

REPORT

Name	: Mrs. M SATHYAVATHI	Sample ID	: 24754300
Age/Gender	: 54 Years/Female	Reg. No	: 0312312210027
Referred by	: Dr. A N ROY	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 21-Dec-2023 05:43 PM
Primary Sample	: Whole Blood	Received On	: 21-Dec-2023 09:40 PM
Sample Tested In	: Serum	Reported On	: 21-Dec-2023 10:39 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
C-Reactive protein-(CRP)	43.8	mg/L	Upto:6.0	Immunoturbidimetry

Interpretation:

C-reactive protein (CRP) is produced by the liver. The level of CRP rises when there is inflammation throughout the body. It is one of a group of proteins called acute phase reactants that go up in response to inflammation. The levels of acute phase reactants increase in response to certain inflammatory proteins called cytokines. These proteins are produced by white blood cells during inflammation.

A positive test means you have inflammation in the body. This may be due to a variety of conditions, including:

- Connective tissue disease
- Heart attack
- Infection
- Inflammatory bowel disease (IBD)
- Lupus
- Pneumonia
- Rheumatoid arthritis

Intact Parathyroid Hormone (iPTH)

30.7

pg/mL

11.1 - 79.5

CLIA

Interpretation:

Parathyroid hormone (PTH) helps the body maintain stable levels of calcium in the blood. It is part of a 'feed back loop' that includes calcium, PTH, vitamin D and also phosphate and magnesium. Conditions and diseases that disrupt this feedback loop can cause inappropriate elevations or decreases in calcium and PTH levels and lead to symptoms of hypercalcaemia (raised blood levels of calcium) or hypocalcaemia (low blood levels of calcium). PTH is produced by four parathyroid glands that are located in the neck behind the thyroid gland. Normally, these glands secrete PTH into the bloodstream in response to low blood calcium levels. Parathyroid hormone then works in three ways to help raise blood calcium levels back to normal. It takes calcium from the body's bone, stimulates the activation of vitamin D in the kidney (which in turn increases the absorption of calcium from the intestines), and suppresses the excretion of calcium in the urine (while encouraging excretion of phosphate). As calcium levels begin to increase in the blood, PTH normally decreases.

Result rechecked and verified for abnormal cases

*** End Of Report ***



Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

REPORT

Name	: Mrs. M SATHYAVATHI	Sample ID	: 24754293
Age/Gender	: 54 Years/Female	Reg. No	: 0312312210027
Referred by	: Dr. A N ROY	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 21-Dec-2023 05:43 PM
Primary Sample	: Whole Blood	Received On	: 21-Dec-2023 09:40 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 21-Dec-2023 10:01 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)	10.8	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	33.7	%	40-50	Calculated
RBC Count	3.90	10 ¹² /L	4.5-5.5	Cell Impedence
MCV	86	fl	81-101	Calculated
MCH	27.6	pg	27-32	Calculated
MCHC	32.0	g/dL	32.5-34.5	Calculated
RDW-CV	15.1	%	11.6-14.0	Calculated
Platelet Count (PLT)	548	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	70	%	40-70	Cell Impedence
Lymphocytes	20	%	20-40	Cell Impedence
Monocytes	06	%	2-10	Microscopy
Eosinophils	04	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	5.25	10 ⁹ /L	2.0-7.0	Impedence
Absolute Lymphocyte Count	1.5	10 ⁹ /L	1.0-3.0	Impedence
Absolute Monocyte Count	0.45	10 ⁹ /L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.3	10 ⁹ /L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Anisocytosis with Normocytic normochromic with Thrombocytosis			PAPs Staining

Result rechecked and verified for abnormal cases

*** End Of Report ***

Laboratory is NABL Accredited



Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY

REPORT

Name	: Mrs. M SATHYAVATHI	Sample ID	: 24754300
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Referred by	: Dr. A N ROY	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 21-Dec-2023 05: 43 PM
Primary Sample	: Whole Blood	Received On	: 21-Dec-2023 09: 40 PM
Sample Tested In	: Serum	Reported On	: 21-Dec-2023 10: 41 PM
Client Address	: Kimtee colony ,Gokul Nagar, Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
25 - Hydroxy Vitamin D	89.74	ng/mL	<20.0-Deficiency 20.0-<30.0-Insufficiency 30.0-100.0-Sufficiency >100.0-Potential Intoxication	CLIA

Interpretation:

- Vitamin D helps your body absorb calcium and maintain strong bones throughout your entire life. Your body produces vitamin D when the sun's UV rays contact your skin. Other good sources of the vitamin include fish, eggs, and fortified dairy products. It's also available as a dietary supplement.
- Vitamin D must go through several processes in your body before your body can use it. The first transformation occurs in the liver. Here, your body converts vitamin D to a chemical known as 25-hydroxyvitamin D, also called calcidiol.
- The 25-hydroxy vitamin D test is the best way to monitor vitamin D levels. The amount of 25-hydroxyvitamin D in your blood is a good indication of how much vitamin D your body has. The test can determine if your vitamin D levels are too high or too low.
- The test is also known as the 25-OH vitamin D test and the calcidiol 25-hydroxycholecalciferol test. It can be an important indicator of osteoporosis (bone weakness) and rickets (bone malformation).

Those who are at high risk of having low levels of vitamin D include:

- people who don't get much exposure to the sun
- older adults
- people with obesity.
- dietary deficiency

Increased Levels:

- Vitamin D Intoxication

Method : CLIA

Correlate Clinically.

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*** End Of Report ***



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