

Name : Mrs. ETWARI DEVI

PID No. : MED210080661

SID No. : 81040194

Age / Sex : 73 Year(s) / Female

Type : OP

Ref. Dr : DR. MANOJ PRATAP  
DUNGUNG

Register On : 24/07/2024 12:23 PM

Collection On : 24/07/2024 12:37 PM

Report On : 27/07/2024 2:56 PM

Printed On : 31/07/2024 11:11 AM

<u>Investigation</u>	<u>Observed Value</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
ESR (Erythrocyte Sedimentation Rate) (Citrate Blood/Automated ESR analyser)	50	mm/hr	< 30
<b><u>Complete Blood Cell Count</u></b>			
RDW (Blood)	14.9	%	12 - 15
Haemoglobin (EDTA Blood/Automated Blood cell Counter)	6.2	g/dL	12.5 - 16.0
Packed Cell Volume(PCV)/Haematocrit (EDTA Blood/Automated Blood cell Counter)	17.5	%	37 - 47
RBC Count (EDTA Blood/Automated Blood cell Counter)	3.42	mill/cu.mm	4.2 - 5.4
Mean Corpuscular Volume(MCV) (EDTA Blood/Automated Blood cell Counter)	72.5	fL	78 - 100
Mean Corpuscular Haemoglobin(MCH) (EDTA Blood/Automated Blood cell Counter)	25.5	pg	27 - 32
Mean Corpuscular Haemoglobin concentration(MCHC) (EDTA Blood/Automated Blood cell Counter)	35.2	g/dL	32 - 36
Platelet Count (EDTA Blood/Automated Blood cell Counter)	1.45	lakh/cu.mm	1.4 - 4.5
Total Leukocyte Count (TC) (EDTA Blood/Automated Blood cell Counter)	4350	cells/cu.mm	4000 - 11000
<b><u>Differential Leucocyte Count</u></b>			
Neutrophils (Blood)	57.6	%	40 - 75
Lymphocytes (Blood)	37.0	%	20 - 45
Eosinophils (Blood)	2.7	%	01 - 06
Monocytes (Blood)	2.7	%	01 - 10
Basophils (Blood/Automated Blood cell Counter)	0.0	%	00 - 02
Calcium (Serum/Arsenazo III)	7.4	mg/dL	8.8 - 10.6
<b><u>Renal Function Test</u></b>			
Urea (Serum/Urease-GLDH/UV)	115	mg/dL	15 - 45
Creatinine (Serum/Jaffe Kinetic)	5.7	mg/dL	0.6 - 1.2

**INTERPRETATION:** Elevated Creatinine values are encountered in increased muscle mass, severe dehydration, Pre-eclampsia, increased ingestion of cooked meat, consuming Protein/ Creatine supplements, Diabetic Ketoacidosis, prolonged fasting, renal dysfunction and drugs such as cefoxitin, cefazolin, ACE inhibitors, angiotensin II receptor antagonists, N-acetylcysteine, chemotherapeutic agent such as flucytosine etc.

Name : Mrs. ETWARI DEVI

PID No. : MED210080661

SID No. : 81040194

Age / Sex : 73 Year(s) / Female

Type : OP

Ref. Dr : DR. MANOJ PRATAP  
DUNGUNG

Register On : 24/07/2024 12:23 PM

Collection On : 24/07/2024 12:37 PM

Report On : 27/07/2024 2:56 PM

Printed On : 31/07/2024 11:11 AM

Uric Acid 9.5 mg/dL 2.6 - 6.0  
(Serum/Uricase/Peroxidase)

**Liver Function Test**

GGT(Gamma Glutamyl Transpeptidase) 78 U/L < 38  
(Serum/IFCC / Kinetic)

Bilirubin(Total) 0.8 mg/dL 0.1 - 1.2  
(Serum/Diazotized Sulfanilic Acid)

Bilirubin(Direct) 0.3 mg/dL 0.0 - 0.3  
(Serum/Diazotized Sulfanilic Acid)

Bilirubin(Indirect) 0.5 mg/dL 0.1 - 1.0  
(Serum/Derived)

Total Protein 7.8 gm/dL 6.0 - 8.0  
(Serum/Biuret)

Albumin 3.4 gm/dL 3.5 - 5.2  
(Serum/Bromocresol green)

Globulin 4.4 gm/dL 2.3 - 3.6  
(Serum/Derived)

A : G Ratio 0.8 1.1 - 2.2  
(Serum/Derived)

SGOT/AST (Aspartate Aminotransferase) 24 U/L 5 - 40  
(Serum/IFCC Kinetic)

SGPT/ALT (Alanine Aminotransferase) 22 U/L 5 - 41  
(Serum/IFCC / Kinetic)

Alkaline Phosphatase (SAP) 531 U/L 53 - 141  
(Serum/PNPP / Kinetic)

**IRON PROFILE**

Iron 139.7 µg/dL 23 - 168  
(Serum/Iron - Ferrozine)

**INTERPRETATION:** INTERPRETATION : Low serum iron values are seen in chronic blood loss, insufficient intake or absorption of iron and increased demand on the body stores. Elevated serum iron values are seen in haemolytic anaemia, increased intake.

Total Iron Binding Capacity (TIBC) 165.7 µg/dL 250 - 425  
(Serum/Fe3+ / Magnesium Hydroxide Carbonate)

**INTERPRETATION:** TIBC is increased in iron deficiency anaemia and in pregnancy. It is lower than normal in infections, malignant disease and renal disease.

Unbound Iron Binding Capacity 26.00 µg/dL 190 - 350

Serum Transferrin 115.99 mg/dL 175 - 320  
(Blood)

**INTERPRETATION:** Transferrin is a direct measure of the iron binding capacity

Transferrin Saturation 84.31 % 20 - 55  
(Serum)

**INTERPRETATION:** Transferrin saturation of less than 16% indicates an inadequate iron supply for erythropoiesis. Elevated transferrin saturation is noted in haemochromatosis.

Ferritin 591.4 ng/mL 10 - 291  
(Serum/Chemiluminescent Microparticle Immunoassay(CMLA))

Name : Mrs. ETWARI DEVI

PID No. : MED210080661

SID No. : 81040194

Age / Sex : 73 Year(s) / Female

Type : OP

Ref. Dr : DR. MANOJ PRATAP  
DUNGUNG

Register On : 24/07/2024 12:23 PM

Collection On : 24/07/2024 12:37 PM

Report On : 27/07/2024 2:56 PM

Printed On : 31/07/2024 11:11 AM

HIV 1&2 - 4th Generation, p24 Ag&Ab combination assay  
(Serum/Chemiluminescent Microparticle Immunoassay(CMIA)) 0.31 S/CO < 1.00 : Non Reactive  
>= 1.00 : Reactive

INTERPRETATION: All Reactive samples should be confirmed by Western blot/ HIV PCR.

HBsAg - Quantitative (Serum/Chemiluminescent Microparticle Immunoassay(CMIA)) 0.23 IU/mL < 1.00 : Non Reactive  
>= 1.00 : Reactive

INTERPRETATION: This is only a screening test. All reactive samples should be tested by a neutralizing confirmatory test.

Anti HCV antibody (Serum/Chemiluminescent Microparticle Immunoassay(CMIA)) 0.44 S/CO < 1.00 : Non Reactive  
>= 1.00 : Reactive

INTERPRETATION: This is only a screening test. All reactive samples should be tested by NAAT confirmatory test.



APPROVED BY

-- End of Report --

