

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

: A0590380

: SPL-CV-172

: Final Report

: 0312408010021

: 01-Aug-2024 03:00 PM

: 01-Aug-2024 06:27 PM

### REPORT

Sample ID

SPP Code

Collected On

Report Status

Reg. No

Name : Mrs. E S JYOTHI ARUNA KUMARI

Age/Gender : 51 Years/Female

Referred by : Dr. SELF

Referring Customer: V CARE MEDICAL DIAGNOSTICS

Primary Sample : Whole Blood Received On

Sample Tested In : Serum Reported On : 01-Aug-2024 07:40 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka

### **CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Ref. Range	Method

#### C-Reactive protein-(CRP) 60.14 mg/L Upto:6.0 Immunoturbidimetry

#### **Interpretation:**

C-reactive protein (CRP) is produced by the liver. The level of CRP rises when there is inflammation throughout the body. It is one of a group of proteins called acute phase reactants that go up in response to inflammation. The levels of acute phase reactants increase in response to certain inflammatory proteins called cytokines. These proteins are produced by white blood cells during inflammation.

A positive test means you have inflammation in the body. This may be due to a variety of conditions, including:

- Connective tissue disease
- Heart attack
- Infection
- Inflammatory bowel disease (IBD)
- Lupus
- Pneumonia
- Rheumatoid arthritis

Result rechecked and verified for abnormal cases

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







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## REPORT

Name : Mrs. E S JYOTHI ARUNA KUMARI Sample ID : A0590386

Age/Gender : 51 Years/Female Reg. No : 0312408010021

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 01-Aug-2024 03:00 PM

Primary Sample : Whole Blood Received On : 01-Aug-2024 06:27 PM Sample Tested In : Whole Blood EDTA Reported On : 01-Aug-2024 06:46 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

HAEMATOLOGY				
Test Name	Results	Units	Ref. Range	Method
COMPLETE BLOOD COUNT (CBC)				
Haemoglobin (Hb)	10.2	g/dL	12-15	Cynmeth Method
RBC Count	4.11	10^12/L	3.8-4.8	Cell Impedence
Haematocrit (HCT)	33.5	%	40-50	Calculated
MCV	82	fl	81-101	Calculated
MCH	24.7	pg	27-32	Calculated
MCHC	30.3	g/dL	32.5-34.5	Calculated
RDW-CV	15.4	%	11.6-14.0	Calculated
Platelet Count (PLT)	418	10^9/L	150-410	Cell Impedance
Total WBC Count	8.6	10^9/L	4.0-10.0	Impedance
Neutrophils	58	%	40-70	Cell Impedence
Absolute Neutrophils Count	4.99	10^9/L	2.0-7.0	Impedence
Lymphocytes	33	%	20-40	Cell Impedence
Absolute Lymphocyte Count	2.84	10^9/L	1.0-3.0	Impedence
Monocytes	06	%	2-10	Microscopy
Absolute Monocyte Count	0.52	10^9/L	0.2-1.0	Calculated
Eosinophils	03	%	1-6	Microscopy
Absolute Eosinophils Count	0.26	10^9/L	0.02-0.5	Calculated
Basophils	00	%	1-2	Microscopy
Absolute Basophil ICount	0.00	10^9/L	0.0-0.3	Calculated
Morphology				
WBC	Within Nor	mal Limits		
RBC	Anisocytos	is with Microcy	tic hypochromic anemia	
Platelets	Thrombocytosis Microscopy			







Swarnabala - M DR.SWARNA BALA MD PATHOLOGY



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## REPORT

Name : Mrs. E S JYOTHI ARUNA KUMARI Sample ID : A0590385, A0590393, A05903

 Age/Gender
 : 51 Years/Female
 Reg. No
 : 0312408010021

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 01-Aug-2024 03:00 PM Primary Sample : Whole Blood Received On : 01-Aug-2024 06:27 PM

Sample Tested In : Plasma-NaF(F), Plasma-NaF(PP), Reported On : 01-Aug-2024 07:40 PM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

