Dept. of Pathology
(For Report Purpose Only)

AiMS Hospital & Research Center
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PRN	: 123167	**Lab No**	: 12873
Patient Name	: Mr. PADKI GAJANAN	**Req.No**	: 12873
Age/Sex	: 62Yr(s)/Male	**Collection Date & Time**	: 09/03/2024 08:30 AM
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HAEMATOLOGY

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
HAEMOGRAM			
HAEMOGLOBIN (Hb)	: 15.5	GM/DL	Male : 13.5 - 18.0 Female : 11.5 - 16.5
PCV	: 45.7	%	Male : 40 - 54 Female : 37 - 47
RBC COUNT	: 5.12	Million/cu mm	Male : 4.5 - 6.5 Female : 3.9 - 5.6
M.C.V	: 89.3	cu micron	76 - 96
M.C.H.	: 30.3	pg	27 - 32
M.C.H.C	: 33.9	picograms	32 - 36
RDW-CV	: 12.0	%	11 - 16
WBC TOTAL COUNT	: 5240	/cumm	ADULT : 4000 - 11000 CHILD 1-7 DAYS : 8000 - 18000 CHILD 8-14 DAYS : 7800 - 1600 CHILD 1MONTH-<1YR : 4000 - 10000
PLATELET COUNT	: 246000	cumm	150000 - 450000
WBC DIFFERENTIAL COUNT			
NEUTROPHILS	: 56	%	ADULT : 40 - 70 CHILD : : 20 - 40
ABSOLUTE NEUTROPHILS	: 2934.40	µL	2000 - 7000
LYMPHOCYTES	: 37	%	ADULT : 20 - 40 CHILD : : 40 - 70
ABSOLUTE LYMPHOCYTES	: 1938.80	µL	1000 - 3000
EOSINOPHILS	: 03	%	01 - 04
ABSOLUTE EOSINOPHILS	: 157.20	µL	20 - 500
MONOCYTES	: 04	%	02 - 08
ABSOLUTE MONOCYTES	: 209.60	µL	200 - 1000
BASOPHILS	: 00	%	00 - 01
ABSOLUTE BASOPHILS	: 0	µL	0 - 100

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

PERIPHERAL BLOOD SMEAR

RBC MORPHOLOGY	:	Normocytic Normochromic
WBC MORPHOLOGY	:	Within Normal Limits
PLATELETS	:	Adequate
PARASITES	:	Not Detected

Method : Processed on 5 Part Fully Automated Blood Cell Counter - sysmex XS-800i.

ESR

ESR MM (AT The End of 1 Hr.) By Westergren Method	:	04	mm/hr	Male : 0 - 15 Female : 0 - 20

END OF REPORT

PATIENT SAFETY & QUALITY OF CARE
NABH (ENTRY LEVEL)
PRE ACCREDITED

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

HAEMATOLOGY

BLOOD GROUP

BLOOD GROUP	:	"A"
RH FACTOR	:	POSITIVE

NOTE : This is for your information only.
Kindly note that any blood or blood product transfusion or therapeutic intervention has to be done after confirmation of blood group by concerned authorities.
In infants (< 6 months age), please repeat Blood Group after 6 months of age for confirmation.

END OF REPORT

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

BIOCHEMISTRY

HbA1C (HPLC Method)

Glycated Haemoglobin (HbA1C), by HPLC	: 5.2	%	Non - diabetic (Normal) : : < 5.7 Pre - diabetes : : > or = 5.7 - < 6 Diabetes : : > or = 6.5

Interpretation :
HbA1C level reflects the mean glucose concentration over previous 8-12 weeks and provides better indication of long term glycemic control.
For diagnosis of Diabetes Mellitus (>/= 18 yrs of age) :
5.7 % - 6.5 % : Increased risk for developing diabetes.
>/= 6.5 % : Diabetes

