

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

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 MD (Pathology)  
 CEO & Consultant Pathologist

<b>NAME</b>	: Mrs. SUMAN KOHLI	<b>PATIENT ID</b>	: 1562013
<b>AGE/ GENDER</b>	: 64 YRS/FEMALE	<b>REG. NO./LAB NO.</b>	: 012407260066
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 26/Jul/2024 07:45 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 26/Jul/2024 07:46PM
<b>BARCODE NO.</b>	: 01513878	<b>REPORTING DATE</b>	: 26/Jul/2024 09:26PM
<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 CHEMISTRY/BIOCHEMISTRY

### CALCIUM

CALCIUM: SERUM	10.59	mg/dL	8.50 - 10.60
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by ARSENAZO III, SPECTROPHOTOMETRY

#### INTERPRETATION:-

1. Serum calcium (total) estimation is used for the diagnosis and monitoring of a wide range of disorders including diseases of bone, kidney, parathyroid gland, or gastrointestinal tract.
2. Calcium levels may also reflect abnormal vitamin D or protein levels.
3. The calcium content of an adult is somewhat over 1 kg (about 2% of the body weight). Of this, 99% is present as calcium hydroxyapatite in bones and <1% is present in the extra-osseous intracellular space or extracellular space (ECS).
4. In serum, calcium is bound to a considerable extent to proteins (approximately 40%), 10% is in the form of inorganic complexes, and 50% is present as free or ionized calcium.

**NOTE:-** Calcium ions affect the contractility of the heart and the skeletal musculature, and are essential for the function of the nervous system. In addition, calcium ions play an important role in blood clotting and bone mineralization.

#### HYPOCALCEMIA (LOW CALCIUM LEVELS) CAUSES :-

1. Due to the absence or impaired function of the parathyroid glands or impaired vitamin-D synthesis.
2. Chronic renal failure is also frequently associated with hypocalcemia due to decreased vitamin-D synthesis as well as hyperphosphatemia and skeletal resistance to the action of parathyroid hormone (PTH).
3. **NOTE:-** A characteristic symptom of hypocalcemia is latent or manifest tetany and osteomalacia.

#### HYPERCALCEMIA (INCREASE CALCIUM LEVELS) CAUSES:-

1. Increased mobilization of calcium from the skeletal system or increased intestinal absorption.
  2. Primary hyperparathyroidism (pHPT)
  3. Bone metastasis of carcinoma of the breast, prostate, thyroid gland, or lung.
- NOTE:-** Severe hypercalcemia may result in cardiac arrhythmia.

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



*[Signature]*

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