

Patient Name : Ms.KANCHAN MAHESHWARI	Visit No : CHA250042817
Age/Gender : 70 Y/F	Registration ON : 10/Mar/2025 10: 28AM
Lab No : 10140112	Sample Collected ON : 10/Mar/2025 10: 29AM
Referred By : Dr.KGMU	Sample Received ON : 10/Mar/2025 10: 45AM
Refer Lab/Hosp : CHARAK NA	Report Generated ON : 10/Mar/2025 12: 47PM
Doctor Advice : CALCIUM,VIT B12,25 OH vit. D,HBA1C (EDTA),PP,FASTING,LFT,CREATININE,UREA,NA+K+,CBC (WHOLE BLOOD)	



Test Name	Result	Unit	Bio. Ref. Range	Method
HBA1C				
Glycosylated Hemoglobin (HbA1c)	6.4	%	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

SERUM CALCIUM				
CALCIUM	10.4	mg/dl	8.8 - 10.2	dapta / arsenazo III

25 OH vit. D				
25 Hydroxy Vitamin D	36.61	ng/ml		ECLIA

Deficiency < 10
Insufficiency 10 - 30
Sufficiency 30 - 100
Toxicity > 100

DONE BY: ELECTROCHEMILUMINESCENCE IMMUNOASSAY(Cobas e 411,Unicel DxI600,vitros ECI)

[Checked By]

Print.Date/Time: 10-03-2025 14:07:31

*Patient Identity Has Not Been Verified. Not For Medicolegal



DR. NISHANT SHARMA
PATHOLOGIST

DR. SHADAB
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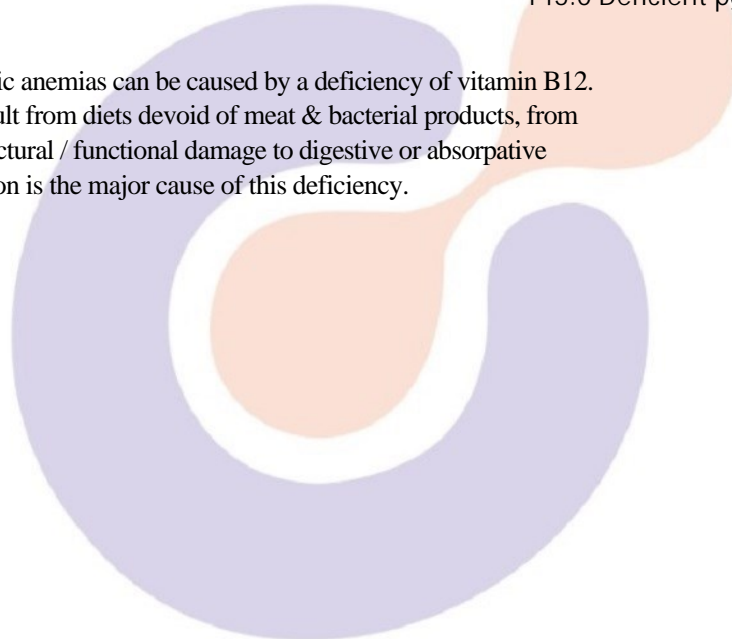
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VITAMIN B12				
VITAMIN B12	110	pg/mL	180 - 814 Normal 145 - 180 Intermediate 145.0 Deficient pg/ml	CLIA

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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Test Name	Result	Unit	Bio. Ref. Range	Method
CBC (COMPLETE BLOOD COUNT)				
Hb	11.2	g/dl	12 - 15	Non Cyanide
R.B.C. COUNT	3.60	mil/cmm	3.8 - 4.8	Electrical Impedence
PCV	35.0	%	36 - 45	Pulse hieght detection
MCV	98.6	fL	80 - 96	calculated
MCH	31.5	pg	27 - 33	Calculated
MCHC	32	g/dL	30 - 36	Calculated
RDW	13.3	%	11 - 15	RBC histogram derivation
RETIC	0.9 %	%	0.5 - 2.5	Microscopy
TOTAL LEUCOCYTES COUNT	5640	/cmm	4000 - 10000	Flocytometry
DIFFERENTIAL LEUCOCYTE COUNT				
NEUTROPHIL	65	%	40 - 75	Flowcytometry
LYMPHOCYTES	27	%	25 - 45	Flowcytometry
EOSINOPHIL	3	%	1 - 6	Flowcytometry
MONOCYTE	5	%	2 - 10	Flowcytometry
BASOPHIL	0	%	00 - 01	Flowcytometry
PLATELET COUNT	283,000	/cmm	150000 - 450000	Elect Imped..
PLATELET COUNT (MANUAL)	283000	/cmm	150000 - 450000	Microscopy .
Absolute Neutrophils Count	3,666	/cmm	2000 - 7000	Calculated
Absolute Lymphocytes Count	1,523	/cmm	1000-3000	Calculated
Absolute Eosinophils Count	169	/cmm	20-500	Calculated
Absolute Monocytes Count	282	/cmm	200-1000	Calculated
Mentzer Index	27			
Peripheral Blood Picture	:			

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



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Test Name	Result	Unit	Bio. Ref. Range	Method
FASTING				
Blood Sugar Fasting	119.9	mg/dl	70 - 110	Hexokinase
PP				
Blood Sugar PP	180.9	mg/dl	up to - 170	Hexokinase
NA+K+				
SODIUM Serum	139.0	MEq/L	135 - 155	ISE Direct
POTASSIUM Serum	4.5	MEq/L	3.5 - 5.5	ISE Direct
BLOOD UREA				
BLOOD UREA	29.10	mg/dl	15 - 45	Urease, UV, Serum
SERUM CREATININE				
CREATININE	0.70	mg/dl	0.50 - 1.40	Alkaline picrate-kinetic
LIVER FUNCTION TEST				
TOTAL BILIRUBIN	0.40	mg/dl	0.4 - 1.1	Diazonium Ion
CONJUGATED (D. Bilirubin)	0.21	mg/dL	0.00-0.30	Diazotization
UNCONJUGATED (I.D. Bilirubin)	0.19	mg/dL	0.1 - 1.0	Calculated
ALK PHOS	82.40	U/L	30 - 120	PNPP, AMP Buffer
SGPT	17.2	U/L	5 - 40	UV without P5P
SGOT	20.0	U/L	5 - 40	UV without P5P

*** End Of Report ***



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Signature