REPORT

Name	: Mrs. SUMAYYA ARIFA	Sample ID	: A0590966
Age/Gender	: 28 Years/Female	Reg. No	: 0312408200011
Referred by	: Dr. SUNITA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Aug-2024 10:52 AM
Primary Sample	:	Received On	: 20-Aug-2024 01:12 PM
Sample Tested In	: Urine	Reported On	: 20-Aug-2024 04:29 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		Negative	Automated Strip Test

*** End Of Report ***

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MD BIOCHEMISTRY

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

REPORT

Name	: Mrs. SUMAYYA ARIFA	Sample ID	: A0590963
Age/Gender	: 28 Years/Female	Reg. No	: 0312408200011
Referred by	: Dr. SUNITA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Aug-2024 10:52 AM
Primary Sample	: Whole Blood	Received On	: 20-Aug-2024 01:12 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 20-Aug-2024 01:57 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

HAEMATOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Blood Picture(CBP)				
Haemoglobin (Hb)	**11.1**	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	**34.5**	%	40-50	Calculated
RBC Count	**4.85**	10^12/L	3.8-4.8	Cell Impedence
MCV	**71**	fl	81-101	Calculated
MCH	**22.8**	pg	27-32	Calculated
MCHC	**32.1**	g/dL	32.5-34.5	Calculated
RDW-CV	**16.6**	%	11.6-14.0	Calculated
Platelet Count (PLT)	307	10^9/L	150-410	Cell Impedance
Total WBC Count	9.5	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	61	%	40-70	Cell Impedence
Lymphocytes	32	%	20-40	Cell Impedence
Monocytes	05	%	2-10	Microscopy
Eosinophils	02	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	5.8	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	**3.04**	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	0.48	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.19	10^9/L	0.02-0.5	Calculated
Absolute Basophil lCount	0.00	10^9/L	0.0-0.3	Calculated
Morphology	Anisocytosis with Normocytic normochromic			PAPs Staining

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DR.SWARNA BALA
MD PATHOLOGY

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

— **REPORT** —

Name	: Mrs. SUMAYYA ARIFA	Sample ID	: A0590964, A0590965
Age/Gender	: 28 Years/Female	Reg. No	: 0312408200011
Referred by	: Dr. SUNITA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Aug-2024 10:52 AM
Primary Sample	: Whole Blood	Received On	: 20-Aug-2024 01:09 PM
Sample Tested In	: Plasma-NaF(F), Plasma-NaF(PP)	Reported On	: 20-Aug-2024 02:39 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

GLUCOSE POST PRANDIAL (PP)

Test Name	Results	Units	Ref. Range	Method
Glucose Fasting (F)	82	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

Test Name	Results	Units	Ref. Range	Method
Glucose Post Prandial (PP)	92	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.
- If level after 2 hours = >200 mg/dL diabetes mellitus is confirmed.
- Advise HbA1c for further evaluation.

Result rechecked and verified for abnormal cases

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ITDOSE INFOSYSTEMS PVT. LTD.

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ICMR Reg .No. SAPALAPVLHT (Covid -19)

REPORT

Name	: Mrs. SUMAYYA ARIFA	Sample ID	: A0590962
Age/Gender	: 28 Years/Female	Reg. No	: 0312408200011
Referred by	: Dr. SUNITA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Aug-2024 10:52 AM
Primary Sample	: Whole Blood	Received On	: 20-Aug-2024 01:12 PM
Sample Tested In	: Serum	Reported On	: 20-Aug-2024 03:15 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Liver Function Test (LFT)				
Bilirubin(Total)	0.4	mg/dL	0.3-1.2	Diazo
Bilirubin (Direct)	0.1	mg/dL	0.0 - 0.3	Diazo
Bilirubin (Indirect)	0.3	mg/dL	0.2-1.0	Calculated
Aspartate Aminotransferase (AST/SGOT)	22	U/L	15-37	IFCC UV Assay
Alanine Aminotransferase (ALT/SGPT)	16	U/L	0-55	IFCC with out (P-5-P)
Alkaline Phosphatase(ALP)	62	U/L	30-120	Kinetic PNPP-AMP
Gamma Glutamyl Transpeptidase (GGTP)	14	U/L	5-55	IFCC
Protein - Total	6.8	g/dL	6.4-8.2	Biuret
Albumin	3.5	g/dL	3.4-5.0	Bromocresol Green (BCG)
Globulin	3.3	g/dL	2.0-4.2	Calculated
A:G Ratio	1.06	%	0.8-2.0	Calculated
SGOT/SGPT Ratio	1.38			

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.
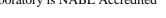
Gamma-glutamyl Transpeptidase (GGTP) is an enzyme that occurs primarily in the liver, but it is also present in the kidneys, pancreas, gallbladder, and spleen. Higher than normal concentrations of GGTP in the blood may indicate alcohol-related liver damage. Elevated GGTP levels can also increase the 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.

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REPORT

Name	: Mrs. SUMAYYA ARIFA	Sample ID	: A0590962
Age/Gender	: 28 Years/Female	Reg. No	: 0312408200011
Referred by	: Dr. SUNITA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Aug-2024 10:52 AM
Primary Sample	: Whole Blood	Received On	: 20-Aug-2024 01:12 PM
Sample Tested In	: Serum	Reported On	: 20-Aug-2024 02:47 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Thyroid Profile-I(TFT)				
T3 (Triiodothyronine)	81.73	ng/dL	70-204	CLIA
T4 (Thyroxine)	5.8	µg/dL	3.2-12.6	CLIA
TSH -Thyroid Stimulating Hormone	12.34	µIU/mL	0.35-5.5	CLIA

Pregnancy & Cord Blood

T3 (Triiodothyronine):	T4 (Thyroxine)	TSH (Thyroid Stimulating Hormone)
First Trimester : 81-190 ng/dL	15 to 40 weeks:9.1-14.0 µg/dL	First Trimester : 0.24-2.99 µIU/mL
Second&Third Trimester :100-260 ng/dL		Second Trimester: 0.46-2.95 µIU/mL
		Third Trimester : 0.43-2.78 µIU/mL
Cord Blood: 30-70 ng/dL	Cord Blood: 7.4-13.0 µg/dL	Cord Blood: : 2.3-13.2 µIU/mL

Interpretation:

- Thyroid gland is a butterfly-shaped endocrine gland that is normally located in the lower front of the neck. The thyroid's job is to make thyroid hormones, which are secreted into the blood and then carried to every tissue in the body. Thyroid hormones help the body use energy, stay warm and keep the brain, heart, muscles, and other organs working as they should.
- Thyroid produces two major hormones: triiodothyronine (T3) and thyroxine (T4). If thyroid gland doesn't produce enough of these hormones, you may experience symptoms such as weight gain, lack of energy, and depression. This condition is called hypothyroidism.
- Thyroid gland produces too many hormones, you may experience weight loss, high levels of anxiety, tremors, and a sense of being on a high. This is called hyperthyroidism.
- TSH interacts with specific cell receptors on the thyroid cell surface and exerts two main actions. The first action is to stimulate cell reproduction and hypertrophy. Secondly, TSH stimulates the thyroid gland to synthesize and secrete T3 and T4.
- The ability to quantitate circulating levels of TSH is important in evaluating thyroid function. It is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low.

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Name	: Mrs. SUMAYYA ARIFA	Sample ID	: A0590966
Age/Gender	: 28 Years/Female	Reg. No	: 0312408200011
Referred by	: Dr. SUNITA	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 20-Aug-2024 10:52 AM
Primary Sample	:	Received On	: 20-Aug-2024 01:09 PM
Sample Tested In	: Urine	Reported On	: 20-Aug-2024 02:46 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL PATHOLOGY

Test Name	Results	Units	Ref. Range	Method
Complete Urine Analysis (CUE)				
Physical Examination				
Colour	Pale Yellow		Straw to light amber	
Appearance	HAZY		Clear	
Chemical Examination				
Glucose	Negative		Negative	Strip Reflectance
Protein	(+)		Negative	Strip Reflectance
Bilirubin (Bile)	Negative		Negative	Strip Reflectance
Urobilinogen	Negative		Negative	Ehrlichs reagent
Ketone Bodies	Negative		Negative	Strip Reflectance
Specific Gravity	1.030		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.

Correlate Clinically.

Result rechecked and verified for abnormal cases
Laboratory is NABL Accredited

*** End Of Report ***

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Swarnabala.M
DR.SWARNA BALA
MD PATHOLOGY