### **CLINICAL BIOCHEMISTRY**

Test Name Results Units Ref. Range Method

Glucose Fasting (F) 133 mg/dL 70-100 Hexokinase

Interpretation of Plasma Glucose based on ADA guidelines 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: Diabetes care 2018:41(suppl.1):S13-S27

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

180

mg/dL

70-140

Hexokinase (HK)

Interpretation of Plasma Glucose based on ADA guidelines 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: 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.</li>
- If level after 2 hours = >200 mg/dL diabetes mellitus is confirmed.
- · Advise HbA1c for further evaluation.

Creatinine - Serum 0.66 mg/dL 0.60-1.10 Jaffes Kinetic

#### Interpretation:

- This test is done to see how well your kidneys are working. Creatinine is a chemical waste product of creatine. Creatine is a chemical made by the body and is used to supply energy mainly to muscles.
- A higher than normal level may be due to:
- Renal diseases and insufficiency with decreased glomerular filtration, urinary tract obstruction, reduced renal blood flow including congestive heart failure, shock, and dehydration; rhabdomyolysis can cause elevated serum creatinine.
- A lower than normal level may be due to:
- Small stature, debilitation, decreased muscle mass; some complex cases of severe hepatic disease can cause low serum creatinine levels. In advanced liver disease, low creatinine may result
  from decreased hepatic production of creatinine and inadequate dietary protein as well as reduced musle mass.

Result rechecked and verified for abnormal cases

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

Laboratory is NABL Accredited







DR. VAISHNAVI MD BIOCHEMISTRY



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Age/Gender : 51 Years/Female

Referred by : Dr. SELF

Referring Customer : V CARE MEDICAL DIAGNOSTICS

Primary Sample : Whole Blood

Sample Tested In : Serum

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka

Sample ID : A0590380

Reg. No : 0312408010021

SPP Code : SPL-CV-172

Collected On : 01-Aug-2024 03:00 PM

Received On : 01-Aug-2024 06:27 PM

Reported On : 01-Aug-2024 07:40 PM

Report Status : Final Report

CLINICAL BIOCHEMISTRY					
Test Name	Results	Units	Ref. Range	Method	
Lipid Profile					
Cholesterol Total	175	mg/dL	< 200	CHOD-POD	
Triglycerides-TGL	144	mg/dL	< 150	GPO-POD	
Cholesterol-HDL	42	mg/dL	40-60	Direct	
Cholesterol-LDL	104.2	mg/dL	< 100	Calculated	
Cholesterol- VLDL	28.8	mg/dL	7-35	Calculated	
Non HDL Cholesterol	133	mg/dL	< 130	Calculated	
Cholesterol Total /HDL Ratio	4.17	%	0-4.0	Calculated	
HDL / LDL Ratio	0.40				

The National Cholesterol Education program's third Adult Treatment Panel (ATPIII) has issued its recommendations on evaluating and treating lipid discorders for primary and secondary.

0 - 3.5

NCEP Recommendations	Cholesterol Total in (mg/dL)	Triglycerides in (mg/dL)	HDL Cholesterol (mg/dL)	LDL Cholesterol in (mg/dL)	Non HDL Cholesterol in (mg/dL)
Optimal	Adult: < 200 Children: < 170	< 150	40-59	Adult:<100 Children: <110	<130
Above Optimal				100-129	130 - 159
Borderline High	Adult: 200-239 Children:171-199	150-199		Adult: 130-159 Children: 111-129	160 - 189
High	Adult:>or=240 Children:>or=200	200-499	≥ 60	Adult:160-189 Children:>or=130	190 - 219
Very High		>or=500		Adult: >or=190	>=220

Note: LDL cholesterol cannot be calculated if triglyceride is >400 mg/dL (Friedewald's formula). Calculated values not provided for LDL and VLDL

2.48

Correlate Clinically.

LDL/HDL Ratio

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







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Calculated