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CMO Reg. No. RMEE 2445133 NABL Reg. No. MC-2491 Certificate No. MIS-2023-0218

Patient Name : Mr.JAI KARAN SINGH

Age/Gender : 65 Y/M

Lab No : 10133908

Referred By : Dr.KGMU
Refer Lab/Hosp : CHARAK NA
Doctor Advice : Ammonia

Visit No : CHA250036612

Registration ON : 28/Feb/2025 11:19PM

Sample Collected ON : 28/Feb/2025 11:21PM

Sample Received ON : 01/Mar/2025 12:13AM

Report Generated ON : 01/Mar/2025 09:02AM



| Test Name      | Result | Unit  | Bio. Ref. Range | Method    |
|----------------|--------|-------|-----------------|-----------|
| AMMONIA        |        |       |                 |           |
| Ammonia Plasma | 43.30  | ug/dL | 18 - 86         | Enzymatic |

## **INTERPRETATION:**

P.R.

Ammonia is elevated in the following condition: Liver disease, Urinary tract infection with ditentionand stasis, reye syndrome, inborn errors of metabolism including deficiency of enzymes in the urea cycle, HHH syndrome (hyperammonemia-homocitrullinuria, hyperornithinemia), some normal neonates (usually returning to normal in 48 hours), total parenteral nutrition, ureterosigmoidostomy, and sodium valproate therapy. Ammonia determination is neonates with neurological deterioration, subject with lethargy and/or emesis not explained, and patients with possible encephalppathy. Ammonia measurements are mainly of use in the diagnosis of urea cycle deficiencies (any neonate with unexplained nausea, vomiting or neurological deterioration appearing after first feeding.

Test value may vary depending upon time interval between sample collection and testing

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

CHARAK



[Checked By]

DR. NISHANT SHARMA DR. SHADAB
PATHOLOGIST PATHOLOGIS