LABORATORY TEST REPORT

Name	: B/O SRAVANTHI			
Sample ID	: A1308296			
Age/Gender	: 6 Days/Male	Reg. No	: 0312412210011	
Referred by	: Dr. C N REDDY (M.B.B.S.,D.C.H)	SPP Code	: SPL-CV-172	
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 21-Dec-2024 11:01 AM	
Primary Sample	: Whole Blood	Received On	: 21-Dec-2024 12:16 PM	
Sample Tested In	: Serum	Reported On	: 21-Dec-2024 01:20 PM	
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report	

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Biological Reference Interval
Bilirubin(Total) (Method: Diazo)	**14.4**	mg/dL	0.1-1.2
Bilirubin (Direct) (Method: Diazo)	**0.8**	mg/dL	0.0 - 0.3
Bilirubin (Indirect) (Method: Calculated)	**13.6**	mg/dL	0.2-1.0

Interpretation:

Bilirubin is a yellowish pigment found in bile, a fluid made by the liver.

Bilirubin is left after these older blood cells are removed. The liver helps break down bilirubin so that it can be removed from the body in the stool.A level of bilirubin in the blood of 2.0 mg/dL can lead to jaundice. Jaundice is a yellow color in the skin, mucus membranes, or eyes.

In newborns, bilirubin level is higher for the first few days of life. Your child's provider must consider the following when deciding whether your baby's bilirubin level is too high:

- How fast the level has been rising
- Whether the baby was born early
- The baby's age

Jaundice can also occur when more red blood cells than normal are broken down. This can be caused by:

- A blood disorder called erythroblastosis fetalis
- A red blood cell disorder called hemolytic anemia
- Transfusion reaction in which red blood cells that were given in a transfusion are destroyed by the person's immune system

Note: DPD(3,5-dichlorophenyldiazonium tetrafluoroborate)

*** End Of Report ***

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DR.VAISHNAVI
MD BIOCHEMISTRY