

KOS Diagnostic Lab

(A Unit of KOS Healthcare)



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

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

NAME : Mr. SACHIN GOEL

AGE/ GENDER : 40 YRS/MALE **PATIENT ID** : 1579037

COLLECTED BY :012408130023 : SURJESH REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 13/Aug/2024 09:38 AM BARCODE NO. :01514992 **COLLECTION DATE** : 13/Aug/2024 09:47AM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 13/Aug/2024 03:19PM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Value Unit **Biological Reference interval** Test Name

CLINICAL PATHOLOGY

MICROALBUMIN/CREATININE RATIO - RANDOM URINE

MICROALBUMIN: RANDOM URINE by SPECTROPHOTOMETRY	455.27 ^H	mg/L	0 - 25
CREATININE: RANDOM URINE by SPECTROPHOTOMETRY	24.59	mg/dL	20 - 320
MICROALBUMIN/CREATININE RATIO -	1851.44 ^H	mg/g	0 - 30

RANDOM URINE

by SPECTROPHOTOMETRY

INTERPRETATION:-

PHYSIOLOGICALLY NORMAL:	mg/L	0 - 30
MICROALBUMINURIA:	mg/L	30 - 300
GROSS PROTEINURIA:	mg/L	> 300

Long standing un-treated Diabetes and Hypertension can lead to renal dysfunction.

2. Diabetic nephropathy or kidney disease is the most common cause of end stage renal disease(ERSD) or kidney failure.

3. Presence of Microalbuminuria is an early indicator of onset of compromised renal function in these patients.

4. Microalbuminuria is the condition when urinary albumin excretion is between 30-300 mg & above this it is called as macroalbuminuria, the presence of which indicates serious kidney disease.

5.Microalbuminuria is not only associated with kidney disease but of cardiovascular disease in patients with dibetes & hypertension.

6. Microalbuminuria reflects vascular damage & appear to be a marker of of early arterial disease & endothelial dysfunction.

NOTE:- IF A PATIENT HAS = 1+ PROTEINURIA (30 mg/dl OR 300 mg/L) BY URINE DIPSTICK (URINEANALYSIS), OVERT PROTEINURIA IS PRESENT AND TESTING FOR MICROALBUMIN IS INAPPROPIATE. IN SUCH A CASE, URINE PROTEIN: CREATININE RATIO OR 24 HOURS TOTAL URINE MICROPROTEIN IS **APPROPIATE**

*** End Of Report ***



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