



		y Chopra ogy & Microbiology) & Consultant Pathologist	Dr. Yugam MD (CEO & Consultant F	Pathology)
NAME	: Mr. OM PARKASH DAH	ПУА		
AGE/ GENDER	: 73 YRS/MALE	PATI	ENT ID	: 1598896
COLLECTED BY	:	REG.	NO./LAB NO.	:012409150011
REFERRED BY	:	REGI	STRATION DATE	: 15/Sep/2024 08:45 AM
BARCODE NO.	: 01516987	COLL	ECTION DATE	: 15/Sep/2024 08:48AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB	REPO	RTING DATE	: 15/Sep/2024 01:48PM
CLIENT ADDRESS	: 6349/1, NICHOLSON R	DAD, AMBALA CANTT		
Test Name		Value	Unit	Biological Reference interval
		CLINICAL PAT	HOLOGY	
		CLINICAL PATI MICROALBUMIN - RA		
MICROALBUMIN: RA	ANDOM URINE			0 - 25
MICROALBUMIN: RA		MICROALBUMIN - RA	NDOM URINE mg/L	0 - 25 0 - 30
MICROALBUMIN: R. by NEPHLOMETRY <u>INTERPRETATION</u> :-	NORMAL:	MICROALBUMIN - RA 131.32 ^H	NDOM URINE mg/L	

2. Diabetic nephropathy or kidney disease is the most common cause of end stage renal disease(ERSD) or kidney failure.

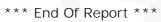
3. Presence of Microalbuminuria is an early indicator of onset of compromised renal function in these patients.

4. Microalbuminuria is the condition when urinary albumin excre tion is between 30-300 mg & above this it is called as macroalbuminuria, the presence of which indicates serious kidney disease.

5. Microalbuminuria is not only associated with kidney disease but of cardiovascular disease in patients with dibetes & hypertension.

6. Microalbuminuria reflects vascular damage & appear to be a marker of of early arterial disease & endothelial dysfunction.

NOTE:- IF A PATIENT HAS = 1+ PROTEINURIA (30 mg/dl OR 300 mg/L) BY URINE DIPSTICK (URINEANALYSIS), OVERT PROTEINURIA IS PRESENT AND TESTING FOR MICROALBUMIN IS INAPPROPIATE. IN SUCH A CASE, URINE PROTEIN: CREATININE RATIO OR 24 HOURS TOTAL URINE MICROPROTEIN IS APPROPIATE.







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TEST PERFORMED AT KOS DIAGNOSTIC LAB. AMBALA CANTT