

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

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

NAME : Mr. JAGDISH LAL  
AGE/ GENDER : 60 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01513649  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1555075  
REG. NO./LAB NO. : 012407230013  
REGISTRATION DATE : 23/Jul/2024 09:03 AM  
COLLECTION DATE : 23/Jul/2024 09:05 AM  
REPORTING DATE : 23/Jul/2024 01:04 PM

Test Name	Value	Unit	Biological Reference interval
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CLINICAL CHEMISTRY/BIOCHEMISTRY

UREA

UREA: SERUM by UREASE - GLUTAMATE DEHYDROGENASE (GLDH) RECHECKED.	146.9 <sup>H</sup>	mg/dL	10.00 - 50.00
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**CREATININE**

<b>CREATININE: SERUM</b> <i>by ENZYMATIC, SPECTROPHOTOMETRY</i> <b>RECHECKED.</b>	<b>4.33<sup>H</sup></b>	<b>mg/dL</b>	<b>0.40 - 1.40</b>
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**URIC ACID**

<b>URIC ACID: SERUM</b>	<b>15.5<sup>H</sup></b>	<b>mg/dL</b>	<b>3.60 - 7.70</b>
<i>by URICASE - OXIDASE PEROXIDASE</i>			

**INTERPRETATION:-**

1. GOUT occurs when high levels of Uric Acid in the blood cause crystals to form & accumulate around a joint.  
 2. Uric Acid is the end product of purine metabolism. Uric acid is excreted to a large degree by the kidneys and to a smaller degree in the intestinal tract by microbial degradation.

**INCREASED:-**

**(A).DUE TO INCREASED PRODUCTION:-**

1. Idiopathic primary gout.
2. Excessive dietary purines (organ meats, legumes, anchovies, etc).
3. Cytolytic treatment of malignancies especially leukemias & lymphomas.
4. Polycythemia vera & myeloid metaplasia.
5. Psoriasis.
6. Sickle cell anaemia etc.

**(B).DUE TO DECREASED EXCRETION (BY KIDNEYS)**

1. Alcohol ingestion.
2. Thiazide diuretics.
3. Lactic acidosis.
4. Aspirin ingestion (less than 2 grams per day).
5. Diabetic ketoacidosis or starvation.
6. Renal failure due to any cause etc.

**DECREASED:-**

**(A).DUE TO DIETARY DEFICIENCY**

1. Dietary deficiency of Zinc, Iron and molybdenum.
2. Fanconi syndrome & Wilson's disease.
3. Multiple sclerosis.
4. Syndrome of inappropriate antidiuretic hormone (SIADH) secretion & low purine diet etc.

**(B).DUE TO INCREASED EXCRETION**

1. Drugs:- Probenecid, sulphinpyrazone, aspirin doses (more than 4 grams per day), corticosteroids and ACTH, anti-coagulants and estrogens etc.

RECHECKED.

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



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