



UHID : AM10.24000000001  
 Patient Name : MR. SONU AGRAWAL  
 Age : 36 Yrs 4 Month  
 Gender : MALE  
 Ref. Doctor : SELF  
 Client Name : DIAGNO LOUNGE(ADVANCED DIAGNOSTIC CENTRE)KANDIVALI

Bill No. : A044184  
 Registered On : 01/05/2024,10:36 PM  
 Collected On : 01/05/2024,10:37 PM  
 Reported On : 01/05/2024,11:22 PM  
 SampleID :

### REPORT

#### Immunology

Test Name	Result	Unit	Biological Reference Interval
Vitamin B12	271.0	pg/mL	191 - 946
Method : Fully Automated Chemiluminescence System			

#### Interpretation :

Vitamin B12 is a cofactor for conversion of methylmalonyl Coenzyme A to succinoyl CoA . Vitamin B12 is implicated in the formation of myelin and along with folate is required for DNA synthesis . Causes of Vitamin B12 deficiency can be divided in to three classes: Nutritional deficiency, Malabsorption syndromes & other Gastrointestinal causes. B12 deficiency can cause megaloblastic anaemia(MA),nerve damage & degeneration of spinal cord.Lack of B12 can cause mild deficiencies,damage to the myelin sheath that surrounds & protects nerves. which may lead to peripheral neuropathy. People with intrinsic factor defects may develop a MA called as pernicious anaemia. Other conditions associated with low B12 levels are Iron deficiency anaemia, Celiac disease, parasitic infection,pancreatic deficiency & advancing age.Disorders associated with elevated B12 levels include renal failure, liver disease, myeloproliferative disease and external administration of Vitamin B12

#### Immunology

Test Name	Result	Unit	Biological Reference Interval
25-OH Vitamin D	42.5	ng/mL	Deficiency : Less than 12 Insufficiency : 12-30 Sufficiency : 30-70 Toxicity : More than 70.

Method : ECLIA

INTERPRETATION : Vitamin D is a fat-soluble steroid hormone precursor that is mainly produced in the skin by exposure to sunlight or it is supplied via dietary sources (mainly egg yolk, fish oil and plants). Vitamin D is biologically inert and must undergo two successive hydroxylations in the liver and kidney to become the biologically active 1,25 dihydroxyvitamin D. The two most important forms of vitamin D are vitamin D3 (cholecalciferol) and vitamin D2 (ergocalciferol). 25-OH vitamin D is the metabolite that should be measured in blood to determine the overall vitamin D status because it is the major storage form of vitamin D in the human body. This primary circulating form of vitamin D is biologically inactive with levels approximately 1000-fold greater than the circulating 1,25 (OH)<sub>2</sub> vitamin D. CAUSES OF VITAMIN D DEFICIENCY ARE: \*Very low dietary intake \*Malabsorption \*Liver disease \*Drugs such as phenytoin,phenobarbitone \*Less exposure to sunlight \*Age A high global prevalence of Vit D insufficiency/ deficiency is seen presently & is related to \*Impaired bone metabolism (rickets/ osteoporosis) Secondary Hyperparathyroidism. \*Cancers \*Autoimmune disorders. \*Cardiovascular problems. Kindly correlate all result clinically. Repeat with fresh sample if indicated clinically.

----- End of Report -----

Results are to be correlated clinically

Scan to Validate



Entered By

Verified By

Dr Suvarna Deshpande  
 MD (Path)  
 Reg.No.83385

Dr Aparna Jairam  
 MD (Path)  
 Reg.No.76516

"Sample Processed At Asavlee Dr Aparna's Pathology Laboratory"

