

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

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

NAME : Mr. VINEET  
AGE/ GENDER : 42 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01518685  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1640533  
REG. NO./LAB NO. : 012410110014  
REGISTRATION DATE : 11/Oct/2024 09:32 AM  
COLLECTION DATE : 11/Oct/2024 09:33AM  
REPORTING DATE : 11/Oct/2024 10:53AM

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

CLINICAL CHEMISTRY/BIOCHEMISTRY

UREA

|                                                           |       |       |               |
|-----------------------------------------------------------|-------|-------|---------------|
| UREA: SERUM<br>by UREASE - GLUTAMATE DEHYDROGENASE (GLDH) | 28.51 | mg/dL | 10.00 - 50.00 |
|-----------------------------------------------------------|-------|-------|---------------|



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CREATININE

|                                                      |      |       |             |
|------------------------------------------------------|------|-------|-------------|
| CREATININE: SERUM<br>by ENZYMATIC, SPECTROPHOTOMETRY | 1.26 | mg/dL | 0.40 - 1.40 |
|------------------------------------------------------|------|-------|-------------|



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| <b>ELECTROLYTES COMPLETE PROFILE</b>                        |       |        |                               |
| SODIUM: SERUM<br><i>by ISE (ION SELECTIVE ELECTRODE)</i>    | 139.6 | mmol/L | 135.0 - 150.0                 |
| POTASSIUM: SERUM<br><i>by ISE (ION SELECTIVE ELECTRODE)</i> | 4.49  | mmol/L | 3.50 - 5.00                   |
| CHLORIDE: SERUM<br><i>by ISE (ION SELECTIVE ELECTRODE)</i>  | 104.7 | mmol/L | 90.0 - 110.0                  |

#### **INTERPRETATION:-**

##### **SODIUM:-**

Sodium is the major cation of extra-cellular fluid. Its primary function in the body is to chemically maintain osmotic pressure & acid base balance & to transmit nerve impulse.

##### **HYPONATREMIA (LOW SODIUM LEVEL) CAUSES:-**

1. Low sodium intake.
2. Sodium loss due to diarrhea & vomiting with adequate water and iadequate salt replacement.
3. Diuretics abuses.
4. Salt loosing nephropathy.
5. Metabolic acidosis.
6. Adrenocortical issuficiency .
7. Hepatic failure.

##### **HYPERNATREMIA (INCREASED SODIUM LEVEL) CAUSES:-**

1. Hyperapnea (Prolonged)
2. Diabetes insipidus
3. Diabetic acidosis
4. Cushings syndrome
5. Dehydration

##### **POTASSIUM:-**

Potassium is the major cation in the intracellular fluid. 90% of potassium is concentrated within the cells. When cells are damaged, potassium is released in the blood.

##### **HYPOKALEMIA (LOW POTASSIUM LEVELS):-**

1. Diarrhoea, vomiting & malabsorption.
2. Severe Burns.
3. Increased Secretions of Aldosterone

##### **HYPERKALEMIA (INCREASED POTASSIUM LEVELS):-**

1. Oliguria
2. Renal failure or Shock
3. Respiratory acidosis





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4.Hemolysis of blood

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



  
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