

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

REPORT					
l	Name	: Mr. V KRISHNA	Sample ID	: A0287544	
I	Age/Gender	: 35 Years/Male	Reg. No	: 0312406230001	
l	Referred by	: Dr. K J SRINIVASULU	SPP Code	: SPL-CV-172	
I	Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Jun-2024 07:42 AM	
I	Primary Sample	:	Received On	: 23-Jun-2024 03:50 PM	
I	Sample Tested In	: Urine	Reported On	: 23-Jun-2024 07:31 PM	
	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	
	-				

 CLINICAL BIOCHEMISTRY

 GLUCOSE FASTING

 Test Name
 Results
 Units
 Ref. Range
 Method

 Fasting Urine Glucose
 (+++)
 Negative
 Automated Strip Test

 *** End Of Report ***

 End Of Report ***

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REPORT					
L	Name	: Mr. V KRISHNA	Sample ID	: A0287542	
	Age/Gender	: 35 Years/Male	Reg. No	: 0312406230001	
L	Referred by	: Dr. K J SRINIVASULU	SPP Code	: SPL-CV-172	
	Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Jun-2024 07:42 AM	
	Primary Sample	: Whole Blood	Received On	: 23-Jun-2024 03:50 PM	
L	Sample Tested In	: Whole Blood EDTA	Reported On	: 23-Jun-2024 04:17 PM	
L	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

	HA	EMATOLOG	GY	
Test Name	Results	Units	Ref. Range	Method
Complete Blood Picture(CBP)				
Haemoglobin (Hb)	15.7	g/dL	13-17	Cynmeth Method
Haematocrit (HCT)	45.9	%	40-50	Calculated
RBC Count	5.31	10^12/L	4.5-5.5	Cell Impedence
MCV	87	fl	81-101	Calculated
MCH	29.5	pg	27-32	Calculated
MCHC	34.2	g/dL	32.5-34.5	Calculated
RDW-CV	12.0	%	11.6-14.0	Calculated
Platelet Count (PLT)	313	10^9/L	150-410	Cell Impedance
Total WBC Count	7.3	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	58	%	40-70	Cell Impedence
Lymphocytes	35	%	20-40	Cell Impedence
Monocytes	04	%	2-10	ALE Microscopy
Eosinophils	03	%	1-6	Microscopy
Basophils	0	%	1-2	Microscopy
Absolute Neutrophils Count	4.23	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.56	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	0.29	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.22	10^9/L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10^9/L	0.0-0.3	Calculated
Morphology	Normocytic	normochromic	blood picture.	PAPs Staining

Laboratory is NABL Accredited

*** End Of Report ***



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	Age/Gender	: 35 Years/Male	Reg. No	: 0312406230001			
	Referred by	: Dr. K J SRINIVASULU	SPP Code	: SPL-CV-172			
	Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Jun-2024 07:42 AM			
	Primary Sample	: Whole Blood	Received On	: 23-Jun-2024 03:50 PM			
	Sample Tested In	: Whole Blood EDTA	Reported On	: 23-Jun-2024 04:54 PM			
	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report			
6							

 HAEMATOLOGY

 Test Name
 Results
 Units
 Ref. Range
 Method

 Erythrocyte Sedimentation Rate (ESR)
 5
 10 or less
 Westergren method



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CLINICAL BIOCHEMISTRY

		REPORT -		
	Name	: Mr. V KRISHNA	Sample ID	: A0287541, A0287540
	Age/Gender	: 35 Years/Male	Reg. No	: 0312406230001
	Referred by	: Dr. K J SRINIVASULU	SPP Code	: SPL-CV-172
	Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Jun-2024 07:42 AM
	Primary Sample	: Whole Blood	Received On	: 23-Jun-2024 03:50 PM
	Sample Tested In	: Plasma-NaF(F), Plasma-NaF(PP)	Reported On	: 23-Jun-2024 06:06 PM
	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report
1				

GLUCOSE POST PRANDIAL (PP)						
Fest Name		Results	Units	6	Ref. Range	Method
Glucose Fa	sting (F)	313	mg/d	L	70-100	Hexokinase
Interpretation of	Plasma Glucose based on ADA guideline	es 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: Dia	" betes care 2018:41(suppl.1):S13-S2	27		1	<u></u>	2
Glucose Po	st Prandial (PP)	360	mg/d	L	70-140	Hexokinase (HK)
Interpretation of	Plasma Glucose based on ADA guideline	es 2018				
Diagnosis	FastingPlasma Glucose(mg/dL)	2hrsPlasma Glucose(m	ng/dL)	HbA1c(%)	RBS(mg/dL)	
Prediabetes	100-125	140-199	2010	5.7-6.4	NA	
Diabetes	> - 126	> = 200	020	>=65	>=200(with symptoms)	

> = 6.5

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.

> = 200

• If level after 2 hours = >200 mg/dL diabetes mellitus is confirmed.

> = 126

• Advise HbA1c for further evaluation.

Diabetes





BIOCHEMISTRY



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	Referred by	: Dr. K J SRINIVASULU	SPP Code	: SPL-CV-172	
	Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Jun-2024 07:42 AM	
	Primary Sample	:	Received On	: 23-Jun-2024 03:50 PM	
I	Sample Tested In	: Urine	Reported On	: 23-Jun-2024 06:10 PM	
	Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

DEDOD

CLINICAL PATHOLOGY					
Test Name	Results	Units	Ref. Range	Method	
Complete Urine Analysis (CUE)					
Physical Examination					
Colour	Pale Yellow	,	Straw to light amber		
Appearance	Clear		Clear		
Chemical Examination					
Glucose	(+++)		Negative	Strip Reflectance	
Protein	Absent		Negative	Strip Reflectance	
Bilirubin (Bile)	Negative		Negative	Strip Reflectance	
Urobilinogen	Negative		Negative	Ehrlichs reagent	
Ketone Bodies	Negative		Negative	Strip Reflectance	
Specific Gravity	1.025		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.



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REPORT						
Name	: Mr. V KRISHNA	Sample ID	: A0287546			
Age/Gender	: 35 Years/Male	Reg. No	: 0312406230001			
Referred by	: Dr. K J SRINIVASULU	SPP Code	: SPL-CV-172			
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 23-Jun-2024 07:42 AM			
Primary Sample	: Whole Blood	Received On	: 23-Jun-2024 03:50 PM			
Sample Tested In	: Serum	Reported On	: 23-Jun-2024 06:39 PM			
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report			

 IMMUNOLOGY & SEROLOGY

 Test Name
 Results
 Units
 Ref. Range
 Method

 VDRL- Syphilis Antibodies
 Non Reactive
 Non Reactive
 Slide Flocculation

The serological diagnosis of syphilis is classified into two groups: Nontreponemal tests (RPR/VDRL) and Treponemal tests (TPHA/CLIA). Syphilis serology is a treponemal assay for the qualitative determination of antibodies to T. pallidum in human serum or plasma as an aid in the diagnosis of syphilis. Treponemal tests may remain reactive for life, even following adequate therapy thus a positive result suggests infection with Treponema pallidum but does not distinguish between treated and untreated infections. Therefore, the results of a nontreponemal assay, such as rapid plasma reagin, are needed to provide information on a patient's disease state and history of therapy. Nontreponemal tests lack sensitivity in late stage of infection and screening with these tests alone may yield false positive reactions in various acute and chronic conditions in the absence of syphilis (biological false positive reactions).

Correlate Clinically.

Result rechecked and verified for abnormal cases Laboratory is NABL Accredited

*** End Of Report ***

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DR. RUTURAJ MANIKLAL KOLHAPURE MD, MICROBIOLOGIST