SagePath®
Excellence In Health Care

Sagepath Labs Pvt. Ltd.
Registered Office:- # Plot No. 564 , 1st floor , Buddhanagar ,
Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad,
Telangana. ICMR Reg .No. SAPALAPVLHT (Covid -19)
Website:- www.sagepathlabs.com

REPORT

Name	: Mrs. U RAJESHWARI	Sample ID	: 24753989
Age/Gender	: 57 Years/Female	Reg. No	: 0312312060008
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 06-Dec-2023 10:42 AM
Primary Sample	: Whole Blood	Received On	: 06-Dec-2023 12:31 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 06-Dec-2023 02:28 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)	**7.7**	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	**25.9**	%	40-50	Calculated
RBC Count	**3.70**	10^12/L	4.5-5.5	Cell Impedence
MCV	**70**	fl	81-101	Calculated
MCH	**20.9**	pg	27-32	Calculated
MCHC	**29.9**	g/dL	32.5-34.5	Calculated
RDW-CV	**18.1**	%	11.6-14.0	Calculated
Platelet Count (PLT)	158	10^9/L	150-410	Cell Impedance
Total WBC Count	6.0	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	58	%	40-70	Cell Impedence
Lymphocytes	36	%	20-40	Cell Impedence
Monocytes	03	%	2-10	Microscopy
Eosinophils	03	%	1-6	Microscopy
Basophils	0	%	1-2	Microscopy
Absolute Neutrophils Count	3.48	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.16	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	**0.18**	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.18	10^9/L	0.02-0.5	Calculated
Absolute Basophil lCount	0.00	10^9/L	0.0-0.3	Calculated
Morphology	Anisocytosis with Microcytic hypochromic anemia			PAPs Staining

Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY

MC 3633

*TESTS CONDUCTED @ CENTRAL LAB, HYDERABAD

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REPORT

Name	: Mrs. U RAJESHWARI	Sample ID	: 24753992
Age/Gender	: 57 Years/Female	Reg. No	: 0312312060008
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 06-Dec-2023 10:42 AM
Primary Sample	: Whole Blood	Received On	: 06-Dec-2023 12:31 PM
Sample Tested In	: Serum	Reported On	: 06-Dec-2023 04:30 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Creatinine -Serum	**1.12**	mg/dL	0.60-1.10	Sarcosine oxidase

Interpretation:

- This test is done to see how well your kidneys are working.Creatinine is a chemical waste product of creatine. Creatine is a chemical made by the body and is used to supply energy mainly to muscles.
- **A higher than normal level may be due to:**
- Renal diseases and insufficiency with decreased glomerular filtration, urinary tract obstruction, reduced renal blood flow including congestive heart failure, shock, and dehydration; rhabdomyolysis can cause elevated serum creatinine.
- **A lower than normal level may be due to:**
- Small stature, debilitation, decreased muscle mass; some complex cases of severe hepatic disease can cause low serum creatinine levels. In advanced liver disease, low creatinine may result from decreased hepatic production of creatinine and inadequate dietary protein as well as reduced musle mass.

Result rechecked and verified for abnormal cases

*** End Of Report ***

Laboratory is NABL Accredited

DR.VAISHNAVI
MD BIOCHEMISTRY

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CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Liver Function Test (LFT)				
Bilirubin(Total)	0.7	mg/dL	0.3-1.2	Diazo
Bilirubin (Direct)	0.2	mg/dL	0.0 - 0.2	Diazo
Bilirubin (Indirect)	0.5	mg/dL	0.2-1.0	Calculated
Aspartate Aminotransferase (AST/SGOT)	27	U/L	5-40	IFCC with out (P-5-P)
Alanine Aminotransferase (ALT/SGPT)	22	U/L	0-55	IFCC with out (P-5-P)
Alkaline Phosphatase(ALP)	**194**	U/L	40-150	Kinetic PNPP-AMP
Gamma Glutamyl Transpeptidase (GGTP)	54	U/L	5-55	IFCC
Protein - Total	6.6	g/dL	6.4-8.2	Biuret
Albumin	4.1	g/dL	3.4-5.0	Bromocresol purple (BCP)
Globulin	2.5	g/dL	2.0-4.2	Calculated
A:G Ratio	1.64	%	0.8-2.0	Calculated
SGOT/SGPT Ratio	1.23			

- **Alanine Aminotransferase(ALT**) is an enzyme found in liver and kidneys cells. ALT helps create energy for liver cells. Damaged liver cells release ALT into the bloodstream, which can elevate ALT levels in the blood.
- **Aspartate Aminotransferase (AST)** is an enzyme in the liver and muscles that helps metabolizes amino acids. Similarly to ALT, elevated AST levels may be a sign of liver damage or liver disease.
- **Alkaline phosphate (ALP)** is an enzyme present in the blood. ALP contributes to numerous vital bodily functions, such as supplying nutrients to the liver, promoting bone growth, and metabolizing fat in the intestines.
- **Gamma-glutamyl Transpeptidase (GGTP)** is an enzyme that occurs primarily in the liver, but it is also present in the kidneys, pancreas, gallbladder, and spleen. Higher than normal concentrations of GGTP in the blood may indicate alcohol-related liver damage. Elevated GGTP levels can also increase the risk of developing certain types of cancer.
- **Bilirubin** is a waste product that forms when the liver breaks down red blood cells. Bilirubin exits the body as bile in stool. High levels of bilirubin can cause jaundice - a condition in which the skin and whites of the eyes turn yellow- and may indicate liver damage.
- **Albumin** is a protein that the liver produces. The liver releases albumin into the bloodstream, where it helps fight infections and transport vitamins, hormones, and enzymes throughout the body. Liver damage can cause abnormally low albumin levels.

Correlate Clinically.

Result rechecked and verified for abnormal cases
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*** End Of Report ***

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MD BIOCHEMISTRY