

**Dr. Vinay Chopra**  
 MD (Pathology & Microbiology)  
 Chairman & Consultant Pathologist

**Dr. Yugam Chopra**  
 MD (Pathology)  
 CEO & Consultant Pathologist

<b>NAME</b>	: Mr. D.C GUPTA	<b>PATIENT ID</b>	: 1541588
<b>AGE/ GENDER</b>	: 78 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012407080019
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 08/Jul/2024 09:15 AM
<b>REFERRED BY</b>	: CENTRAL PHOENIX CLUB (AMBALA CANTT)	<b>COLLECTION DATE</b>	: 08/Jul/2024 01:33PM
<b>BARCODE NO.</b>	: 01512727	<b>REPORTING DATE</b>	: 08/Jul/2024 01:57PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
<b>CLIENT ADDRESS</b>	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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**CLINICAL PATHOLOGY**  
**PROTEINS: 24 HOURS URINE**

URINE VOLUME: 24 HOUR	4000	mL	
by SPECTROPHOTOMETRY			
PROTEINS: 24 HOURS URINE	638.8 <sup>H</sup>	mg/ 24 HOURS	25 -160
by BIURET, SPECTROPHOTOMETRY			

**INTERPRETATION:**


TYPES OF PROTEINURIA	TOTAL PROTEINS IN mg/24 HOURS	CONDITIONS
MINIMAL PROTEINURIA:	150 - 500 mg/24 hours	Chronic pyelonephritis, Chronic Interstitial Nephritis, Renal Tubular disease, Postural
MODERATE PROTEINURIA:	500 - 1000 mg/24 hours	Nephrosclerosis, Multiple Myeloma, Toxic Nephropathy, Renal Calculi
HEAVY PROTEINURIA:	1000 - 3000 mg/24 hours	Nephrotic Syndrome, Acute Rapidly Progressive & Chronic Glomerulonephritis, Diabetes mellitus, Lupus erythematosus, Drugs like Pencillamine, Heavy metals like Gold & Mercury.

**NOTE:**  
 1.Excretion of total protein in individuals is highly variable with or without kidney disease.  
 2.Conditions affecting protein excretion other than kidney disease are urinary tract infection, diet, menstruation & physical activity.

**COMMENT:**  
 1.Diagnosis of kidney disease and response to therapy is usually obtained by quatitatively analyzing the amount of protein excreted in urine over a 24 hour period.

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



  
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