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	: B2675793		
Age/Gender	: 75 Years/Female	Reg. No	: 0312504130011
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 13-Apr-2025 09:11 AM
Primary Sample	: Whole Blood	Received On	: 13-Apr-2025 02:26 PM
Sample Tested In	: Whole Blood EDTA	Reported On	: 13-Apr-2025 02:45 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: Cynmeth Method)*	**9.2**	g/dL	12-15
Haematocrit (HCT) *(Method: Calculated)*	**29.0**	%	40-50
RBC Count *(Method: Cell Impedence)*	**3.11**	10^12/L	3.8-4.8
MCV *(Method: Calculated)*	93	fl	81-101
MCH *(Method: Calculated)*	29.5	pg	27-32
MCHC *(Method: Calculated)*	**31.7**	g/dL	32.5-34.5
RDW-CV *(Method: Calculated)*	**15.7**	%	11.6-14.0
Platelet Count (PLT) *(Method: Cell Impedance)*	222	10^9/L	150-410
Total WBC Count *(Method: Impedance)*	4.8	10^9/L	4.0-10.0
Differential Leucocyte Count (DC)			
Neutrophils *(Method: Cell Impedence)*	**79**	%	40-70
Lymphocytes *(Method: Cell Impedence)*	**13**	%	20-40
Monocytes *(Method: Microscopy)*	07	%	2-10
Eosinophils *(Method: Microscopy)*	01	%	1-6
Basophils *(Method: Microscopy)*	00	%	1-2
Absolute Neutrophils Count *(Method: Impedence)*	3.79	10^9/L	2.0-7.0
Absolute Lymphocyte Count *(Method: Impedence)*	**0.62**	10^9/L	1.0-3.0
Absolute Monocyte Count *(Method: Calculated)*	0.34	10^9/L	0.2-1.0
Absolute Eosinophils Count *(Method: Calculated)*	0.05	10^9/L	0.02-0.5
Absolute Basophil lCount *(Method: Calculated)*	0.00	10^9/L	0.0-0.3
Morphology *(Method: PAPs Staining)*	Anisocytosis with Normocytic normochromic anemia.Mild Neutrophilia. Adequate		

Swarnabala - M
DR.SWARNA BALA
MD PATHOLOGY

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ICMR Reg .No. SAPALAPVLHT (Covid -19)

LABORATORY TEST REPORT

Name	: Mrs. SHAKUNTHALA		
Sample ID	: B2675794		
Age/Gender	: 75 Years/Female	Reg. No	: 0312504130011
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 13-Apr-2025 09:11 AM
Primary Sample	: Whole Blood	Received On	: 13-Apr-2025 02:26 PM
Sample Tested In	: Plasma-NaF(R)	Reported On	: 13-Apr-2025 03:22 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) *(Method: Hexokinase (HK))*	84	mg/dL	70-140

Interpretation of Plasma Glucose based on ADA guidelines 2024

Diagnosis	FastingPlasma Glucose(mg/dL)	2hrsPlasma 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 2024 Jan (1:47 (suppl.1):S20- S42.

- 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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DR. LAVANYA LAGISETTY
MD BIOCHEMISTRY

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ICMR Reg .No. SAPALAPVLHT (Covid -19)

LABORATORY TEST REPORT

Name	: Mrs. SHAKUNTHALA		
Sample ID	: B2675736		
Age/Gender	: 75 Years/Female	Reg. No	: 0312504130011
Referred by	: Dr. SELF	SPP Code	: SPL-CV-172
Referring Customer	: V CARE MEDICAL DIAGNOSTICS	Collected On	: 13-Apr-2025 09:11 AM
Primary Sample	: Whole Blood	Received On	: 13-Apr-2025 02:26 PM
Sample Tested In	: Serum	Reported On	: 13-Apr-2025 03:12 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)*	1.0	mg/dL	0.2-1.2
Bilirubin (Direct) *(Method: Diazo)*	0.2	mg/dL	0.0 - 0.3
Bilirubin (Indirect) *(Method: Calculated)*	0.8	mg/dL	0.2-1.0
Aspartate Aminotransferase (AST/SGOT) *(Method: IFCC UV Assay)*	25	U/L	5-48
Alanine Aminotransferase (ALT/SGPT) *(Method: IFCC with out (P-5-P))*	17	U/L	0-55
Alkaline Phosphatase(ALP) *(Method: Kinetic PNPP-AMP)*	70	U/L	30-120
Gamma Glutamyl Transpeptidase (GGTP) *(Method: IFCC)*	21	U/L	5-55
Protein - Total *(Method: Biuret)*	**6.0**	g/dL	6.4-8.2
Albumin *(Method: Bromocresol Green (BCG))*	4.1	g/dL	3.4-5.0
Globulin *(Method: Calculated)*	**1.9**	g/dL	2.0-4.2
A:G Ratio *(Method: Calculated)*	**2.16**	Ratio	0.8-2.0
SGOT/SGPT Ratio *(Method: Calculated)*	**1.47**	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)*	**1.08**	mg/dL	0.55-1.02
Blood Urea Nitrogen (BUN) *(Method: Calculated)*	16	mg/dL	8.0-23.0
Uric Acid *(Method: Uricase)*	4.4	mg/dL	2.6-6.0
Calcium *(Method: Arsenazo)*	8.6	mg/dL	8.5-10.1

*** End Of Report ***

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