

**REPORT**

Name	: Mrs. SAMPA	Sample ID	: 24864362
Age/Gender	: 49 Years/Female	Reg. No	: 0312404280002
Referred by	: Dr. RAVI TEJA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 28-Apr-2024 08:03 AM
Primary Sample	: Whole Blood	Received On	: 28-Apr-2024 02:24 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 28-Apr-2024 06:50 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

**HAEMATOLOGY**

Test Name	Results	Units	Ref. Range	Method
<b>Complete Blood Picture(CBP)</b>				
Haemoglobin (Hb)	12.3	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	<b>39.5</b>	%	40-50	Calculated
RBC Count	<b>4.28</b>	10 <sup>12</sup> /L	4.5-5.5	Cell Impedence
MCV	92	fl	81-101	Calculated
MCH	28.7	pg	27-32	Calculated
MCHC	<b>31.1</b>	g/dL	32.5-34.5	Calculated
RDW-CV	13.8	%	11.6-14.0	Calculated
Platelet Count (PLT)	<b>120</b>	10 <sup>9</sup> /L	150-410	Cell Impedence
Total WBC Count	6.4	10 <sup>9</sup> /L	4.0-10.0	Impedence
<b>Differential Leucocyte Count (DC)</b>				
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	3.65	10 <sup>9</sup> /L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.24	10 <sup>9</sup> /L	1.0-3.0	Impedence
Absolute Monocyte Count	0.32	10 <sup>9</sup> /L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.19	10 <sup>9</sup> /L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10 <sup>9</sup> /L	0.0-0.3	Calculated
Morphology	Normocytic normochromic with Mild Thrombocytopenia			PAPs Staining



Swarnabala - M  
DR.SWARNA BALA  
MD PATHOLOGY

**REPORT**

Name	: Mrs. SAMPA	Sample ID	: 24864360, 24864357, 248643
Age/Gender	: 49 Years/Female	Reg. No	: 0312404280002
Referred by	: Dr. RAVI TEJA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 28-Apr-2024 08:03 AM
Primary Sample	: Whole Blood	Received On	: 28-Apr-2024 02:24 PM
Sample Tested In	: Plasma-NaF(F), Plasma-NaF(PP),	Reported On	: 28-Apr-2024 04:03 PM
Client Address	: Kimtee colony ,Gokul Nagar, Tarnaka	Report Status	: Final Report

**CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Ref. Range	Method
<b>Glucose Fasting (F)</b>	<b>107</b>	<b>mg/dL</b>	<b>70-100</b>	<b>GOD-POD</b>

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

<b>Glucose Post Prandial (PP)</b>	<b>124</b>	<b>mg/dL</b>	<b>70-140</b>	<b>Hexokinase (HK)</b>
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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.



*Dr. Vaishnavi*  
**DR. VAISHNAVI**  
**MD BIOCHEMISTRY**

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**CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Ref. Range	Method
<b>Kidney Profile-KFT</b>				
Creatinine -Serum	0.71	mg/dL	0.60-1.10	Sarcosine oxidase
Urea-Serum	24.4	mg/dL	12.8-42.8	Glutamate dehydrogenase+Calculation
Blood Urea Nitrogen (BUN)	11.4	mg/dL	7.0-18.0	Calculated
BUN / Creatinine Ratio	16.06		6 - 22	
Uric Acid	3.9	mg/dL	2.6-6.0	Uricase
Sodium	141	mmol/L	136-145	ISE Direct
Potassium	3.8	mmol/L	3.5-5.1	ISE Direct
Chloride	104	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.

Correlate Clinically.

Result rechecked and verified for abnormal cases  
Laboratory is NABL Accredited

\*\*\* End Of Report \*\*\*



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