

REPORT

Name	: Mr. SUNDER	Sample ID	: A0590895
Age/Gender	: 55 Years/Male	Reg. No	: 0312408160017
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 16-Aug-2024 12:04 PM
Primary Sample	: Whole Blood	Received On	: 16-Aug-2024 12:47 PM
Sample Tested In	: Serum	Reported On	: 16-Aug-2024 02:57 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Lipid Profile				
Cholesterol Total	144	mg/dL	< 200	CHOD-POD
Triglycerides-TGL	148	mg/dL	< 150	GPO-POD
Cholesterol-HDL	41	mg/dL	40-60	Direct
Cholesterol-LDL	73.4	mg/dL	< 100	Calculated
Cholesterol- VLDL	29.6	mg/dL	7-35	Calculated
Non HDL Cholesterol	103	mg/dL	< 130	Calculated
Cholesterol Total /HDL Ratio	3.51	%	0-4.0	Calculated
HDL / LDL Ratio	0.56			
LDL/HDL Ratio	1.79	%	0-3.5	Calculated

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

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

*** End Of Report ***

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MD BIOCHEMISTRY

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Test Name	Results	Units	Ref. Range	Method
Kidney Profile-KFT				
Creatinine -Serum	0.82	mg/dL	0.70-1.30	Jaffes Kinetic
Urea-Serum	26.2	mg/dL	12.8-42.8	Calculated
Blood Urea Nitrogen (BUN)	12.25	mg/dL	7.0-18.0	Calculated
BUN / Creatinine Ratio	14.94		6 - 22	
Uric Acid	6.59	mg/dL	3.5-7.2	Uricase
Sodium	139	mmol/L	135-150	ISE Direct
Potassium	4.1	mmol/L	3.5-5.0	ISE Direct
Chloride	102	mmol/L	94-110	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.

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Test Name	Results	Units	Ref. Range	Method
Liver Function Test (LFT)				
Bilirubin(Total)	0.3	mg/dL	0.1-1.2	Diazo
Bilirubin (Direct)	0.1	mg/dL	0.0 - 0.3	Diazo
Bilirubin (Indirect)	0.2	mg/dL	0.2-1.0	Calculated
Aspartate Aminotransferase (AST/SGOT)	27	U/L	15-37	IFCC UV Assay
Alanine Aminotransferase (ALT/SGPT)	41	U/L	0-55	IFCC with out (P-5-P)
Alkaline Phosphatase(ALP)	83	U/L	30-120	Kinetic PNPP-AMP
Gamma Glutamyl Transpeptidase (GGTP)	164	U/L	15-85	IFCC
Protein - Total	7.4	g/dL	6.4-8.2	Biuret
Albumin	4.3	g/dL	3.4-5.0	Bromocresol Green (BCG)
Globulin	3.1	g/dL	2.0-4.2	Calculated
A:G Ratio	1.39	%	0.8-2.0	Calculated
SGOT/SGPT Ratio	0.66			

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.

Result rechecked and verified for abnormal cases

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