



MD (Pathology & Mi		Dr. Vinay Chopra MD (Pathology & Micro Chairman & Consultant	1icrobiology) MD ((Pathology)	
NAME	: Mr. AYUSH					
AGE/ GENDER	: 26 YRS/MALI	E	P	ATIENT ID	: 1657092	
COLLECTED BY	: SURJESH		R	EG. NO./LAB NO.	: 012410300014	
REFERRED BY	:		R	EGISTRATION DATE	: 30/Oct/2024 09:45 AM	
BARCODE NO.	:01519798		C	OLLECTION DATE	: 30/Oct/2024 09:52AM	
CLIENT CODE.	: KOS DIAGNO	STIC LAB	R	EPORTING DATE	: 30/Oct/2024 11:36AM	
CLIENT ADDRESS	: 6349/1, NICI	HOLSON ROAD, AMBA	LA CANTT			
Test Name			Value	Unit	Biological Reference interval	
		CLINICAL	CHEMIST	RY/BIOCHEMIST	RY	
				FILE : BASIC		
CHOLESTEROL TO by CHOLESTEROL O			167.06	mg/dL	OPTIMAL: < 200.0 BORDERLINE HIGH: 200.0 - 239.0 HIGH CHOLESTEROL: > OR =	
TRIGLYCERIDES: SERUM by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC		NZYMATIC)	162.04 ^H	mg/dL	240.0 OPTIMAL: < 150.0 BORDERLINE HIGH: 150.0 - 199.0 HIGH: 200.0 - 499.0 VERY HIGH: > OR = 500.0	
HDL CHOLESTERO		RUM	35.4	mg/dL	LOW HDL: < 30.0 BORDERLINE HIGH HDL: 30.0 60.0 HIGH HDL: > OR = 60.0	
LDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		RΥ	99.25	mg/dL	OPTIMAL: < 100.0 ABOVE OPTIMAL: 100.0 - 129.0 BORDERLINE HIGH: 130.0 - 159.0 HIGH: 160.0 - 189.0	
NON HDL CHOLES' by Calculated, Spe			131.66 ^H	mg/dL	VERY HIGH: > OR = 190.0 OPTIMAL: < 130.0 ABOVE OPTIMAL: 130.0 - 159.0 BORDERLINE HIGH: 160.0 - 189.0 HIGH: 190.0 - 219.0 VERY HIGH: > OR = 220.0	
VLDL CHOLESTER			32.41	mg/dL	0.00 - 45.00	
by CALCULATED, SPE TOTAL LIPIDS: SEE by CALCULATED, SPE	RUM		496.16	mg/dL	350.00 - 700.00	
•	DL RATIO: SERU		4.72 ^H	RATIO	LOW RISK: 3.30 - 4.40	

DR.VINAY CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY) DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST MBBS , MD (PATHOLOGY)

KOS Central Lab:6349/1, Nicholson Road, Ambala Cantt -133 001, HaryanaKOS Molecular Lab:IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt -133 001, Haryana0171-2643898, +91 99910 43898care@koshealthcare.comwww.koshealthcare.comwww.koshealthcare.com







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Test Name		Value	Unit	Biological Reference interval
LDL/HDL RATIO: SERUM by Calculated, spectrophotometry		2.8	RATIO	MODERATE RISK: 7.10 - 11.0 HIGH RISK: > 11.0 LOW RISK: 0.50 - 3.0 MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0
TRIGLYCERIDES/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY		4.58	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 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 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 ***





DR.VINAY CHOPRA CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

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