

SERUM URIC ACID

P.R.

292/05, Tulsidas Marg, Basement Chowk, Lucknow-226 003

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

Patient Name : Ms. NAZIYA Visit No : CHA250037397

Age/Gender : 34 Y/F Registration ON : 01/Mar/2025 11:03PM Lab No : 10134692 Sample Collected ON : 01/Mar/2025 11:06PM Referred By : Dr.PARVEZ NADEEM : 01/Mar/2025 11:29PM Sample Received ON Refer Lab/Hosp : CHARAK NA Report Generated ON : 02/Mar/2025 09:34AM

Doctor Advice : URIC ACID,TSH,LFT,NA+K+,CREATININE,UREA,CBC (WHOLE BLOOD)

Test Name	Result	Unit	Bio. Ref. Range	Method
URIC ACID				
Sample Type : SERUM				

4.1 mg/dL 2.40 - 5.70 Uricase, Colorimetric





DR. NISHANT SHARMA



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Test Name	Result	Unit	Bio. Ref. Range	Method		
CBC (COMPLETE BLOOD COUNT)						
Hb	9.4	g/dl	12 - 15	Non Cyanide		
R.B.C. COUNT	3.90	mil/cmm	3.8 - 4.8	Electrical		
				Impedence		
PCV	32.0	%	36 - 45	Pulse hieght		
4				detection		
MCV	81.4	fL	80 - 96	calculated		
MCH	23.9	pg	27 - 33	Calculated		
MCHC	29.4	g/dL	30 - 36	Calculated		
RDW	19.8	%	11 - 15	RBC histogram		
				derivation		
RETIC	1.2 %	%	0.5 - 2.5	Microscopy		
TOTAL LEUCOCYTES COUNT	12700	/cmm	4000 - 10000	Flocytrometry		
DIFFERENTIAL LEUCOCYTE COUNT						
NEUTROPHIL	63	%	40 - 75	Flowcytrometry		
LYMPHOCYTES	32	%	25 - 45	Flowcytrometry		
EOSINOPHIL	3	%	1 - 6	Flowcytrometry		
MONOCYTE	2	%	2 - 10	Flowcytrometry		
BASOPHIL	0	%	00 - 01	Flowcytrometry		
PLATELET COUNT	174,000	/cmm	150000 - 450000	Elect Imped		
PLATELET COUNT (MANUAL)	174000	/cmm	150000 - 450000	Microscopy .		
Absolute Neutrophils Count	8,001	/cmm	2000 - 7000	Calculated		
Absolute Lymphocytes Count	4,064	/cmm	1000-3000	Calculated		
Absolute Eosinophils Count	381	/cmm	20-500	Calculated		
Absolute Monocytes Count	254	/cmm	200-1000	Calculated		
Mentzer Index	21					
Peripheral Blood Picture	:					

Red blood cells are normocytic normochromic with microcytic hypochromic. WBCs show leucocytosis. Platelets are adequate. No immature cells or parasite seen.





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Test Name	Result	Unit	Bio. Ref. Range	Method
NA+K+				_
SODIUM Serum	139.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.2	MEq/L	3.5 - 5.5	ISE Direct
BLOOD UREA				
BLOOD UREA	20.90	mg/dl	15 - 45	Urease, UV, Serum
SERUM CREATININE		7		
CREATININE	0.60	mg/dl	0.50 - 1.40	Alkaline picrate-
				kinetic
A				
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.43	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.19	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.24	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	106.00	U/L	30 - 120	PNPP, AMP Buffer
SGPT	21.6	U/L	5 - 40	UV without P5P
SGOT	25.2	U/L	5 - 40	UV without P5P

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	Test Name	Result	Unit	Bio. Ref. Range	Method
TSH					
TSH		1.80	uIU/ml	0.47 - 4.52	ECLIA

Note

- (1) Patients having low T3 & T4 levels but high TSH levels suffer from primary hypothyroidism, cretinism, juvenile mysedema or autoimmune disorders.
- (2) Patients having low T3 & T4 levels but high TSH levels suffer from grave~s disease, toxic adenoma or sub-acute thyroiditis.
- (3) Patients having either low or normal T3 & T4 levels but low TSH values suffer from iodine deficiency or secondary hypothyroidism.
- (4) Patients having high T3 & T4 levels but normal TSH levels may suffer from toxic multinodular goitre. This condition is mostly asymptomatic and may cause transient hyperthyroidism but no persistent symptoms.
- (5) Patient with high or normal T3 & T4 levels and low or normal TSH levels suffer either from T3 toxicosis or T4 Toxicosis respectively.
- (6) In patients with non thyroidal illness abnormal test results are not necessarily indicative of thyroidism but may be due to adaptation to the cacabolic state and may revert to normal when the patient recovers.
- (7) There are many drugs for eg.Glucocorticoids ,dopamine,Lithium,iodides ,oral radiographic dyes,ets.Which may affect the thyroid function tests.
- (8) Generally when total T3& T4 results are indecisive then Free T3 & Free T4 test are recommended for further confirmation along with

(1 Beckman DxI-600 2. ELECTRO-CHEMILUMINISCENCE TECHINIQUE BY ELECSYSYS -E411)

*** End Of Report **

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