

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 : Mrs. SHAKUNTHALA

Sample ID : A1842119

Age/Gender : 75 Years/Female Reg. No : 0312503300016

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

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 30-Mar-2025 09:12 AM
Primary Sample : Whole Blood Received On : 30-Mar-2025 01:25 PM
Sample Tested In : Whole Blood EDTA Reported On : 30-Mar-2025 03:41 PM

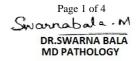
Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

HAEMATOLOGY						
Test Name	Results	Units	Biological Reference Interval			
Complete Blood Picture(CBP)						
	<u>9.4</u>	g/dL	12-15			
(Method: Cynmeth Method)	27.5	%	40-50			
(Method: Calculated)	2.96	10^12/L	3.8-4.8			
(Method: Cell Impedence)						
MCV (Method: Calculated)	93	fl	81-101			
MCH (Method: Calculated)	31.7	pg	27-32			
MCHC (Method: Calculated)	34.1	g/dL	32.5-34.5			
RDW-CV (Method: Calculated)	<u>15.3</u>	%	11.6-14.0			
Platelet Count (PLT) (Method: Cell Impedance)	163	10^9/L	150-410			
Total WBC Count (Method: Impedance)	4.7	10^9/L	4.0-10.0			
Differential Leucocyte Count (DC)						
Neutrophils (Method: Cell Impedence)	70	%	40-70			
Lymphocytes (Method: Cell Impedence)	20	%	20-40			
Monocytes (Method: Microscopy)	06	%	2-10			
Eosinophils (Method: Microscopy)	04	%	1-6			
Basophils (Method: Microscopy)	00	%	1-2			
Absolute Neutrophils Count (Method: Impedence)	3.29	10^9/L	2.0-7.0			
Absolute Lymphocyte Count (Method: Impedence)	<u>0.94</u>	10^9/L	1.0-3.0			
Absolute Monocyte Count (Method: Calculated)	0.28	10^9/L	0.2-1.0			
Absolute Eosinophils Count	0.19	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)	Anisocytosis with Normocytic normochromic anemia					













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LABORATORY TEST REPORT

Name : Mrs. SHAKUNTHALA

Sample ID : A1842121

Age/Gender : 75 Years/Female Reg. No : 0312503300016

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

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 30-Mar-2025 09:12 AM
Primary Sample : Whole Blood Received On : 30-Mar-2025 01:25 PM
Sample Tested In : Plasma-NaF(R) Reported On : 30-Mar-2025 02:01 PM

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

CLINICAL BIOCHEMISTRY

GLUCOSE RANDOM (RBS)

Test Name Results Units Biological Reference Interval

Glucose Random (RBS) . 94 mg/dL 70-140

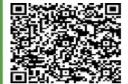
Interpretation of Plasma Glucose based on ADA guidelines 2018

		2hrsPlasma Glucose(mg/dL)	HbA1c(%)	RBS(mg/dL)
Prediabetes	100-125	140-199	5.7-6.4	NA
Diabetes	> = 126	>= 200		>=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 ***









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LABORATORY TEST REPORT

Name : Mrs. SHAKUNTHALA

Sample ID : A1842122

Age/Gender : 75 Years/Female Reg. No : 0312503300016

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

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 30-Mar-2025 09:12 AM
Primary Sample : Whole Blood Received On : 30-Mar-2025 01:25 PM
Sample Tested In : Serum Reported On : 30-Mar-2025 06:25 PM

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) (Method: Diazo)	1.2	mg/dL	0.2-1.2				
Bilirubin (Direct)	0.2	mg/dL	0.0 - 0.3				
Bilirubin (Indirect) (Method: Calculated)	1	mg/dL	0.2-1.0				
Aspartate Aminotransferase (AST/SGOT)	27	U/L	5-48				
Alanine Aminotransferase (ALT/SGPT) (Method: IFCC with out (P-5-P))	21	U/L	0-55				
Alkaline Phosphatase(ALP) (Method: Kinetic PNPP-AMP)	76	U/L	30-120				
Gamma Glutamyl Transpeptidase (GGTP)	22	U/L	5-55				
Protein - Total (Method: Bluret)	<u>6.2</u>	g/dL	6.4-8.2				
Albumin (Method: Bromocresol Green (BCG))	4.4	g/dL	3.4-5.0				
Globulin (Method: Calculated)	1.8	g/dL	2.0-4.2				
A:G Ratio (Method: Calculated)	2.44	Ratio	0.8-2.0				
SGOT/SGPT Ratio (Method: Calculated)	1.29	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.

Renal Profile

© Creatinine (Method: Sarcosine Oxidase Method)	<u>2.44</u>	mg/dL	0.55-1.02
Blood Urea Nitrogen (BUN)	21	mg/dL	8.0-23.0
Uric Acid (Method: Uricase)	<u>7.6</u>	mg/dL	2.6-6.0
Calcium Calcium	<u>8.1</u>	mg/dL	8.5-10.1







*** End Of Report ***



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