

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

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

| | | | |
|-----------------------|--|--------------------------|------------------------|
| NAME | : Mr. KULDEEP SINGH SHAH | PATIENT ID | : 1611647 |
| AGE/ GENDER | : 68 YRS/MALE | REG. NO./LAB NO. | : 012409130016 |
| COLLECTED BY | : SURJESH | REGISTRATION DATE | : 13/Sep/2024 09:59 AM |
| REFERRED BY | : | COLLECTION DATE | : 13/Sep/2024 10:13AM |
| BARCODE NO. | : 01516865 | REPORTING DATE | : 13/Sep/2024 05:25PM |
| CLIENT CODE. | : KOS DIAGNOSTIC LAB | | |
| CLIENT ADDRESS | : 6349/1, NICHOLSON ROAD, AMBALA CANTT | | |

| Test Name | Value | Unit | Biological Reference interval |
|-----------|-------|------|-------------------------------|
|-----------|-------|------|-------------------------------|

HAEMATOLOGY

BLEEDING TIME (BT)

| | | | |
|--------------------------------------|----------------|------|-------|
| BLEEDING TIME (BT) by DUKE METHOD | 2 MINT 05 SEC. | MINS | 1 - 5 |
|--------------------------------------|----------------|------|-------|



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CLOTTING TIME (CT)

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| CLOTTING TIME (CT) by CAPILLARY TUBE METHOD | 6 MINT10 SEC. | MINS | 4 - 9 |
|--|---------------|------|-------|



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| BARCODE NO. | : 01516865 | REPORTING DATE | : 13/Sep/2024 11:04AM |
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| PROTHROMBIN TIME STUDIES (PT/INR) | | | |
| PT TEST (PATIENT) <i>by PHOTO OPTICAL CLOT DETECTION</i> | 11.6 | SECS | 11.5 - 14.5 |
| PT (CONTROL) <i>by PHOTO OPTICAL CLOT DETECTION</i> | 12 | SECS | |
| ISI <i>by PHOTO OPTICAL CLOT DETECTION</i> | 1.1 | | |
| INTERNATIONAL NORMALISED RATIO (INR) <i>by PHOTO OPTICAL CLOT DETECTION</i> | 0.96 | | 0.80 - 1.20 |
| PT INDEX <i>by PHOTO OPTICAL CLOT DETECTION</i> | 103.45 | % | |

INTERPRETATION:-

1. INR is the parameter of choice in monitoring adequacy of oral anti-coagulant therapy. Appropriate therapeutic range varies with the disease and treatment intensity.
2. Prolonged INR suggests potential bleeding disorder /bleeding complications
3. Results should be clinically correlated.
4. Test conducted on Citrated Plasma

| RECOMMENDED THERAPEUTIC RANGE FOR ORAL ANTI-COAGULANT THERAPY (INR) | | |
|---|----------------|--------------------------------------|
| INDICATION | | INTERNATIONAL NORMALIZED RATIO (INR) |
| Treatment of venous thrombosis | Low Intensity | 2.0 - 3.0 |
| Treatment of pulmonary embolism | | |
| Prevention of systemic embolism in tissue heart valves | | |
| Valvular heart disease | | |
| Acute myocardial infarction | | |
| Atrial fibrillation | | |
| Bileaflet mechanical valve in aortic position | High Intensity | 2.5 - 3.5 |
| Recurrent embolism | | |
| Mechanical heart valve | | |
| Antiphospholipid antibodies ⁺ | | |

COMMENTS:




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The prothrombin time (PT) and its derived measures of prothrombin ratio (PR) and international normalized ratio (INR) are measures of the efficacy of the extrinsic pathway of coagulation. PT test reflects the adequacy of factors I (fibrinogen), II (prothrombin), V, VII, and X. It is used in conjunction with the activated partial thromboplastin time (aPTT) which measures the intrinsic pathway.

The common causes of prolonged prothrombin time are :

- 1.Oral Anticoagulant therapy.
- 2.Liver disease.
- 3.Vit K. deficiency.
- 4.Disseminated intra vascular coagulation.
- 5.Factor 5, 7 , 10 or Prothrombin deficiency




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CLINICAL CHEMISTRY/BIOCHEMISTRY

GLUCOSE FASTING (F) AND POST PRANDIAL (PP)

| | | | |
|--|-------|-------|--|
| GLUCOSE FASTING (F): PLASMA <i>by GLUCOSE OXIDASE - PEROXIDASE (GOD-POD)</i> | 92.35 | mg/dL | NORMAL: < 100.0 PREDIABETIC: 100.0 - 125.0 DIABETIC: > OR = 126.0 |
| GLUCOSE POST PRANDIAL (PP): PLASMA <i>by GLUCOSE OXIDASE - PEROXIDASE (GOD-POD)</i> | 101.2 | mg/dL | NORMAL: < 140.00 PREDIABETIC: 140.0 - 200.0 DIABETIC: > OR = 200.0 |

INTERPRETATION:

IN ACCORDANCE WITH AMERICAN DIABETES ASSOCIATION GUIDELINES:

1. A fasting plasma glucose below 100 mg/dL and post-prandial plasma glucose level below 140 mg/dl is considered normal.
2. A fasting plasma glucose level between 100 - 125 mg/dl and post-prandial plasma glucose level between 140 – 200 mg/dL is considered as glucose intolerant or pre diabetic. A fasting and post-prandial blood test (after consumption of 75 gms of glucose) is recommended for all such patients.
3. A fasting plasma glucose level of above 125 mg/dL and post-prandial plasma glucose level 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.

*** End Of Report ***




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