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Excellence In Health Care

Sagepath Labs Pvt. Ltd.

Lab Address:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana.
ICMR Reg .No. SAPALAPVLHT (Covid -19)

REPORT

Name	: Mr. AVINASH	Sample ID	: A0012866
Age/Gender	: 32 Years/Male	Reg. No	: 0312401200060
Referred by	: Dr. PRADYUMNA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Jan-2024 08:23 PM
Primary Sample	: Whole Blood	Received On	: 20-Jan-2024 10:09 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 20-Jan-2024 10:30 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
Blood Grouping (A B O)	O			Tube Agglutination
Rh Typing	Positive			Tube Agglutination

Comments:

Blood group ABO & Rh test identifies your blood group & type of Rh factor. There are four major blood groups- A, B, AB, and O. It is important to know your blood group as you may need a transfusion of blood or blood components; you may want to donate your blood ; before or during a woman's pregnancy to determine the risk of Rh mismatch with the fetus.

Note: Both Forward and Reverse Grouping Performed .

*** End Of Report ***

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DR.SWARNA BALA
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Primary Sample	: Whole Blood	Received On	: 20-Jan-2024 10:09 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 20-Jan-2024 10:34 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)	15.2	g/dL	13-17	Cynmeth Method
Haematocrit (HCT)	46.9	%	40-50	Calculated
RBC Count	4.55	10^12/L	4.5-5.5	Cell Impedence
MCV	**103**	fl	81-101	Calculated
MCH	**33.5**	pg	27-32	Calculated
MCHC	32.5	g/dL	32.5-34.5	Calculated
RDW-CV	13.1	%	11.6-14.0	Calculated
Platelet Count (PLT)	183	10^9/L	150-410	Cell Impedance
Total WBC Count	6.6	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	66	%	40-70	Cell Impedence
Lymphocytes	27	%	20-40	Cell Impedence
Monocytes	05	%	2-10	Microscopy
Eosinophils	02	%	1-6	Microscopy
Basophils	0	%	1-2	Microscopy
Absolute Neutrophils Count	4.36	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	1.78	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	0.33	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.13	10^9/L	0.02-0.5	Calculated
Absolute Basophil lCount	0.00	10^9/L	0.0-0.3	Calculated
Morphology	Normocytic normochromic blood picture			PAPs Staining

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REPORT

Name	: Mr. AVINASH	Sample ID	: A0012867
Age/Gender	: 32 Years/Male	Reg. No	: 0312401200060
Referred by	: Dr. PRADYUMNA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Jan-2024 08:23 PM
Primary Sample	: Whole Blood	Received On	: 20-Jan-2024 10:09 PM
Sample Tested In	: Plasma-NaF(R)	Reported On	: 20-Jan-2024 10:56 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

GLUCOSE RANDOM (RBS)

Test Name	Results	Units	Ref. Range	Method
Glucose Random (RBS)	72	mg/dL	70-140	Hexokinase (HK)

Interpretation of Plasma Glucose based on ADA guidelines 2018

Diagnosis	FastingPlasma Glucose(mg/dL)	2hrsPlasma 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

- The random blood glucose if it is above 200 mg/dL and the patient has increased thirst, polyuria, and polyphagia, suggests diabetes mellitus.
- As a rule, two-hour glucose samples will reach the fasting level or it will be in the normal range.

Result rechecked and verified for abnormal cases

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Sample Tested In	: Serum	Reported On	: 20-Jan-2024 10:56 PM
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CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Kidney Profile-KFT				
Creatinine -Serum	0.79	mg/dL	0.70-1.30	Sarcosine oxidase
Urea-Serum	17.7	mg/dL	12.8-42.8	Glutamate dehydrogenase+Calculation
Blood Urea Nitrogen (BUN)	8.27	mg/dL	7.0-18.0	Calculated
BUN / Creatinine Ratio	10.47		6 - 22	
Uric Acid	5.0	mg/dL	3.5-7.2	Uricase
Sodium	139	mmol/L	136-145	ISE Direct
Potassium	4.0	mmol/L	3.5-5.1	ISE Direct
Chloride	98	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 though 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.

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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 - 0.5	Diazo
Bilirubin (Indirect)	0.5	mg/dL	0.2-1.0	Calculated
Aspartate Aminotransferase (AST/SGOT)	**74**	U/L	5-40	IFCC with out (P-5-P)
Alanine Aminotransferase (ALT/SGPT)	**85**	U/L	0-55	IFCC with out (P-5-P)
Alkaline Phosphatase(ALP)	46	U/L	40-150	Kinetic PNPP-AMP
Gamma Glutamyl Transpeptidase (GGTP)	40	U/L	15-85	IFCC
Protein - Total	7.3	g/dL	6.4-8.2	Biuret
Albumin	4.8	g/dL	3.4-5.0	Bromocresol purple (BCP)
Globulin	2.5	g/dL	2.0-4.2	Calculated
A:G Ratio	1.92	%	0.8-2.0	Calculated
SGOT/SGPT Ratio	0.87			

- **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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