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NAME : Mr. HARMEET SINGH  
AGE/ GENDER : 32 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01515521  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1562463  
REG. NO./LAB NO. : 012408220074  
REGISTRATION DATE : 22/Aug/2024 06:59 PM  
COLLECTION DATE : 22/Aug/2024 07:02PM  
REPORTING DATE : 22/Aug/2024 10:27PM

Test Name	Value	Unit	Biological Reference interval
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## CLINICAL CHEMISTRY/BIOCHEMISTRY

### LIPASE

#### LIPASE - SERUM

98.2<sup>H</sup>

U/L

0 - 60

by METHYL RESORUFIN, SPECTROPHOTOMETRY

#### INTERPRETATION

1. Pancreas is the major and primary source of serum lipase though lipases are also present in liver, stomach, intestine, WBC, fat cells and milk.
2. In acute pancreatitis, serum lipase becomes elevated at the same time as amylase and remains high for 7-10 days.
3. Increased lipase activity rarely lasts longer than 14 days.
4. Prolonged increase suggests poor prognosis or presence of a cyst.
5. The combined use of serum lipase and serum amylase is effective in ruling out acute pancreatitis.

#### INCREASED LEVEL:

1. Acute & Chronic pancreatitis
2. Obstruction of pancreatic duct
3. Non pancreatic conditions like renal diseases, acute cholecystitis, intestinal obstruction, duodenal ulcer, alcoholism, diabetic ketoacidosis and following endoscopic retrograde cholangiopancreatography

#### NOTE:

1. Elevations 2 to 50 times the upper reference have been reported. The increase in serum lipase is not necessarily proportional to the severity of the attack. Normalization is not necessarily a sign of resolution.

#### ADVICE:

Concomitant testing of serum amylase and lipase is highly recommended to establish a diagnosis of pancreatic injury

NOTE:- RECHECK TWICE.

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



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