

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

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

NAME : Mr. AKARSHIT  
AGE/ GENDER : 16 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01513625  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1556759  
REG. NO./LAB NO. : 012407220046  
REGISTRATION DATE : 22/Jul/2024 01:29 PM  
COLLECTION DATE : 22/Jul/2024 01:32 PM  
REPORTING DATE : 22/Jul/2024 02:48 PM

Test Name	Value	Unit	Biological Reference interval
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## CLINICAL CHEMISTRY/BIOCHEMISTRY

### LIVER FUNCTION TEST (COMPLETE)

BILIRUBIN TOTAL: SERUM by DIAZOTIZATION, SPECTROPHOTOMETRY	2.53 <sup>H</sup>	mg/dL	INFANT: 0.20 - 8.00 ADULT: 0.00 - 1.20
BILIRUBIN DIRECT (CONJUGATED): SERUM by DIAZO MODIFIED, SPECTROPHOTOMETRY	0.53 <sup>H</sup>	mg/dL	0.00 - 0.40
BILIRUBIN INDIRECT (UNCONJUGATED): SERUM by CALCULATED, SPECTROPHOTOMETRY	2 <sup>H</sup>	mg/dL	0.10 - 1.00
SGOT/AST: SERUM by IFCC, WITHOUT PYRIDOXAL PHOSPHATE	19.81	U/L	7.00 - 45.00
SGPT/ALT: SERUM by IFCC, WITHOUT PYRIDOXAL PHOSPHATE	15.62	U/L	0.00 - 49.00
AST/ALT RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY	1.27	RATIO	0.00 - 46.00
ALKALINE PHOSPHATASE: SERUM by PARA NITROPHENYL PHOSPHATASE BY AMINO METHYL PROPANOL	109.25	U/L	50.00 - 370.00
GAMMA GLUTAMYL TRANSFERASE (GGT): SERUM by SZASZ, SPECTROPHOTOMETRY	14.82	U/L	0.00 - 55.0
TOTAL PROTEINS: SERUM by BIURET, SPECTROPHOTOMETRY	7.66	gm/dL	6.20 - 8.00
ALBUMIN: SERUM by BROMOCRESOL GREEN	4.73	gm/dL	3.50 - 5.50
GLOBULIN: SERUM by CALCULATED, SPECTROPHOTOMETRY	2.93	gm/dL	2.30 - 3.50
A : G RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY	1.61	RATIO	1.00 - 2.00

#### INTERPRETATION

NOTE:- To be correlated in individuals having SGOT and SGPT values higher than Normal Reference Range.

USE:- Differential diagnosis of diseases of hepatobiliary system and pancreas.

#### INCREASED:

DRUG HEPATOTOXICITY	> 2
ALCOHOLIC HEPATITIS	> 2 (Highly Suggestive)
CIRRHOSIS	1.4 - 2.0



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INTRAHEPATIC CHOLESTATIS	> 1.5		
HEPATOCELLULAR CARCINOMA & CHRONIC HEPATITIS	> 1.3 (Slightly Increased)		

**DECREASED:**

1. Acute Hepatitis due to virus, drugs, toxins (with AST increased 3 to 10 times upper limit of normal)
2. Extra Hepatic cholestasis: 0.8 (normal or slightly decreased).

**PROGNOSTIC SIGNIFICANCE:**

NORMAL	< 0.65
GOOD PROGNOSTIC SIGN	0.3 - 0.6
POOR PROGNOSTIC SIGN	1.2 - 1.6



  
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<b>BARCODE NO.</b>	: 01513625	<b>REPORTING DATE</b>	: 23/Jul/2024 08:03AM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
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**IMMUNOPATHOLOGY/SEROLOGY**  
**HEPATITIS A VIRUS (HAV) ANTIBODY: IgG**

HEPATITIS A ANTIBODY (HAV) IgG: SERUM by CLIA (CHELUMINISCENCE IMMUNOASSAY)	0.24	AI	< 0.90
HEPATITIS A ANTIBODY (HAV) IgG RESULT: SERUM by CLIA (CHELUMINISCENCE IMMUNOASSAY)	NON - REACTIVE		NON - REACTIVE

**INTERPRETATION**

HEPATITIS A VIRUS (HAV) IgG ANTIBODIES	
NON REACTIVE	< 0.90
EQUIVOCAL	0.90 - 1.10
POSITIVE	>1.10

- Hepatitis A virus is a non-enveloped RNA virus that is classified as picorna virus. It usually causes a self limiting hepatitis which results in complete remission.
- Occasional cases of fulminant hepatic necrosis are known to be associated with the infection. Transmission is mainly oro-faecal.
- The incubation period is between 15-50 days from the time of exposure.
- IgM antibody is only present in the blood following an acute hepatitis A infection and is a fairly reliable marker of a recent infection. It is detectable from one to two weeks after the initial infection and persists for up to 14 weeks after exposure.



  
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<b>BARCODE NO.</b>	: 01513625	<b>REPORTING DATE</b>	: 22/Jul/2024 03:46PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
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### HEPATITIS A VIRUS (HAV) ANTIBODY: IgM

HEPATITIS A ANTIBODY (HAV) IgM QUANTITATIVE <i>by CLIA (CHELUMINISCENCE IMMUNOASSAY)</i>	0.01	AI	< 0.90
HEPATITIS A ANTIBODY (HAV) IgM RESULT <i>by CLIA (CHELUMINISCENCE IMMUNOASSAY)</i>	NON - REACTIVE		NON - REACTIVE

#### INTERPRETATION

HEPATITIS A VIRUS (HAV) IgM ANTIBODIES	
NON REACTIVE	< 0.90
EQUIVOCAL	0.90 - 1.10
POSITIVE	>1.10

- Hepatitis A virus is a non-enveloped RNA virus that is classified as picorna virus. It usually causes a self limiting hepatitis which results in complete remission.
- Occasional cases of fulminant hepatic necrosis are known to be associated with the infection. Transmission is mainly oro-faecal.
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\*\*\* End Of Report \*\*\*



  
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