

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

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

NAME : Miss. MEHR
AGE/ GENDER : 24 YRS/FEMALE
COLLECTED BY :
REFERRED BY :
BARCODE NO. : 01515642
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1590087
REG. NO./LAB NO. : 012408240056
REGISTRATION DATE : 24/Aug/2024 02:11 PM
COLLECTION DATE : 24/Aug/2024 02:12PM
REPORTING DATE : 24/Aug/2024 05:00PM

Test Name	Value	Unit	Biological Reference interval
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CLINICAL CHEMISTRY/BIOCHEMISTRY

IRON PROFILE

IRON: SERUM by FERROZINE, SPECTROPHOTOMETRY	89.3	µg/dL	37.0 - 145.0
UNSATURATED IRON BINDING CAPACITY (UIBC) :SERUM by FERROZINE, SPECTROPHOTOMETRY	227.09	µg/dL	150.0 - 336.0
TOTAL IRON BINDING CAPACITY (TIBC) :SERUM by SPECTROPHOTOMETRY	316.39	µg/dL	230 - 430
%TRANSFERRIN SATURATION: SERUM by CALCULATED, SPECTROPHOTOMETRY (FERENE)	28.22	%	15.0 - 50.0
TRANSFERRIN: SERUM by SPECTROPHOTOMETRY (FERENE)	224.64	mg/dL	200.0 - 350.0

INTERPRETATION:-

VARIABLES	ANEMIA OF CHRONIC DISEASE	IRON DEFICIENCY ANEMIA	THALASSEMIA α/β TRAIT
SERUM IRON:	Normal to Reduced	Reduced	Normal
TOTAL IRON BINDING CAPACITY:	Decreased	Increased	Normal
% TRANSFERRIN SATURATION:	Decreased	Decreased < 12-15 %	Normal
SERUM FERRITIN:	Normal to Increased	Decreased	Normal or Increased

IRON:

1.Serum iron studies is recommended for differential diagnosis of microcytic hypochromic anemia.i.e iron deficiency anemia, zinc deficiency anemia,anemia of chronic disease and thalassemia syndromes.
2. It is essential to isolate iron deficiency anemia from Beta thalassemia syndromes because during iron replacement which is therapeutic for iron deficiency anemia, is severely contra-indicated in Thalassemia.

TOTAL IRON BINDING CAPACITY (TIBC):

1.It is a direct measure of protein transferrin which transports iron from the gut to storage sites in the bone marrow.

% TRANSFERRIN SATURATION:

1.Occurs in idiopathic hemochromatosis and transfusional hemosiderosis where no unsaturated iron binding capacity is available for iron mobilization. Similar condition is seen in congenital deficiency of transferrin.

*** End Of Report ***



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