










**LABORATORY TEST REPORT**

Name	: Mr. ABHISHEK		
Sample ID	: A1841625		
Age/Gender	: 52 Years/Male	Reg. No	: 0312503040015
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 04-Mar-2025 11:18 AM
Primary Sample	: Whole Blood	Received On	: 04-Mar-2025 01:00 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 04-Mar-2025 01:48 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report












**HAEMATOLOGY**

Test Name	Results	Units	Biological Reference Interval
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**Complete Blood Picture(CBP)**

 <b>Haemoglobin (Hb)</b> (Method: Cymeth Method)	<b>9.6</b>	g/dL	13-17
 <b>Haematocrit (HCT)</b> (Method: Calculated)	<b>28.7</b>	%	40-50
 <b>RBC Count</b> (Method: Cell Impedance)	<b>3.07</b>	10 <sup>12</sup> /L	4.5-5.5
 <b>MCV</b> (Method: Calculated)	<b>94</b>	fl	81-101
 <b>MCH</b> (Method: Calculated)	<b>31.3</b>	pg	27-32
 <b>MCHC</b> (Method: Calculated)	<b>33.5</b>	g/dL	32.5-34.5
 <b>RDW-CV</b> (Method: Calculated)	<b>17.7</b>	%	11.6-14.0
 <b>Platelet Count (PLT)</b> (Method: Cell Impedance)	<b>249</b>	10 <sup>9</sup> /L	150-410
 <b>Total WBC Count</b> (Method: Impedance)	<b>7.6</b>	10 <sup>9</sup> /L	4.0-10.0

**Differential Leucocyte Count (DC)**

 <b>Neutrophils</b> (Method: Cell Impedance)	<b>79</b>	%	40-70
 <b>Lymphocytes</b> (Method: Cell Impedance)	<b>15</b>	%	20-40
 <b>Monocytes</b> (Method: Microscopy)	<b>04</b>	%	2-10
 <b>Eosinophils</b> (Method: Microscopy)	<b>02</b>	%	1-6
 <b>Basophils</b> (Method: Microscopy)	<b>00</b>	%	1-2
 <b>Absolute Neutrophils Count</b> (Method: Impedance)	<b>6</b>	10 <sup>9</sup> /L	2.0-7.0
 <b>Absolute Lymphocyte Count</b> (Method: Impedance)	<b>1.14</b>	10 <sup>9</sup> /L	1.0-3.0
 <b>Absolute Monocyte Count</b> (Method: Calculated)	<b>0.3</b>	10 <sup>9</sup> /L	0.2-1.0
 <b>Absolute Eosinophils Count</b> (Method: Calculated)	<b>0.15</b>	10 <sup>9</sup> /L	0.02-0.5
 <b>Absolute Basophil ICount</b> (Method: Calculated)	<b>0.00</b>	10 <sup>9</sup> /L	0.0-0.3

**Morphology**  
 (Method: PAPs Staining)

Anisocytosis with Normocytic normochromic anemia with Neutrophilia



**LABORATORY TEST REPORT**

Name	: Mr. ABHISHEK		
Sample ID	: A1841626		
Age/Gender	: 52 Years/Male	Reg. No	: 0312503040015
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 04-Mar-2025 11:18 AM
Primary Sample	: Whole Blood	Received On	: 04-Mar-2025 01:32 PM
Sample Tested In	: Plasma-NaF(R)	Reported On	: 04-Mar-2025 03:21 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report


**CLINICAL BIOCHEMISTRY**
**GLUCOSE RANDOM (RBS)**

Test Name	Results	Units	Biological Reference Interval
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Glucose Random (RBS)	91	mg/dL	70-140
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(Method: Hexokinase (HK))

Interpretation of Plasma Glucose based on ADA guidelines 2018

Diagnosis	Fasting Plasma Glucose(mg/dL)	2hrs Plasma Glucose(mg/dL)	HbA1c(%)	RBS(mg/dL)
Prediabetes	100-125	140-199	5.7-6.4	NA
Diabetes	> = 126	> = 200	> = 6.5	>=200(with symptoms)

Reference: Diabetes care 2018;41(suppl.1):S13-S27

- The random blood glucose if it is above 200 mg/dL and the patient has increased thirst, polyuria, and polyphagia, suggests diabetes mellitus.
- As a rule, two-hour glucose samples will reach the fasting level or it will be in the normal range.

\*\*\* End Of Report \*\*\*

Excellence In Health Care









  
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 MD BIOCHEMISTRY

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**LABORATORY TEST REPORT**

Name	: Mr. ABHISHEK		
Sample ID	: A1841621		
Age/Gender	: 52 Years/Male	Reg. No	: 0312503040015
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 04-Mar-2025 11:18 AM
Primary Sample	: Whole Blood	Received On	: 04-Mar-2025 01:32 PM
Sample Tested In	: Serum	Reported On	: 04-Mar-2025 03:36 PM
Client Address	: Kimtee colony ,Gokul Nagar,Tarnaka	Report Status	: Final Report


**CLINICAL BIOCHEMISTRY**

Test Name	Results	Units	Biological Reference Interval
<b>Kidney Profile-KFT</b>			
 <b>Creatinine</b> (Method: Sarcosine Oxidase Method)	<b>3.24</b>	mg/dL	0.70-1.30
 <b>Urea-Serum</b> (Method: Urease-GLDH, UV Method)	<b>56.9</b>	mg/dL	12.8-42.8
 <b>Blood Urea Nitrogen (BUN)</b> (Method: Calculated)	<b>26.59</b>	mg/dL	7.0-18.0
<b>BUN / Creatinine Ratio</b>	8.21	Ratio	6 - 22
 <b>Uric Acid</b> (Method: UriCase)	4.1	mg/dL	3.5-7.2
 <b>Sodium</b> (Method: ISE Direct)	138	mmol/L	135-150
 <b>Potassium</b> (Method: ISE Direct)	4.1	mmol/L	3.5-5.0
 <b>Chloride</b> (Method: ISE Direct)	101	mmol/L	94-110

**Interpretation:**

- The kidneys, located in the retroperitoneal space in the abdomen, are vital for patient health. They process several hundred liters of fluid a day and remove around two liters of waste products from the bloodstream. The volume of fluid that passes through the kidneys each minute is closely linked to cardiac output. The kidneys maintain the body's balance of water and concentration of minerals such as sodium, potassium, and phosphorus in blood and remove waste by-products from the blood after digestion, muscle activity and exposure to chemicals or medications. They also produce renin which helps regulate blood pressure, produce erythropoietin which stimulates red blood cell production, and produce an active form of vitamin D, needed for bone health.

\*\*\* End Of Report \*\*\*



  
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