

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

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

<b>NAME</b>	: Mrs. MAH DEVI	<b>PATIENT ID</b>	: 1578258
<b>AGE/ GENDER</b>	: 53 YRS/FEMALE	<b>REG. NO./LAB NO.</b>	: <b>012408120051</b>
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 12/Aug/2024 02:19 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 12/Aug/2024 02:19PM
<b>BARCODE NO.</b>	: 01514957	<b>REPORTING DATE</b>	: 12/Aug/2024 03:49PM
<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**

**CREATININE**

CREATININE: SERUM <i>by ENZYMATIC, SPECTROPHOTOMETRY</i>	1.04	mg/dL	0.40 - 1.20
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TEST PERFORMED AT: KOS DIAGNOSTIC LAB, AMBALA CANTT.

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**URIC ACID**

<b>URIC ACID: SERUM</b>	<b>7.76<sup>H</sup></b>	<b>mg/dL</b>	<b>2.50 - 6.80</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 & Wilsons disease.
- 3.Multiple sclerosis .
- 4.Syndrome of inappropriate antidiuretic hormone (SIADH) secretion & low purine diet etc.

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

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

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



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