

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

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

<b>NAME</b>	: Mr. ALOK	<b>PATIENT ID</b>	: 1586462
<b>AGE/ GENDER</b>	: 42 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012408210023
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 21/Aug/2024 11:51 AM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 21/Aug/2024 02:15PM
<b>BARCODE NO.</b>	: 01515410	<b>REPORTING DATE</b>	: 21/Aug/2024 02:15PM
<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**

**GLUCOSE RANDOM (R)**


GLUCOSE RANDOM (R): PLASMA by GLUCOSE OXIDASE - PEROXIDASE (GOD-POD)	94.2	mg/dL	NORMAL: < 140.00 PREDIABETIC: 140.0 - 200.0 DIABETIC: > OR = 200.0
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**INTERPRETATION**

**IN ACCORDANCE WITH AMERICAN DIABETES ASSOCIATION GUIDELINES:**

1. A random plasma glucose level below 140 mg/dl is considered normal.
2. A random glucose level between 140 - 200 mg/dl is considered as glucose intolerant or prediabetic. A fasting and post-prandial blood test (after consumption of 75 gms of glucose) is recommended for all such patients.
3. A random glucose level of above 200 mg/dl is highly suggestive of diabetic state. A repeat post-prandial is strongly recommended for all such patients. A fasting plasma glucose level in excess of 125 mg/dl on both occasions is confirmatory for diabetic state.



  
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**IMMUNOPATHOLOGY/SEROLOGY**

**ANTI HUMAN IMMUNODEFICIENCY VIRUS (HIV) DUO ULTRA WITH (P-24 ANTIGEN DETECTION)**

HIV 1/2 AND P24 ANTIGEN: SERUM	0.04	S/CO	NEGATIVE: < 1.00 POSITIVE: > 1.00
<i>by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY)</i>			
HIV 1/2 AND P24 ANTIGEN RESULT	NON - REACTIVE		
<i>by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY)</i>			

**INTERPRETATION:-**

RESULT (INDEX)	REMARKS
< 1.00	NON - REACTIVE
> = 1.00	PROVISIONALLY REACTIVE

Non-Reactive result implies that antibodies to HIV 1/ 2 have not been detected in the sample . This means that patient has either not been exposed to HIV 1/ 2 infection or the sample has been tested during the "window phase" i.e. before the development of detectable levels of antibodies. Hence a Non Reactive result does not exclude the possibility of exposure or infection with HIV 1/ 2.

**RECOMMENDATIONS:**

1. Results to be clinically correlated
2. Rarely falsenegativity/positivity may occur.

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



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