

Sagepath Labs Pvt. Ltd.

Lab Address:- # Plot No. 564 , 1st floor , Buddhanagar , Near Sai Baba Temple Peerzadiguda Boduppal Hyderabad, Telangana. ICMR Reg .No. SAPALAPVLHT (Covid -19)

LABORATORY TEST REPORT

Name : Mr. CHAITHNYA PRASAD

Sample ID : A1308960

Age/Gender : 29 Years/Male Reg. No : 0312412300032

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 30-Dec-2024 07:17 PM Primary Sample : Whole Blood Received On : 30-Dec-2024 11:09 PM

Sample Tested In : Whole Blood EDTA Reported On : 30-Dec-2024 11:23 PM

Client Address : Kimtee colony , Gokul Nagar, Tarnaka Report Status : Final Report

HAEMATOLOGY					
Test Name	Results	Units	Biological Reference Interval		
Complete Blood Picture(CBP)					
Haemoglobin (Hb) (Method: Cymreth Method)	16.3	g/dL	13-17		
Haematocrit (HCT)	<u>52.0</u>	%	40-50		
RBC Count	5.35	10^12/L	4.5-5.5		
(Method: Cell Impedence) MCV (Method: Calculated)	99	fl	81-101		
MCH (Method: Calculated)	30.5	pg	27-32		
MCHC (Method: Calculated)	32.5	g/dL	32.5-34.5		
RDW-CV (Method: Calculated)	12.7	%	11.6-14.0		
Platelet Count (PLT) (Method: Cell Impedance)	323	10^9/L	150-410		
Total WBC Count (Method: Impedance)	4.9	10^9/L	4.0-10.0		
<u>Differential Leucocyte Count (DC)</u>					
Neutrophils (Method: Cell Impedence)	62	%	40-70		
Lymphocytes (Method: Cell Impedence)	30	%	20-40		
Monocytes (Method: Microscopy)	06	%	2-10		
S Eosinophils (Method: Microscopy)	02	%	1-6		
Basophils (Method: Microscopy)	00	%	1-2		
Absolute Neutrophils Count (Method: Impedence)	3.04	10^9/L	2.0-7.0		
Absolute Lymphocyte Count (Method: Impedence)	1.47	10^9/L	1.0-3.0		
Mbsolute Monocyte Count (Method: Calculated)	0.29	10^9/L	0.2-1.0		
Absolute Eosinophils Count (Method: Calculated)	0.1	10^9/L	0.02-0.5		
Absolute Basophil ICount (Method: Calculated)	0.00	10^9/L	0.0-0.3		
Morphology (Method: PAPs Staining)	Normocytic normochromic				
	*** End Of Denout ***				

*** End Of Report ***









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LABORATORY TEST REPORT

Name : Mr. CHAITHNYA PRASAD

Sample ID : A1308959

Age/Gender : 29 Years/Male Reg. No : 0312412300032

Referred by : Dr. SELF SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 30-Dec-2024 07:17 PM
Primary Sample : Whole Blood Received On : 30-Dec-2024 11:09 PM

Sample Tested In : Serum Reported On : 31-Dec-2024 07:38 AM

Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

CLINICAL BIOCHEMISTRY				
Test Name	Results	Units	Biological Reference Interval	
Liver Function Test (LFT)				
Bilirubin(Total)	<u>10.49</u>	mg/dL	0.1-1.2	
Bilirubin (Direct)	<u>8.92</u>	mg/dL	0.0 - 0.3	
Bilirubin (Indirect) (Method: Calculated)	<u>1.57</u>	mg/dL	0.2-1.0	
Aspartate Aminotransferase (AST/SGOT)	<u>305.1</u>	U/L	15-37	
Alanine Aminotransferase (ALT/SGPT)	<u>399.0</u>	U/L	0-55	
Alkaline Phosphatase(ALP) (Method: Kinetic PNPP-AMP)	119.5	U/L	30-120	
Gamma Glutamyl Transpeptidase (GGTP)	<u>165.8</u>	U/L	15-85	
Protein - Total (Method: Biuret)	7.48	g/dL	6.4-8.2	
Method: Bromocresol Green (BCG))	4.3	g/dL	3.4-5.0	
Globulin (Method: Calculated)	3.18	g/dL	2.0-4.2	
A:G Ratio (Method: Calculated)	1.35	Ratio	0.8-2.0	
SGOT/SGPT Ratio (Method: Calculated)	0.76	Ratio	<1.0	

Alanine Aminotransferase(ALT) is an enzyme found in liver and kidneys cells. ALT helps create energy for liver cells. Damaged liver cells release ALT into the bloodstream, which can elevate ALT levels in the blood.

Aspartate Aminotransferase (AST) is an enzyme in the liver and muscles that helps metabolizes amino acids. Similarly to ALT, elevated AST levels may be a sign of liver damage or liver disease.

Alkaline phosphate (ALP) is an enzyme present in the blood. ALP contributes to numerous vital bodily functions, such as supplying nutrients to the liver, promoting bone growth, and metabolizing fat in the intestines.

Gamma-glutamyl Transpeptidase (GGTP) is an enzyme that occurs primarily in the liver, but it is also present in the kidneys, pancreas, gallbladder, and spleen. Higher than normal concentrations of GGTP in the blood may indicate alcohol-related liver damage. Elevated GGTP levels can also increase the risk of developing certain types of cancer.

Bilirubin is a waste product that forms when the liver breaks down red blood cells. Bilirubin exits the body as bile in stool. High levels of bilirubin can cause jaundice - a condition in which the skin and whites of the eyes turn yellow- and may indicate liver damage.

Albumin is a protein that the liver produces. The liver releases albumin into the bloodstream, where it helps fight infections and transport vitamins, hormones, and enzymes throughout the body. Liver damage can cause abnormally low albumin levels.

*** End Of Report ***