Therapeutic goals for glycemic control :
Adults : < 7%
Toddlers and Preschoolers : < 8.5% (but > 7.5 %)
School age (6-12 yrs) : < 8%
Adolescents and young adults (13 - 19 yrs) : < 7.5 %
The A1c target should be individualized based on numerous factors, such as age, life expectancy, comorbid conditions, duration of diabetes, risk of hypoglycemia or adverse consequences from hypoglycemia, patient motivation and adherence.
Levels of HbA1C may be low as result of shortened RBC life span in case of hemolytic anemia.
Increased HbA1C values may be found in patients with polycythemia or post splenectomy patients.
In patients with Homozygous forms of rare variant Hb(CC,SS,EE,SC), HbA1c cannot be quantitated as there is no HbA. In such circumstances glycemic control needs to be monitored using alternative methods like plasma glucose levels or serum Fructosamine.

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
	BIOCHEMISTRY		
BSL-F & PP			
Blood Sugar Level Fasting	: 89	MG/DL	60 - 110
Blood Sugar Level PP	: 97	MG/DL	70 - 140
CALCIUM			
CALCIUM (serum)	: 9.7	MG/DL	8.4 - 10.4
RFT (RENAL FUNCTION TEST)			
BIOCHEMICAL EXAMINATION			
UREA (serum)	: 31	MG/DL	0 - 45
UREA NITROGEN (serum)	: 14.48	MG/DL	7 - 21
CREATININE (serum)	: 0.8	MG/DL	0.5 - 1.5
URIC ACID (serum)	: 6.4	MG/DL	Male : 3.5 - 7.2 Female : 2.6 - 6.0
SERUM ELECTROLYTES			
SERUM SODIUM	: 141	mEq/L	136 - 149
SERUM POTASSIUM	: 4.0	mEq/L	3.8 - 5.2
SERUM CHLORIDE	: 102	mEq/L	98 - 107

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BIOCHEMISTRY

LIPID PROFILE

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
CHOLESTEROL (serum)	: 214	MG/DL	Male : 120 - 240 Female : 110 - 230
TRIGLYCERIDE (serum)	: 238	MG/DL	0 - 150
HDL (serum)	: 33	MG/DL	Male: : 42 - 79.5 Female: : 42 - 79.5
LDL (serum)	: 130	MG/DL	0 - 130
VLDL (serum)	: 47.60	MG/DL	5 - 51
CHOLESTROL/HDL RATIO	: 6.48		Male : 1.0 - 5.0 Female: : 1.0 - 4.5
LDL/HDL RATIO	: 3.94		Male : <= 3.6 Female : <=3.2

NCEP Guidelines

	Desirable	Borderline	Undesirable
Total Cholesterol (mg/dl)	Below 200	200-240	Above 240
HDL Cholesterol (mg/dl)	Above 60	40-59	Below 40
Triglycerides (mg/dl)	Below 150	150-499	Above 500
LDL Cholesterol (mg/dl)	Below 130	130-160	Above 160

Suggested to repeat lipid profile with low fat diet for 2-3 days prior to day of test and abstinence from alcoholic beverages if applicable.
Cholesterol & Triglycerides reprocessed , & confirmed.

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BIOCHEMISTRY

LFT (Liver function Test)

PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
BILIRUBIN TOTAL (serum)	: 1.1	mg/dL	0.2 - 1.2
BILIRUBIN DIRECT (serum)	: 0.3	mg/dL	0.0 - 0.5
BILIRUBIN INDIRECT (serum)	: 0.80	mg/dL	0.1 - 1.0
S.G.O.T (serum)	: 23	U/L	0 - 35
S.G.P.T (serum)	: 22	U/L	0 - 45
ALKALINE PHOSPHATASE (serum)	: 71	U/L	Male : 53 - 128 Female : 42 - 98
PROTEINS TOTAL (serum)	: 7.5	g/dl	6.6 - 8.7
ALBUMIN (serum)	: 4.6	g/dl	3.5 - 5.0
GLOBULIN (serum)	: 2.90	g/dl	1.8 - 3.6
A/G RATIO	: 1.59		1:1 - 2:2

