

Patient Name : Ms.SUNITA MISHRA	Visit No : CHA250036094
Age/Gender : 64 Y 5 M 21 D/F	Registration ON : 28/Feb/2025 11:30AM
<b>Lab No : 10133390</b>	Sample Collected ON : 28/Feb/2025 11:36AM
Referred By : Dr.NIRUPAM PRAKASH	Sample Received ON : 28/Feb/2025 12:11PM
Refer Lab/Hosp : CGHS (BILLING)	Report Generated ON : 28/Feb/2025 01:38PM
Doctor Advice : VIT B12,LIPID-PROFILE,URIC ACID,CBC+ESR,KIDNEY FUNCTION TEST - I,LFT,HBA1C (EDTA),PP,FASTING	



Test Name	Result	Unit	Bio. Ref. Range	Method
<b>CBC+ESR (COMPLETE BLOOD COUNT)</b>				
Erythrocyte Sedimentation Rate ESR	<b>30.00</b>		0 - 20	Westergreen



[Checked By]

Print.Date/Time: 28-02-2025 20:30:10

\*Patient Identity Has Not Been Verified. Not For Medicolegal

*Sharma*

DR. NISHANT SHARMA DR. SHADAB Dr. SYED SAIF AHMAD  
PATHOLOGIST PATHOLOGIST MD (MICROBIOLOGY)

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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>HBA1C</b>				
Glycosylated Hemoglobin (HbA1c )	6.5	%	4 - 5.7	HPLC (EDTA)

**NOTE:-**

Glycosylated Hemoglobin Test (HbA1c) is performed in this laboratory by the Gold Standard Reference method, ie: HPLC Technology (High performance Liquid Chromatography D10) from Bio-Rad Laboratories. USA.

**EXPECTED ( RESULT ) RANGE :**

Bio system	Degree of normal
4.0 - 5.7 %	Normal Value (OR) Non Diabetic
5.8 - 6.4 %	Pre Diabetic Stage
> 6.5 %	Diabetic (or) Diabetic stage
6.5 - 7.0 %	Well Controlled Diabet
7.1 - 8.0 %	Unsatisfactory Control
> 8.0 %	Poor Control and needs treatment

**URIC ACID**

Sample Type : SERUM

SERUM URIC ACID	4.4	mg/dL	2.40 - 5.70	Uricase, Colorimetric
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**LIPID-PROFILE**

Cholesterol/HDL Ratio	2.52	Ratio	Calculated
LDL / HDL RATIO	0.93	Ratio	Calculated

Desirable / low risk - 0.5 - 3.0  
Low/ Moderate risk - 3.0 - 6.0  
Elevated / High risk - >6.0  
Desirable / low risk - 0.5 - 3.0  
Low/ Moderate risk - 3.0 - 6.0  
Elevated / High risk - > 6.0



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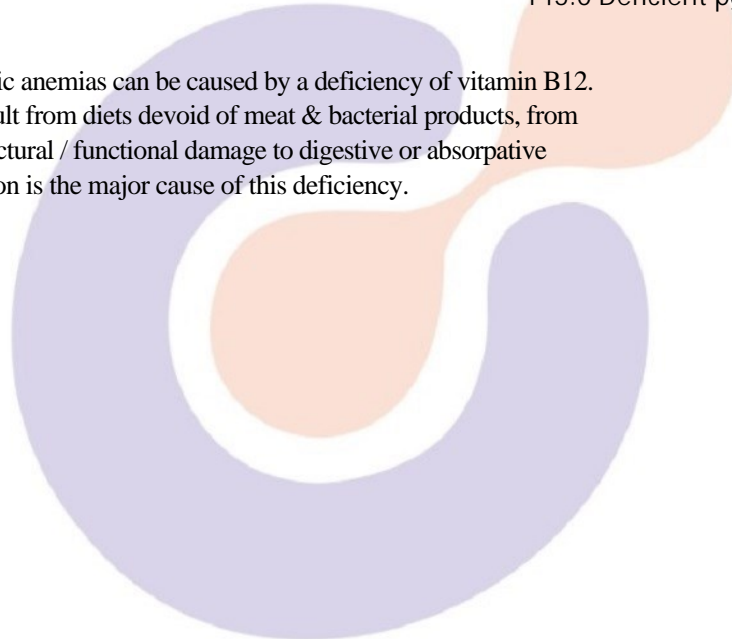
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>VITAMIN B12</b>				
VITAMIN B12	421	pg/mL	180 - 814 Normal 145 - 180 Intermediate 145.0 Deficient pg/ml	CLIA

**Summary :-**

Nutritional & macrocytic anemias can be caused by a deficiency of vitamin B12. This deficiency can result from diets devoid of meat & bacterial products, from alcoholism or from structural / functional damage to digestive or absorptive processes. Malabsorption is the major cause of this deficiency.



