 22.0
S.Calcium	10.0	mg/dL	8.8-10.3
Uric Acid	3.99	mg/dL	2.6 - 6.0

ELECTROLYTES

Sodium (Na+)	137.9	mmol/L	135.0 - 150.0
Potassium (K+)	3.92	mmol/L	3.60 - 5.40
Chloride (Cl-)	104.2	mmol/L	98.0 - 110.0

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Reference: **VELOCITY HOSPITAL**Sample Type: **BLOOD & URINE****LIVER FUNCTION TEST**

<u>Test</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
<u>BILIRUBIN</u>			
Total Bilirubin	0.5	mg/dL	0.10 - 1.20
Direct Bilirubin	0.3	mg/dL	0.0-0.4
Indirect Bilirubin	0.20	mg/dL	0.10-0.70
SGPT(ALT)	19.38	U/L	0.0 - 40.0
SGOT (AST)	26.0	U/L	0.0 - 46.0
Alkaline Phosphatase	56.0	U/L	40-129
<u>PROTEINS</u>			
Total Protein	6.8	g/dL	6.0 - 8.0
Albumin	3.9	g/dL	3.50 - 5.50
Globulin	2.9	g/dL	2.5 - 4.0
A/G Ratio	1.3		

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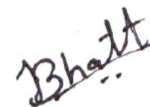


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URINE ANALYSIS

Test	Observed Value	Unit	Biological Reference Interval
Sample	Fresh Urine		
<u>PHYSICAL EXAMINATION</u>			
Quantity	10.0	mL	
Colour	Pale-Yellow		
Appearance	Sl.Turbid		Clear
pH	6.5		
Specific Gravity	1.030		
Sediments	Absent		Absent
<u>CHEMICAL EXAMINATION</u>			
Protein (Albumin)	Absent		Absent
Sugar	Absent		Absent
Bile Salts	Absent		Absent
Bile Pigment	Absent		Absent
Ketone	Absent		Absent
Occult Blood	Absent		Absent
Nitrite	Absent		Absent
Urobilinogen	Normal		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Pus Cells	2-3	/hpf	Absent
Red Blood Cells	Absent	/hpf	Absent
Epithelial Cells	4-5	/hpf	Absent
Crystals	Absent		Absent
Amorphous material	Absent		Absent
Casts	Absent		Absent
Yeast	Absent		Absent
Bacteria	Absent		Absent

--- End of Report ---



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LABORATORY TEST REPORT



Patient Information		Sample Information		Client/Location Information	
Name	: Mrs. Priyanka M Patel	Lab Id	: 122215300886	Client Name	: Spectra Diagnostics Lab@Adajan
Sex/Age	: Female / 32 Y	Registration on	: 10-Dec-2022 10:44	Location	:
Ref. Id	:	Collected at	: non SAWPL	Approved on	: 10-Dec-2022 13:03 Status : Final
Ref. By	:	Collected on	: 10-Dec-2022 11:28	Printed On	: 10-Dec-2022 13:13
		Sample Type	: Serum	Process At	: 153. Lab SAWPL Gujarat Surat Adajan

Thyroid Function Test

Test	Result	Unit	Biological Ref. Interval
T3 - Triiodothyronine <i>Chemiluminescence</i>	1.09	ng/mL	0.58 - 1.59
T4 - Thyroxine <i>Chemiluminescence</i>	8.37	micro g/dL	4.87 - 11.72
TSH - Thyroid Stimulating Hormone <i>Chemiluminescence</i>	1.3968	microIU/mL	0.35 - 4.94

TSH	T3/FT3	T4/FT4	Suggested Interpretation for the Thyroid Function Tests Pattern
Within Range	Decreased	Within Range	- Isolated Low T3-often seen in elderly & associated Non-Thyroidal illness. In elderly the drop in T3 level can be upto 25%.
Raised	Within Range	Within Range	- Isolated High TSH especially in the range of 4.7 to 15 mIU/ml is commonly associated with physiological & Biological TSH Variability. - Subclinical Autoimmune Hypothyroidism - Intermittent T4 therapy for hypothyroidism - Recovery phase after Non-Thyroidal illness
Raised	Decreased	Decreased	- Chronic autoimmune Thyroiditis - Post thyroidectomy, Post radiiodine - Hypothyroid phase of transient thyroiditis
Raised or Within Range	Raised	Raised or Within range	- Interfering antibodies to thyroid hormones (anti-TPO antibodies) - intermittent T4 therapy or T4 overdose - Drug interference-Amiodarone, Heparin, Beta blockers, steroids, anti-epileptics
Decreased	Raised or within Range	Raised or within Range	- Isolated Low TSH - especially in the range of 0.1 to 0.4 often seen in elderly & associated with Non-Thyroidal illness - Subclinical Hyperthyroidism - Thyroxine ingestion
Decreased	Decreased	Decreased	- Central Hypothyroidism - Non-Thyroidal illness - Recent treatment for Hyperthyroidism (TSH remains suppressed)
Decreased	Raised	Raised	- Primary Hyperthyroidism (Graves disease), Multinodular goitre Toxic nodule - Transient thyroiditis: Postpartum, Silent (lymphocytic), Postviral (granulomatous, subacute, DeQuervain'a) Gestational thyrotoxicosis with hyperemesis gravidarum
Decreased or within range	Raised	Within Range	- T3 toxicosis - Non-Thyroidal illness

----- End Of Report -----

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M.D. Pathology

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