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES
ENDOCRINOLOGY			
TFT (THYROID FUNCTION TEST)			
T3-Total (Tri iodothyronine)	: 1.09	ng/mL	0.80 - 2.00
T4 - Total (Thyroxin)	: 7.35	µg/dL	5.1 - 14.1
Thyroid Stimulating Hormones (Ultra TSH)	: 1.94	µIU/mL	0.27 - 4.20

Method :- serum by ECLIA

NOTE:-
Three common ways in which there may be inadequate amounts of the thyroid harmone for normal metabolism. Primary hypothyroidism, in which there is a raised TSH & a low T3. This is due to failure of the thyroid land, possibly due to autoantibody disease, possibly due to toxic stress or po due to iodine deficiency. The second, the most common cause of thyroid failure, occurs at the pituitary level. In this condition thre is inadequte thy stimulating harmone (TSH) produced from the pituitary and so one tends to see low or normal TSH, low T4s and variable T3s. This condition is m common in many patients with chronic fatigue syndrome, where there is a general suppression of the hypothalamic-pituitary-adrenal axis. The thir type of under-functioning is due to poor conversion of there are normal or possibly slightly raised levels of TSH, normal levels of T4 but low levels thyroid problem routinely TSH, a Free T4 and a Free T3 are also advisable. Any patients who are yaking T3 as part of their thyroid supplement ne have their T3 levels monitored as well as T4. T3 is much more quickly metabolized than T4 and blood tests should be done between 4-6 hours af their morning dose.

The Guideline for pregnancy reference ranges for total T3, T4 , Ultra TSH Level in pregnancy

	Total T3	Total T4	Ultra TSH
First Trimester	0.86 - 1.87	6.60 - 12.4	0.30 - 4.50
2 nd Trimester	1.0 - 2.60	6.60 - 15.5	0.50 - 4.60
3 rd Trimester	1.0 - 2.60	6.60 - 15.5	0.80 - 5.20

The guidelines for age related reference ranges for T3,T4,& Ultra TSH

Total T3	Total T4	Ultra TSH
Cord Blood 0.30 - 0.70	1-3 day 8.2-19.9	Birth- 4 day: 1.0-38.9
New Born 0.75 - 2.60	1 Week 6.0-15.9	2-20 Week : 1.7-9.1
1-5 Years 1.0-2.60	1-12 Months 6.8 - 14.9	20 Week- 20 years 0.7 - 6.4
5-10 Years 0.90 - 2.40	1-3 Years 6.8-13.5	
10-15 Years 0.80 - 2.10	3-10 Years 5.5-12.8	

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PARAMETER NAME	RESULT VALUE	UNIT	NORMAL VALUES

CLINICAL PATHOLOGY

URINE ROUTINE

PHYSICAL EXAMINATION

QUANTITY	:	20	ML
COLOUR	:	PALE YELLOW	
APPEARANCE	:	CLEAR	
REACTION	:	ACIDIC	
SPECIFIC GRAVITY	:	1.010	

CHEMICAL EXAMINATION

PROTEIN	:	ABSENT	
SUGAR	:	ABSENT	
KETONES	:	ABSENT	
BILE SALTS	:	ABSENT	
BILE PIGMENTS	:	ABSENT	
UROBILINOGEN	:	NORMAL	

MICROSCOPIC EXAMINATION

PUS CELLS	:	1-2	/hpf
RBC CELLS	:	ABSENT	/ hpf
EPITHELIAL CELLS	:	1-2	/hpf
CASTS	:	ABSENT	/hpf
CRYSTALS	:	ABSENT	
OTHER FINDINGS	:	ABSENT	
BACTERIA	:	ABSENT	

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