

Visit ID	: ITS1484			Registration : 10/Mar/2023 01:32PM		
UHID/MR No	R No : ITD.000000631			Collected : 10/Mar/2023 01:33PM		
Patient Name	: MR. DEMO			Received : 10/Mar/2023 01:34PM		
Age/Gender	der : 21 Y 3 M 15 D /M			Reported : 10/Mar/2023 01:34PM		
Ref Doctor	: SELF			Status : Final Report		
Client Name	: STANDARD			Client Code : 78		
Client Add : D 159, 1st Floor, Sector 7, No			Barcode No : 10060117			
			DEPARTMENT (	OF BIOCHEMI	STRY	
ALUMINIUM SERU	М					
Sample Type : SERI	UM					
Aluminium Serum 10.		10.00	L	ug/L	Normal Individual < 10	
Medical Remarks: R	Rechecked with two su	ccessive samp	oles. Correlate clin	ically		
Alumi	nium Interpretation		Δs	sociated cor	oditions	
<ul> <li>exposure. It is k alum,dental ama &amp; hence prior ex- mentioned cause testing.</li> <li>1. Serum metal testin subjects can vary cor</li> </ul>	nown to be present in algams, antacids, tobacc xposure to the above es should be considere g is used for the detection isiderably with exposure	die o smoke d before n of recent exp t to the particul	osure or poisoning ar metal present in	with the toxic of the diet and in	element. However, blood metal	levels in healthy
2. It should be note the patient's sympton	ed that low or within ac oms because certain el	ceptable level ements may b	s in Serum do not be sequestered in	always exclud tissues.	de that the element is uninvol	ved in contributing to
3. Lower metal leve that the body has e	els in patients on follow fficiently eliminated the	<b>-up imply that</b> toxic elemen	t <b>the toxic elemen</b> t.	t exposure is	reduced in the patient's imme	diate environment or
Reference -						
1. Sample collection division commission	n guidelines for trace e I on toxicology working	lements in blo party. Pure &	od and urine. Inte Appl. Chem., Vol	ernational unio . 67, Nos 8/9,	on of pure and applied chemis pp. 1575-1608, 1995.	stry clinical chemistry
2. Nutrient & toxic e	elements interpretative	guide, metan	natrix, USA, 2011.			
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			*** End Of Rep	ort ***		

Phose

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