

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 : Mrs. RAMA RANI

AGE/ GENDER : 62 YRS/FEMALE **PATIENT ID** : 1592834

COLLECTED BY : SURJESH REG. NO./LAB NO. : 012408270031

 REFERRED BY
 : 27/Aug/2024 10:19 AM

 BARCODE NO.
 : 01515801
 COLLECTION DATE
 : 27/Aug/2024 10:33 AM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 27/Aug/2024 11:40 AM

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

Test Name Value Unit Biological Reference interval

CLINICAL CHEMISTRY/BIOCHEMISTRY

LIPID PROFILE: BASIC

CHOLESTEROL TOTAL: SERUM 187.42 mg/dL OPTIMAL: < 200.0

by CHOLESTEROL OXIDASE PAP

BORDERLINE HIGH: 200.0 - 239.0

HIGH CHOLESTEROL: > OR = 240.0

TRIGLYCERIDES: SERUM 213.75^H mg/dL OPTIMAL: < 150.0

by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC)

BORDERLINE HIGH: 150.0 - 199.0

HIGH: 200.0 - 499.0 VERY HIGH: > OR = 500.0

HDL CHOLESTEROL (DIRECT): SERUM 42.84 mg/dL LOW HDL: < 30.0

by SELECTIVE INHIBITION BORDERI INF. HIC

BORDERLINE HIGH HDL: 30.0 -

60.0

by CALCULATED, SPECTROPHOTOMETRY

ABOVE OPTIMAL: 100.0 - 129.0

BORDERLINE HIGH: 130.0 - 159.0

HIGH: 160.0 - 189.0 VERY HIGH: > OR = 190.0

NON HDL CHOLESTEROL: SERUM 144.58^H mg/dL OPTIMAL: < 130.0 by CALCULATED, SPECTROPHOTOMETRY

ABOVE OPTIMAL: 130.0 - 159.0 BORDERLINE HIGH: 160.0 - 189.0

HIGH: 190.0 - 219.0

VERY HIGH: > OR = 220.0

VLDL CHOLESTEROL: SERUM 42.75 mg/dL 0.00 - 45.00 by CALCULATED, SPECTROPHOTOMETRY

TOTAL LIPIDS: SERUM 588.59 mg/dL 350.00 - 700.00

by CALCULATED, SPECTROPHOTOMETRY

CHOLESTEROL/HDL RATIO: SERUM
by CALCULATED, SPECTROPHOTOMETRY

4.37
RATIO
LOW RISK: 3.30 - 4.40
AVERAGE RISK: 4.50 - 7.0

MODERATE RISK: 7.10 - 11.0

HIGH RISK: > 11.0 LDL/HDL RATIO: SERUM 2.38 RATIO LOW RISK: 0.50 - 3.0



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| Test Name | Value | Unit | Biological Reference interval |
|---|-------|-------|---|
| by CALCULATED, SPECTROPHOTOMETRY | | | MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0 |
| TRIGLYCERIDES/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY | 4.99 | RATIO | 3.00 - 5.00 |

INTERPRETATION:

1. Measurements in the same patient can show physiological analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.

2. As per NLA-2014 guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the

2. As per NLA-2014 guidelines, all adults above the age of 20 years should be screened for lipid status. Selective screening of children above the age of 2 years with a family history of premature cardiovascular disease or those with at least one parent with high total cholesterol is recommended.

3. Low HDL levels are associated with increased risk for Atherosclerotic Cardiovascular disease (ASCVD) due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.

4. NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogeniclipoproteins such as LDL, VLDL, IDL, Lpa, Chylomicron remnants) along

4. NLA-2014 identifies Non HDL Cholesterol (an indicator of all atherogeniclipoproteins such as LDL, VLDL, IDL, Lpa, Chylomicron remnants) along with LDL-cholesterol as co-primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL &Non HDL.

5. Additional testing for Apolipoprotein B, hsCRP,Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

*** End Of Report ***



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