

REPORT

Name	: Mrs. G RAMADEVI	Sample ID	: A0093303
Age/Gender	: 53 Years/Female	Reg. No	: 0312402180039
Referred by	: Dr. M PRANITH RAM	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 18-Feb-2024 07:32 PM
Primary Sample	: Whole Blood	Received On	: 18-Feb-2024 08:54 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 18-Feb-2024 09:16 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)	10.6	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	35.8	%	40-50	Calculated
RBC Count	4.79	10 ¹² /L	4.5-5.5	Cell Impedence
MCV	75	fl	81-101	Calculated
MCH	22.1	pg	27-32	Calculated
MCHC	29.6	g/dL	32.5-34.5	Calculated
RDW-CV	14.3	%	11.6-14.0	Calculated
Platelet Count (PLT)	370	10 ⁹ /L	150-410	Cell Impedence
Total WBC Count	7.6	10 ⁹ /L	4.0-10.0	Impedence
Differential Leucocyte Count (DC)				
Neutrophils	69	%	40-70	Cell Impedence
Lymphocytes	25	%	20-40	Cell Impedence
Monocytes	04	%	2-10	Microscopy
Eosinophils	02	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	5.24	10 ⁹ /L	2.0-7.0	Impedence
Absolute Lymphocyte Count	1.9	10 ⁹ /L	1.0-3.0	Impedence
Absolute Monocyte Count	0.3	10 ⁹ /L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.15	10 ⁹ /L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10 ⁹ /L	0.0-0.3	Calculated
Morphology	Normocytic normochromic with few Microcytic hypochromic			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. G RAMADEVI	Sample ID	: A0093306
Age/Gender	: 53 Years/Female	Reg. No	: 0312402180039
Referred by	: Dr. M PRANITH RAM	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 18-Feb-2024 07:32 PM
Primary Sample	: Whole Blood	Received On	: 18-Feb-2024 08:54 PM
Sample Tested In	: Serum	Reported On	: 19-Feb-2024 10:27 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Kidney Profile-KFT				
Creatinine -Serum	5.76	mg/dL	0.60-1.10	Sarcosine oxidase
Urea-Serum	134.5	mg/dL	12.8-42.8	Glutamate dehydrogenase+Calculation
Blood Urea Nitrogen (BUN)	62.85	mg/dL	7.0-18.0	Calculated
BUN / Creatinine Ratio	10.91		6 - 22	
Uric Acid	7.7	mg/dL	2.6-6.0	Uricase
Sodium	147	mmol/L	136-145	ISE Direct
Potassium	4.8	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 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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

Laboratory is NABL Accredited



Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

REPORT

Name	: Mrs. G RAMADEVI	Sample ID	: A0093306
Age/Gender	: 53 Years/Female	Reg. No	: 0312402180039
Referred by	: Dr. M PRANITH RAM	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 18-Feb-2024 07:32 PM
Primary Sample	: Whole Blood	Received On	: 18-Feb-2024 08:54 PM
Sample Tested In	: Serum	Reported On	: 19-Feb-2024 10:27 AM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Iron Profile-I				
Iron(Fe)	28	µg/dL	50-170	Ferene
Total Iron Binding Capacity (TIBC)	459	µg/dL	250-450	Ferene
Transferrin	320.98	mg/dL	250-380	Calculated
Iron Saturation((% Transferrin Saturation)	6.1	%	15-50	Calculated
Unsaturated Iron Binding Capacity (UIBC)	431	ug/dL	110-370	FerroZine

Interpretation:

- Serum transferrin (and TIBC) high, serum iron low, saturation low. Usual causes of depleted iron stores include blood loss, inadequate dietary iron. RBCs in moderately severe iron deficiency are hypochromic and microcytic. Stainable marrow iron is absent. Serum ferritin decrease is the earliest indicator of iron deficiency if inflammation is absent.
- **Anemia of chronic disease:** Serum transferrin (and TIBC) low to normal, serum iron low, saturation low or normal. Transferrin decreases with many inflammatory diseases. With chronic disease there is a block in movement to and utilization of iron by marrow. This leads to low serum iron and decreased erythropoiesis. Examples include acute and chronic infections, malignancy and renal failure.
- **Sideroblastic Anemia:** Serum transferrin (and TIBC) normal to low, serum iron normal to high, saturation high.
- **Hemolytic Anemia:** Serum transferrin (and TIBC) normal to low, serum iron high, saturation high.
- **Hemochromatosis:** Serum transferrin (and TIBC) slightly low, serum iron high, saturation very high.
- **Protein depletion:** Serum transferrin (and TIBC) may be low, serum iron normal or low (if patient also is iron deficient). This may occur as a result of malnutrition, liver disease, renal disease.
- **Liver disease:** Serum transferrin variable; with acute viral hepatitis, high along with serum iron and ferritin. With chronic liver disease (eg, cirrhosis), transferrin may be low. Patients who have cirrhosis and portacaval shunting have saturated TIBC/transferrin as well as high ferritin.



Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

REPORT

Name	: Mrs. G RAMADEVI	Sample ID	: A0093298
Age/Gender	: 53 Years/Female	Reg. No	: 0312402180039
Referred by	: Dr. M PRANITH RAM	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 18-Feb-2024 07:32 PM
Primary Sample	:	Received On	: 18-Feb-2024 08:54 PM
Sample Tested In	: Urine	Reported On	: 18-Feb-2024 09:08 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL PATHOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Urine Analysis (CUE)				
Physical Examination				
Colour	Pale Yellow		Straw to light amber	
Appearance	hazy		Clear	
Chemical Examination				
Glucose	Negative		Negative	Strip Reflectance
Protein	(+)		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)	6.0		5.0 - 8.5	Reagent Strip Reflectance
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	01-02	/hpf	00-05	Microscopic
Casts	Absent		Absent	Microscopic
Crystals	Absent		Absent	Microscopic
Bacteria	Nil		Nil	
Budding Yeast Cells	Nil		Absent	Microscopy

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.

Result rechecked and verified for abnormal cases
Laboratory is NABL Accredited

*** End Of Report ***



Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY