SagePath
Excellence In Health Care

REPORT

Name	: Mrs. A SATHYAVATHI	Sample ID	: A0933544
Age/Gender	: 80 Years/Female	Reg. No	: 0312408260021
Referred by	: Dr. K KRISHNA RAO (MBBS,FCGP,DNB(osm))	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 26-Aug-2024 01:42 PM
Primary Sample	: Whole Blood	Received On	: 26-Aug-2024 04:12 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 26-Aug-2024 05:29 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)	**8.0**	g/dL	12-15	Cynmeth Method
Haematocrit (HCT)	**27.2**	%	40-50	Calculated
RBC Count	**3.17**	10^12/L	3.8-4.8	Cell Impedence
MCV	86	fl	81-101	Calculated
MCH	27.3	pg	27-32	Calculated
MCHC	32.8	g/dL	32.5-34.5	Calculated
RDW-CV	**14.2**	%	11.6-14.0	Calculated
Platelet Count (PLT)	218	10^9/L	150-410	Cell Impedance
Total WBC Count	5.9	10^9/L	4.0-10.0	Impedance
Differential Leucocyte Count (DC)				
Neutrophils	50	%	40-70	Cell Impedence
Lymphocytes	40	%	20-40	Cell Impedence
Monocytes	06	%	2-10	Microscopy
Eosinophils	04	%	1-6	Microscopy
Basophils	00	%	1-2	Microscopy
Absolute Neutrophils Count	2.95	10^9/L	2.0-7.0	Impedence
Absolute Lymphocyte Count	2.36	10^9/L	1.0-3.0	Impedence
Absolute Monocyte Count	0.35	10^9/L	0.2-1.0	Calculated
Absolute Eosinophils Count	0.24	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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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 —

Name	: Mrs. A SATHYAVATHI	Sample ID	: A0933541, A0933542
Age/Gender	: 80 Years/Female	Reg. No	: 0312408260021
Referred by	: Dr. K KRISHNA RAO (MBBS,FCGP,DNB(osm))	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 26-Aug-2024 01:42 PM
Primary Sample	: Whole Blood	Received On	: 26-Aug-2024 04:30 PM
Sample Tested In	: Plasma-NaF(R), Serum	Reported On	: 26-Aug-2024 05:28 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Glucose Random (RBS)	70	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

- 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.

Blood Urea Nitrogen (BUN)-Serum

Test Name	Results	Units	Ref. Range	Method
Blood Urea Nitrogen (BUN)	20	mg/dL	8.0-23.0	Calculated
Urea-Serum	42.9	mg/dL	17.1-49.2	Calculated

Interpretation:
BUN stands for blood urea nitrogen. Urea nitrogen is what forms when protein breaks down. The BUN test is often done to check kidney function

- **Higher-than-normal level may be due to:**
- Congestive heart failure
- Excessive protein level in the gastrointestinal tract
- Gastrointestinal bleeding
- Hypovolemia (dehydration)
- Kidney disease, including glomerulonephritis, pyelonephritis, and acute tubular necrosis
- **Lower-than-normal level may be due to:**
- Liver failure
- Low protein diet
- Malnutrition

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DR.VAISHNAVI
MD BIOCHEMISTRY

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ITDOSE INFOSYSTEMS PVT. LTD.

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CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Creatinine -Serum	**1.98**	mg/dL	0.55-1.02	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.

Test Name	Results	Units	Ref. Range	Method
Cholesterol Total	111	mg/dL	< 200	CHOD-POD

Interpretations

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

NCEP Recommendations	Adults:Cholesterol Total (mg/dL)	Children:Cholesterol Total (mg/dL)
Optimal	<200	<170
Borderline High	200-239	171-199
High	>or = 240	>or = 200

The determination of serum Cholesterol is considered to be significant in coronary artery disease. Hyperlipoproteinemias, hypothyroidism, nephrosis, diabetes mellitus and various liver diseases. Hypocholesterolemia (low serum cholesterol) is found in pernicious anemia, hemolytic jaundice, malnutrition, acute infections and hyperthyroidism. Normal cholesterol levels are affected by stress, age, hormonal balance and pregnancy.

Correlate Clinically.

Result rechecked and verified for abnormal cases
Laboratory is NABL Accredited

*** End Of Report ***

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