

REPORT

Name	: Mrs. LAKSHMI	Sample ID	: 24863796, 23130311
Age/Gender	: 79 Years/Female	Reg. No	: 0312310050019
Referred by	: Dr. RAGHAVENDRA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 05-Oct-2023 09: 14 AM
Primary Sample	:	Received On	: 05-Oct-2023 12: 18 PM
Sample Tested In	: Serum, Urine	Reported On	: 05-Oct-2023 03: 41 PM
Client Address	: Kimtee colony ,Gokul Nagar, Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

GLUCOSE FASTING

Test Name	Results	Units	Ref. Range	Method
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Bicarbonate (HCO₃)-Serum	15.65	mEq/L	22.0 - 29.0	Enzymatic Endpoint
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Interpretation:

Bicarbonate is the second largest fraction of anions in the plasma. At the physiological pH of blood, the concentration of carbonate is 1/1000 that of bicarbonate. This test is a significant indicator of electrolyte dispersion and anion deficit. An abnormal bicarbonate means a metabolic rather than a respiratory problem.

Increased Levels

- Acute Metabolic alkalosis
- Chronic Metabolic alkalosis

Estimated Glomerular Filtration Rate (eGFR):MDRD

Albumin	3.8	g/dL	3.4-5.0	Bromocresol purple (BCP)
Creatinine -Serum	1.27	mg/dL	0.60-1.20	Sarcosine oxidase
BUN	10	mg/dL	8.0-23.0	Calculated
GFR by MDRD Formula	43	mL/min/1.73m ²	52 - 102	Calculated

Interpretation:

- To assess kidney function and diagnose, stage, and monitor chronic kidney disease.
- Glomerular filtration rate (GFR) is a measure of how well your kidneys are working. The kidney's primary function is to filter blood. Waste and excess water gets removed and turned into urine. The levels of salts and minerals in blood are adjusted to maintain a healthy balance. In addition, kidneys produce hormones that regulate blood pressure, maintain bone health, and control production of red blood cells.

Fasting Urine Glucose	Negative	Negative	Automated Strip Test
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Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 05-Oct-2023 09: 14 AM
Primary Sample	:	Received On	: 05-Oct-2023 12: 18 PM
Sample Tested In	: Urine	Reported On	: 07-Oct-2023 12: 44 PM
Client Address	: Kimtee colony ,Gokul Nagar ,Tarnaka	Report Status	: Final Report

MICROBIOLOGY

Culture and Sensitivity, Urine

Culture Comment

No bacterial growth seen at the end of 48 hours of aerobic incubation.

ABST As per CLSI Guidelines.

Method : Aerobic Culture ABST; Disc Diffusion Method

Result rechecked and verified for abnormal cases

*** End Of Report ***



DR. RUTURAJ MANIKLAL KOLHAPURE
MD, MICROBIOLOGIST

REPORT

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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 05-Oct-2023 09: 14 AM
Primary Sample	: Whole Blood	Received On	: 05-Oct-2023 12: 18 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 05-Oct-2023 01: 24 PM
Client Address	: Kimtee colony ,Gokul Nagar ,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Blood Picture(CBP)				
Haemoglobin (Hb)	11.9	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	38.1	%	40-50	Calculated
RBC Count	4.14	10 ¹² /L	4.5-5.5	Cell Impedence
MCV	92	fl	81-101	Calculated
MCH	28.9	pg	27-32	Calculated
MCHC	31.3	g/dL	32.5-34.5	Calculated
RDW-CV	13.4	%	11.6-14.0	Calculated
Platelet Count (PLT)	402	10 ⁹ /L	150-410	Cell Impedence
Total WBC Count	7.5	10 ⁹ /L	4.0-10.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	57	%	40-70	Cell Impedence
Lymphocytes	35	%	20-40	Cell Impedence
Monocytes	05	%	2-10	Microscopy
Eosinophils	03	%	1-6	Microscopy
Basophils	0	%	1-2	Microscopy
Absolute Neutrophils Count	4.28	10 ⁹ /L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.63	10 ⁹ /L	1.0-3.0	Impedence
Absolute Monocyte Count	0.38	10 ⁹ /L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.23	10 ⁹ /L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Normocytic normochromic blood picture			PAPs Staining



*TESTS CONDUCTED @ CENTRAL LAB, HYDERABAD

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Swarnabala . M
DR.SWARNA BALA
MD PATHOLOGY

REPORT

Name	: Mrs. LAKSHMI	Sample ID	: 24863793, 24863791
Age/Gender	: 79 Years/Female	Reg. No	: 0312310050019
Referred by	: Dr. RAGHAVENDRA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 05-Oct-2023 09:14 AM
Primary Sample	: Whole Blood	Received On	: 05-Oct-2023 12:18 PM
Sample Tested In	: Plasma-NaF(F), Plasma-NaF(PP)	Reported On	: 05-Oct-2023 01:56 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