**CHARAK**

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<b>CBC+ESR (COMPLETE BLOOD COUNT)</b>				
Hb	12.1	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	4.60	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	39.8	%	36 - 45	Pulse hieght detection
MCV	85.6	fL	80 - 96	calculated
MCH	<b>26.0</b>	pg	27 - 33	Calculated
MCHC	30.4	g/dL	30 - 36	Calculated
RDW	<b>17</b>	%	11 - 15	RBC histogram derivation
RETIC	0.8 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	6650	/cmm	4000 - 10000	Flocytometry
<b>DIFFERENTIAL LEUCOCYTE COUNT</b>				
NEUTROPHIL	72	%	40 - 75	Flowcytometry
LYMPHOCYTE	22	%	20-40	Flowcytometry
EOSINOPHIL	3	%	1 - 6	Flowcytometry
MONOCYTE	3	%	2 - 10	Flowcytometry
BASOPHIL	<b>0</b>	%	00 - 01	Flowcytometry
PLATELET COUNT	164,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	164000	/cmm	150000 - 450000	Microscopy .
Mentzer Index	19			
Peripheral Blood Picture	:			

Red blood cells are normocytic normochromic with anisocytosis+. Platelets are adequate. No immature cells or parasite seen.



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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>FASTING</b>				
Blood Sugar Fasting	<b>140.0</b>	mg/dl	70 - 110	Hexokinase
<b>PP</b>				
Blood Sugar PP	101.0	mg/dl	up to - 170	Hexokinase
<b>NOTE FINDING ARE CHECKED TWICE PLEASE CORRELATE CLINICALLY</b>				
<b>LIVER FUNCTION TEST</b>				
TOTAL BILIRUBIN	0.51	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED ( D. Bilirubin)	0.09	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED ( I.D. Bilirubin)	0.42	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	78.20	U/L	30 - 120	PNPP, AMP Buffer
SGPT	11.0	U/L	5 - 40	UV without P5P
SGOT	28.0	U/L	5 - 40	UV without P5P
<b>LIPID-PROFILE</b>				
TOTAL CHOLESTEROL	152.00	mg/dL	Desirable: <200 mg/dl Borderline-high: 200-239 mg/dl High:>/=240 mg/dl	CHOD-PAP
TRIGLYCERIDES	<b>177.90</b>	mg/dL	Normal: <150 mg/dl Borderline-high:150 - 199 mg/dl High: 200 - 499 mg/dl Very high:>/=500 mg/dl	Serum, Enzymatic, endpoint
H D L CHOLESTEROL	60.40	mg/dL	30-70 mg/dl	CHER-CHOD-PAP
L D L CHOLESTEROL	56.20	mg/dL	Optimal:<100 mg/dl Near Optimal:100 - 129 mg/dl Borderline High: 130 - 159 mg/dl High: 160 - 189 mg/dl Very High:>/= 190 mg/dl	CO-PAP
VLDL	35.40	mg/dL	10 - 40	Calculated



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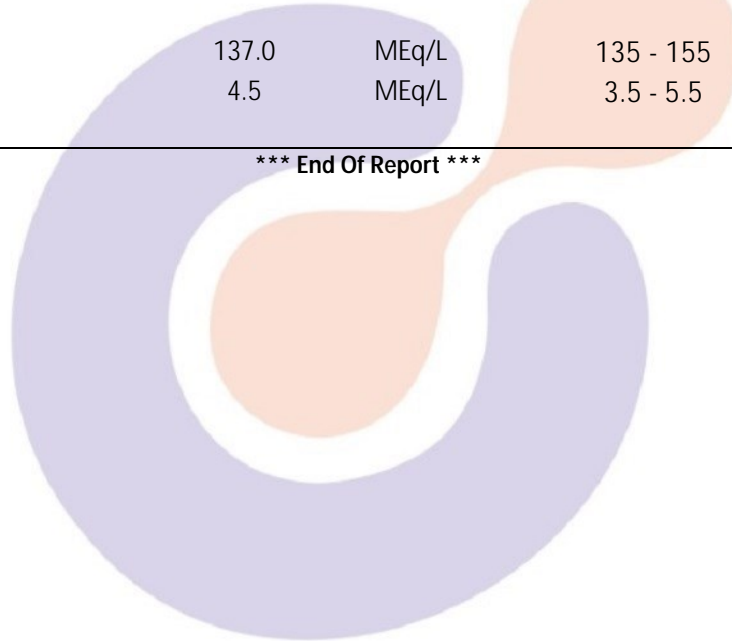
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Test Name	Result	Unit	Bio. Ref. Range	Method
<b>KIDNEY FUNCTION TEST - I</b>				
<b>Sample Type : SERUM</b>				
BLOOD UREA	44.30	mg/dl	15 - 45	Urease, UV, Serum
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
SODIUM Serum	137.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.5	MEq/L	3.5 - 5.5	ISE Direct

\*\*\* End Of Report \*\*\*



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MC-2491

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