

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. RAJESHWARI

Sample ID : B2622805

 Age/Gender
 : 36 Years/Female
 Reg. No
 : 0312504170055

Referred by : Dr. ARJUN KUMAR SPP Code : SPL-CV-172
Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 17-Apr-2025 09:52 PM

Primary Sample : Whole Blood Received On : 17-Apr-2025 11:04 PM Sample Tested In : Whole Blood EDTA Reported On : 17-Apr-2025 11:32 PM

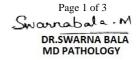
Client Address : Kimtee colony ,Gokul Nagar,Tarnaka Report Status : Final Report

HAEMATOLOGY						
Test Name	Results	Units	Biological Reference Interval			
Complete Blood Picture(CBP)						
Haemoglobin (Hb)	<u>10.0</u>	g/dL	12-15			
Haematocrit (HCT)	<u>32.7</u>	%	40-50			
(Method: Calculated) RBC Count (Method: Cell Impedence)	4.20	10^12/L	3.8-4.8			
(Method: Cell Impedence) MCV (Method: Calculated)	<u>77</u>	fl	81-101			
(Method: Calculated) (Method: Calculated)	<u>23.4</u>	pg	27-32			
MCHC (Method: Calculated) (Method: Calculated)	<u>30.4</u>	g/dL	32.5-34.5			
RDW-CV (Method: Calculated)	<u>14.5</u>	%	11.6-14.0			
Platelet Count (PLT) (Method: Cell Impedance)	234	10^9/L	150-410			
Total WBC Count (Method: Impedance)	7.0	10^9/L	4.0-10.0			
<u>Differential Leucocyte Count (DC)</u>						
Neutrophils (Method: Cell Impedence)	61	%	40-70			
Lymphocytes (Method: Cell Impedence)	32	%	20-40			
Monocytes (Method: Microscopy)	06	%	2-10			
Eosinophils (Method: Microscopy)	01	%	1-6			
Basophils (Method: Microscopy)	00	%	1-2			
Absolute Neutrophils Count	4.27	10^9/L	2.0-7.0			
Absolute Lymphocyte Count (Method: Impedence)	2.24	10^9/L	1.0-3.0			
Mosolute Monocyte Count (Method: Calculated)	0.42	10^9/L	0.2-1.0			
Absolute Eosinophils Count (Method: Calculated)	0.07	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 n	ormochromic a	and Microcytic hypochromic			









*** End Of Report ***





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LABORATORY TEST REPORT

Name : Mrs. RAJESHWARI

Sample ID : B2622808

Age/Gender : 36 Years/Female Reg. No : 0312504170055

Referred by : Dr. ARJUN KUMAR SPP Code : SPL-CV-172

Referring Customer : V CARE MEDICAL DIAGNOSTICS Collected On : 17-Apr-2025 09:52 PM
Primary Sample : Whole Blood Received On : 17-Apr-2025 11:08 PM
Sample Tested In : Serum Reported On : 18-Apr-2025 12:27 AM

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

CLINICAL BIOCHEMISTRY						
Test Name	Results	Units	Biological Reference Interval			
Calcium (Method: Arsenazo)	9.04	mg/dL	8.5-10.1			

Comments:

- Calcium in the body is found mainly in the bones (approximately 99%). In serum, Calcium exists in a
 free ionised form and in bound form (with Albumin). Hence, a decrease in Albumin causes lower
 Calcium levels and vice-versa.
- Calcium levels in serum depend on the Parathyroid Hormone.
- Increased Calcium levels are found in Bone tumors, Hyperparathyroidism. decreased levels are found in Hypoparathyroidism, renal failure, Rickets.

*** End Of Report ***

Excellence In Health Care









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CLINICAL BIOCHEMISTRY

CENTIONE DISCOTTEMENT							
Test Name	Results	Units	Biological Reference Interval				
Magnesium	2.02	mg/dL	1.8-2.4				

Interpretation:
About one half of the body's magnesium is found in bone. The other half is found inside cells of body tissues and organs.

Magnesium is needed for many chemical processes in the body. It helps maintain normal muscle and nerve function, and keeps the bones strong. Magnesium is also needed for the heart to function normally and to help regulate blood pressure. Magnesium also helps the body control blood sugar level and helps support the body's defense (immune) system.

A high magnesium level may be due to:

- · Diabetic ketoacidosis, a life-threatening problem in people with diabetes
- Loss of kidney function (acute or chronic renal failure)

A low magnesium level may be due to:

- Alcohol use disorder
- Hyperaldosteronism (adrenal gland produces too much of the hormone aldosterone)
- Hypercalcemia (high blood calcium level)
- Long-term (chronic) diarrhea

*** End Of Report ***









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