

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				
Sample ID : A0287568	Name : Mr. RMD GHOUSE			
Reg. No : 0312406250025	Age/Gender : 63 Years/Male			
SPP Code : SPL-CV-172	Referred by : Dr. SELF			
OSTICS Collected On : 25-Jun-2024 02:17 PM	Referring Customer : V CARE MEDICAL DIAGNOSTICS			
Received On : 25-Jun-2024 04:02 PM	Primary Sample : Whole Blood			
Reported On : 25-Jun-2024 05:29 PM	Sample Tested In : Whole Blood EDTA			
gar, Tarnaka Report Status : Final Report	Client Address : Kimtee colony ,Gokul Nagar,Tarnaka			
Reg. No : 0312406250025 SPP Code : SPL-CV-172 OSTICS Collected On : 25-Jun-2024 02:17 PM Received On : 25-Jun-2024 04:02 PM Reported On : 25-Jun-2024 05:29 PM	Age/Gender: 63 Years/MaleReferred by: Dr. SELFReferring Customer: V CARE MEDICAL DIAGNOSTICSPrimary Sample: Whole BloodSample Tested In: Whole Blood EDTA			

HAEMATOLOGY				
Test Name	Results	Units	Ref. Range	Method
Complete Blood Picture(CBP)				
Haemoglobin (Hb)	6.0	g/dL	13-17	Cynmeth Method
Haematocrit (HCT)	19.5	%	40-50	Calculated
RBC Count	2.55	10^12/L	4.5-5.5	Cell Impedence
MCV	76	fl	81-101	Calculated
MCH	23.3	pg	27-32	Calculated
MCHC	30.6	g/dL	32.5-34.5	Calculated
RDW-CV	20.3	%	11.6-14.0	Calculated
Platelet Count (PLT)	489	10^9/L	150-410	Cell Impedance
Total WBC Count	13.2	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	78	%	40-70	Cell Impedence
Lymphocytes	17	%	20-40	Cell Impedence
Monocytes	03	%	2-10	Microscopy
Eosinophils	02	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	10.3	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.24	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	0.4	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.26	10^9/L	0.02-0.5	Calculated
Absolute Basophil ICount	0.00	10^9/L	0.0-0.3	Calculated
Morphology	•		Microcytic hypochromic anemia	PAPs Staining

with Neutrophilic Leucocytosis and Thrombocytosis



Swarnabala.M DR.SWARNA BALA **MD PATHOLOGY**

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INFOSYSTEMS PVT. LTD.

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REPORT				
Name	: Mr. RMD GHOUSE	Sample ID	: A0287570	
Age/Gender	: 63 Years/Male	Reg. No	: 0312406250025	
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172	
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 25-Jun-2024 02:17 PM	
Primary Sample	: Whole Blood	Received On	: 25-Jun-2024 04:02 PM	
Sample Tested In	: Plasma-NaF(R)	Reported On	: 25-Jun-2024 05:04 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) 95 mg/dL 70-140 Hexokinase (HK) Interpretation of Plasma Glucose based on ADA guidelines 2018 FastingPlasma 2hrsPlasma Diagnosis HbA1c(%) RBS(mg/dL) Glucose(mg/dL) Glucose(mg/dL) 100-125 Prediabetes 140-199 5.7-6.4 NA >=200(with Diabetes > = 200 symptoms) > = 126 > = 6.5 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 *** End Of Report *** Laboratory is NABL Accredited



OCHEMISTRY



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REPORT				
Name	: Mr. RMD GHOUSE	Sample ID	: A0287567	
Age/Gender	: 63 Years/Male	Reg. No	: 0312406250025	
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172	
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 25-Jun-2024 02:17 PM	
Primary Sample	: Whole Blood	Received On	: 25-Jun-2024 04:02 PM	
Sample Tested In	: Serum	Reported On	: 25-Jun-2024 06:27 PM	
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	0.78	mg/dL	0.70-1.30	Sarcosine oxidase
Urea-Serum	32.9	mg/dL	17.1-49.2	Glutamate dehydrogenase+Calculation
Blood Urea Nitrogen (BUN)	15.37	mg/dL	8.0-23.0	Calculated
BUN / Creatinine Ratio	19.71		6 - 22	
Uric Acid	9.7	mg/dL	3.5-7.2	Uricase
Sodium	139	mmol/L	136-145	ISE Direct
Potassium	3.7	mmol/L	3.5-5.1	ISE Direct
Chloride	100	mmol/L	98-108	ISE Direct

• 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.

Result rechecked and verified for abnormal cases

*** End Of Report ***

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Interpretation







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CLINICAL BIOCHEMISTRY Test Name Results Units Ref. Range Method Liver Function Test (LFT) Bilirubin(Total) 0.8 mg/dL 0.2-1.2 Diazo Bilirubin (Direct) 0.0 - 0.2 Diazo 0.4 mg/dL Bilirubin (Indirect) 0.4 mg/dL 0.2-1.0 Calculated IFCC with out (P-5-P) Aspartate Aminotransferase (AST/SGOT) U/L 5-48 59 Alanine Aminotransferase (ALT/SGPT) 17 U/L 0-55 IFCC with out (P-5-P) Kinetic PNPP-AMP Alkaline Phosphatase(ALP) U/L 30-120 243 Gamma Glutamyl Transpeptidase (GGTP) 140 U/L 15-85 IFCC Protein - Total 5.9 g/dL 6.4-8.2 Biuret 3.4-5.0 Bromocresol Green (BCG) Albumin 2.8 g/dL Globulin 2.0-4.2 Calculated 3.1 g/dL A:G Ratio Calculated 0.9 % 0.8-2.0 SGOT/SGPT Ratio 3.47

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.

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*** End Of Report ***





OCHEMISTRY

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