



Name: NEHA SRIVASTAVA	Ward: OPD
Lab ID: 00000164	Registration on: 23/12/2023 09:10:00
Age & Sex: 33 Year Female	Reported on: 10:14:46
Reference: Dr. VITRAG SHAH (VELOCITY HOSPITAL)	Sample Type: BLOOD ~ URINE

CBC ESR

Test	Observed Value	Unit	Biological Reference Interval
Haemoglobin	10.4 L	g/dL	12.0 - 16.0
Total RBC	3.83 L	mill./cm	4.00 - 5.20
Total WBC	8550	/cmm	4000 - 11000
Platelet Count	169700	/cmm	150000 - 450000
HCT	33.8 L	%	36.0 - 48.0
MCV	88.3	fL	80.0 - 100.0
MCH	27.2	pg	27.0 - 32.0
MCHC	30.8 L	g/dL	31.5 - 36.0

DIFFERENTIAL COUNT

Neutrophils	68	%	40 - 70
Lymphocytes	25	%	20 - 40
Eosinophils	03	%	01-05
Monocytes	04	%	01-07
Basophils	00	%	
Band Cells	00	%	0.0 - 6.0

ABSOLUTE DIFFERENTIAL COUNT

Neutrophils	5814	/cumm	2000 - 7000
Lymphocytes	2138	/cumm	1000 - 3000
Eosinophils	257	/cumm	20 - 500
Monocytes	342	/cumm	200 - 1000
Basophils	0	/cumm	0 - 100

GLR / NLR
(Neutrophil/Lymphocyte Ratio)

2.3

MENTZER INDEX

23.1

RDW-CV	13.6	%	11.1 - 14.1
RDW-SD	48.0	fl	
MPV	12.1	fl	
PCT	0.21	%	

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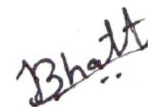
PDW 18.2 %

PERIPHERAL SMEAR EXAMINATION

RBC Morphology Hypochromia (+), Microcytosis (+),
WBC Morphology Appear normal, Immature cells are not seen.
Platelets in Smear Adequate.

Malarial Parasites Not Detected.

ESR
AFTER 1 HOUR 15 mm/hr 0.0 - 20.0



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BLOOD GROUP

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

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BLOOD GLUCOSE TEST

<u>Test</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
Sample <u>FASTING (FBS)</u> Blood Sugar-F	FLOURIDE PLASMA 79.2	mg/dL	70.00-110.00

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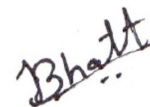
Reference: **Dr. VITRAG SHAH (VELOCITY HOSPITAL)**Sample Type: **BLOOD ~ URINE**

HEMOGLOBIN A1c TEST

Test	Observed Value	Unit	Biological Reference Interval
<u>HbA1c</u>	5.13	%	> 8 : Action Suggested 7-8 : Good control < 7 : Goal 6.5-7 : Near Normal Glycemia < 6.5 : Non-diabetic Level
Mean Blood Glucose	100.5	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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LIPID PROFILE

Test	Observed Value	Unit	Biological Reference Interval
Sample	Fasting Blood Serum		
Cholesterol	113.9	mg/dL	<200 Desirable 200-229 Borderline >240 High
Triglyceride	87.7	mg/dL	<150 Normal 150-199 Borderline 200-499 High >=500 Very High
HDL Cholesterol	42.3	mg/dL	Male : 35-80 Female : 42-88
VLDL	17.54	mg/dL	0.00 - 30.00
LDL Cholesterol	54.06	mg/dL	< 130 : Optimal 130 - 159 : Borderline High 160 - 189 : High >= 190 : Very High
LDL Chol. / HDL Chol. Ratio	1.28		1.0 - 3.4
Cholesterol / HDL Chol. Ratio	2.7		0 - 3.5
Total Lipid	408.6	mg/dl	400.0 - 1000.0

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Name: NEHA SRIVASTAVA	Ward: OPD
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Reference: Dr. VITRAG SHAH (VELOCITY HOSPITAL)	Sample Type: BLOOD ~ URINE

RENAL FUNCTION TEST

Test		Unit	
S. Creatinine	0.67	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
Uric Acid	4.66	mg/dL	2.6 - 6.0
PROTEINS			
Total Protein	6.8	g/dL	6.0 - 8.0
Albumin	3.84	g/dL	3.50 - 5.50
Globulin	3.0	g/dL	2.5 - 4.0
A/G Ratio	1.3		

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LIVER FUNCTION TEST

Test	Observed Value	Unit	Biological Reference Interval
BILIRUBIN			
Total Bilirubin	0.5	mg/dL	0.00 - 1.20
Direct Bilirubin	0.2	mg/dL	0.00 - 0.40
Indirect Bilirubin	0.3	mg/dL	0.0 - 1.0
SGPT(ALT)	12.8	U/L	0.0 - 40.0
SGOT (AST)	13.2	U/L	0.0 - 46.0
Alkaline Phosphatase	198.2	U/L	64.0 - 306.0
PROTEINS			
Total Protein	6.8	g/dL	6.0 - 8.0
Albumin	3.84	g/dL	3.50 - 5.50
Globulin	3.0	g/dL	2.5 - 4.0
A/G Ratio	1.3		

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Reference: Dr. VITRAG SHAH (VELOCITY HOSPITAL)	Sample Type: BLOOD ~ URINE

URINE ANALYSIS

Test	Observed Value	Unit	Biological Reference Interval
Sample	Fresh Urine		
<u>PHYSICAL EXAMINATION</u>			
Quantity	10.0	mL	
Colour	Pale-Yellow		
Appearance	Clear		Clear
pH	6.5		
Specific Gravity	1.010		
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
Leukocyte Esterase	Absent		Absent
Urobilinogen	Normal		Normal
<u>MICROSCOPIC EXAMINATION</u>			
Pus Cells	Occasional	/hpf	Absent
Red Blood Cells	Absent	/hpf	Absent
Epithelial Cells	Occasional	/hpf	Absent
Crystals	Absent		
Amorphous material	Absent		Absent
Casts	Absent		Absent
Yeast	Absent		Absent
Bacteria	Absent		Absent

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IRON PROFILE

Test	Observed Value	Unit	Biological Reference Interval
IRON	148.1 H	ug/dL	Female: 35-145ug/dL Male: 60-160ug/dL children: 22-136ug/dL
Total Iron Binding Capacity-TIBC	430.2 H	ug/dL	200-400
Trasferrine Saturation (TS%)	34.4	%	Average : 25% Iron Deficiency : <20% Iron Overload : >50%
FERRITIN	670.98 H	ng/mL	20.0 - 110.0

Note : Iron is an essential trace mineral element which forms an important component of hemoglobin, metallocompounds and Vitamin A. Deficiency of iron, leads to microcytic hypochromic anemia. The toxic effects of iron are deposition of iron in various organs of the body and hemochromatosis.

--- End of Report ---

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