

## 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)

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|---------------|--|--------------------------------------|----------|----------|----------------------|-----------------------------|
| Name          | : Mr. C P RAJU   |                                      |          | S        | ample ID             | : A0286980, A0286981, A0286 |
| Age/Gender    | : 81 Years/Male  | : 81 Years/Male                      |          |          | eg. No               | : 0312405240003             |
| Referred by   | : Dr. SELF   | : Dr. SELF                           |          |          | PP Code              | : SPL-CV-172                |
| Referring Cu  | stomer : V CARE MEDICA                                       | : V CARE MEDICAL DIAGNOSTICS         |          |          | ollected On          | : 24-May-2024 08:04 AM      |
| Primary Sam   | ple : Whole Blood  | : Whole Blood                        |          |          | eceived On           | : 24-May-2024 12:31 PM      |
| Sample Teste  | ed In : Plasma-NaF(F),                                       | : Plasma-NaF(F), Plasma-NaF(PP),     |          |          | eported On           | : 24-May-2024 04:31 PM      |
| Client Addres | ss : Kimtee colony ,   | : Kimtee colony ,Gokul Nagar,Tarnaka |          |          | eport Status         | : Final Report              |
|               |  | CLINIC                               | AL BIOC  | HEMIS    | TRY                  |                             |
| Test Name     |  | Results                              | Units    | F        | Ref. Range           | Method                      |
| Glucose Fas   | <b>sting (F)</b><br>Plasma Glucose based on ADA guidelines 2 | 92                                   | mg/dL    |          | 70-100               | GOD-POD                     |
| Diagnosis     | FastingPlasma Glucose(mg/dL)                                 | 2hrsPlasma Glucos                    | e(mg/dL) | HbA1c(%) | RBS(mg/dL)           |                             |
| Prediabetes   | 100-125  | 140-199                              |          | 5.7-6.4  | NA                   |                             |
| l l           |  |                                      |          |          |                      |                             |
| Diabetes      | > = 126  | > = 200                              |          | > = 6.5  | >=200(with symptoms) |                             |

Reference: Diabetes care 2018:41(suppl.1):S13-S27

## **Glucose Post Prandial (PP)**

| 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 >= 2                              | >=6.5 >=200(with symptoms          |

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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.

| So | odium | 137 | mmol/L | 136-145 | ISE Direct |  |
|----|-------|-----|--------|---------|------------|--|
|    |       |     |        |         |            |  |

mg/dL

70-140

## Interpretation:

This test measures the level of sodium in blood. Sodium is an electrolyte present in all body fluids and is vital to normal body function. It works to regulate the amount of water in the body, and to control blood pressure by keeping the right amount of water available (in some people, too much sodium from salt in the diet can contribute to high blood pressure). Your body tries to keep your blood sodium within a very small concentration range; it does so by:

producing hormones that can increase (such as natriuretic peptides) or decrease (such as aldosterone) sodium losses in urine

producing a hormone that prevents water losses (antidiuretic hormone [ADH], sometimes called vasopressin)

controlling thirst (even a 1 per cent increase in blood sodium will make you thirsty and cause you to drink water, returning your sodium level towards normal.)

Abnormal blood sodium is usually due to some problem with one of these systems. When the level of sodium in the blood changes, the water content in your body changes. These changes can be associated with dehydration (too little fluid) or oedema (too much fluid, often resulting in swelling in the legs).

Correlate Clinically.

Laboratory is NABL Accredited

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





Hexokinase (HK)