GLUCOSE POST PRANDIAL (PP)

Test Name	Results	Units	Ref. Range	Method
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Glucose Fasting (F) 94 mg/dL 70-100 GOD-POD

Interpretation of Plasma Glucose based on ADA guidelines 2018

Diagnosis	Fasting Plasma Glucose(mg/dL)	2hrs Plasma Glucose(mg/dL)	HbA1c(%)	RBS(mg/dL)
Prediabetes	100-125	140-199	5.7-6.4	NA
Diabetes	> = 126	> = 200	> = 6.5	>=200(with symptoms)

Reference: Diabetes care 2018:41(suppl.1):S13-S27

Glucose Post Prandial (PP) 136 mg/dL 70-140 Hexokinase (HK)

Interpretation of Plasma Glucose based on ADA guidelines 2018

Diagnosis	Fasting Plasma Glucose(mg/dL)	2hrs Plasma Glucose(mg/dL)	HbA1c(%)	RBS(mg/dL)
Prediabetes	100-125	140-199	5.7-6.4	NA
Diabetes	> = 126	> = 200	> = 6.5	>=200(with symptoms)

Reference: Diabetes care 2018:41(suppl.1):S13-S27

- Postprandial glucose level is a screening test for Diabetes Mellitus
- If glucose level is >140 mg/dL and <200 mg/dL, then GTT (glucose tolerance test) is advised.
- If level after 2 hours = >200 mg/dL diabetes mellitus is confirmed.
- Advise HbA1c for further evaluation.

Result rechecked and verified for abnormal cases

*** End Of Report ***

Laboratory is NABL Accredited



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Primary Sample	: Whole Blood	Received On	: 05-Oct-2023 12: 18 PM
Sample Tested In	: Serum	Reported On	: 05-Oct-2023 02: 23 PM
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CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Kidney Profile-KFT				
Urea	20.4	mg/dL	17.1-49.2	Glutamate dehydrogenase+Calculation
Creatinine -Serum	1.27	mg/dL	0.60-1.20	Sarcosine oxidase
Uric Acid	5.1	mg/dL	2.6-6.0	Uricase
Sodium	136	mmol/L	136-145	ISE Direct
Potassium	4.0	mmol/L	3.5-5.1	ISE Direct
Chloride	100	mmol/L	98-108	ISE Direct

Interpretation:

- The kidneys, located in the retroperitoneal space in the abdomen, are vital for patient health. They process several hundred liters of fluid a day and remove around two liters of waste products from the bloodstream. The volume of fluid that passes through the kidneys each minute is closely linked to cardiac output. The kidneys maintain the body's balance of water and concentration of minerals such as sodium, potassium, and phosphorus in blood and remove waste by-products from the blood after digestion, muscle activity and exposure to chemicals or medications. They also produce renin which helps regulate blood pressure, produce erythropoietin which stimulates red blood cell production, and produce an active form of vitamin D, needed for bone health.

Excellence In Health Care



Lakshmi
DR. VAISHNAVI
MD BIOCHEMISTRY

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Sample Tested In	: Urine	Reported On	: 05-Oct-2023 02: 57 PM
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CLINICAL PATHOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Urine Analysis (CUE)				
Physical Examination				
Colour	Pale Yellow		Straw to light amber	
Appearance	Clear		Clear	
Chemical Examination				
Glucose	Negative		Negative	Strip Reflectance
Protein	Absent		Negative	Strip Reflectance
Bilirubin (Bile)	Negative		Negative	Strip Reflectance
Urobilinogen	Negative		Negative	Ehrlichs reagent
Ketone Bodies	Negative		Negative	Strip Reflectance
Specific Gravity	1.015		1.000 - 1.030	Strip Reflectance
Blood	Negative		Negative	Strip Reflectance
Reaction (pH)	6.5		5.0 - 8.5	Reagent strip Reflectance - Double indicator Principle
Nitrites	Negative		Negative	Strip Reflectance
Leukocyte esterase	Negative		Negative	Reagent Strip Reflectance
Microscopic Examination (Microscopy)				
PUS(WBC) Cells	03-04	/hpf	00-05	Microscopy
R.B.C.	Nil	/hpf	Nil	Microscopic
Epithelial Cells	02-03	/hpf	00-05	Microscopic
Casts	Absent		Absent	Microscopic
Crystals	Absent		Absent	Microscopic
Bacteria	Nil		Nil	
Budding Yeast Cells	Nil		Absent	Microscopy
Others	-			Microscopic

Comments :

Urine analysis is one of the most useful laboratory tests as it identifies a wide range of medical conditions including renal damage, urinary tract infections, diabetes, hypertension and drug toxicity.

Correlate Clinically.

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