

REPORT

Name	: Mrs. PRASUNAMBA	Sample ID	: A0933654
Age/Gender	: 74 Years/Female	Reg. No	: 0312408300005
Referred by	: Dr. M RAGAVA CHARY	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 30-Aug-2024 09: 41 AM
Primary Sample	: Whole Blood	Received On	: 30-Aug-2024 10: 49 AM
Sample Tested In	: Serum	Reported On	: 31-Aug-2024 01:00 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
25 Hydroxy Vitamin D2 and D3				
25 Hydroxy VIT D2 Ergocalciferol	1.85	ng/mL	Specific reference range for LCMS Vitamin D2 is not available.	
25 Hydroxy VIT D3 Cholecalciferol	19.74	ng/mL	Specific reference range for LCMS Vitamin D3 is not available.	
25 - Hydroxy Vitamin D	21.59	ng/mL	<20.0-Deficiency 20.0-30.0-Insufficiency 30.0-100.0-Sufficiency >100.0-Potential Intoxication	CLIA

VALUE	CONDITION	INFERENCE
< 10	SEVERE DEFICIENCY	Could be associated with osteomalacia or rickets
10 - 19	MILD DEFICIENCY	May be associated with increased risk of osteoporosis or secondary hyperparathyroidism
20 - 50	OPTIMUM LEVELS	Optimum levels in the healthy population; patients with bone disease may benefit from higher levels within this range
51 - 80	INCREASED Risk of hypercalciuria	Sustained levels >50 ng/mL 25OH-VitD along with prolonged calcium supplementation may lead to hypercalciuria and decreased renal function
>80	TOXICITY POSSIBLE	80 ng/mL is the lowest reported level associated with toxicity in patients without primary hyperparathyroidism who have normal renal function. Most patients with toxicity have levels > 150 ng/mL. Patients with renal failure can have very high 25-OH-VitD levels without any signs of toxicity, as renal conversion to the active hormone 1, 25-OH-VitD is impaired or absent.

These reference ranges represent clinical decision values, based on the 2011 Institute of Medicine report, that apply to males and females of all ages, rather than population-based reference values. Population reference ranges for 25-OH-VitD vary widely depending on ethnic background, age, geographic location of the studied populations, and the sampling season

Method : LCMS



Dr. Vaishnavi
DR. VAISHNAVI
MD BIOCHEMISTRY

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Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 30-Aug-2024 09: 41 AM
Primary Sample	:	Received On	: 30-Aug-2024 10: 49 AM
Sample Tested In	: Urine	Reported On	: 30-Aug-2024 05: 47 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	Clear		Clear	
Chemical Examination				
Glucose	Negative		Negative	Strip Reflectance
Protein	Absent		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)	6.5		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	04-05	/hpf	00-05	Microscopy
R.B.C.	Nil	/hpf	Nil	Microscopic
Epithelial Cells	02-03	/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 ***



Swannabala - M
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