

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

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

NAME : Mrs. MONIKA  
AGE/ GENDER : 28 YRS/FEMALE  
COLLECTED BY : SURJESH  
REFERRED BY :  
BARCODE NO. : 01522062  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1692176  
REG. NO./LAB NO. : 012412060020  
REGISTRATION DATE : 06/Dec/2024 10:58 AM  
COLLECTION DATE : 06/Dec/2024 11:14AM  
REPORTING DATE : 06/Dec/2024 11:21AM

Test Name	Value	Unit	Biological Reference interval
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## HAEMATOLOGY HAEMOGLOBIN (HB)

HAEMOGLOBIN (HB) by CALORIMETRIC	7.2 <sup>L</sup>	gm/dL	12.0 - 16.0
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### INTERPRETATION:-

Hemoglobin is the protein molecule in red blood cells that carries oxygen from the lungs to the body's tissues and returns carbon dioxide from the tissues back to the lungs.

A low hemoglobin level is referred to as ANEMIA or low red blood count.

#### ANEMIA ( DECREASED HAEMOGLOBIN):

- 1) Loss of blood (traumatic injury, surgery, bleeding, colon cancer or stomach ulcer)
- 2) Nutritional deficiency (iron, vitamin B12, folate)
- 3) Bone marrow problems (replacement of bone marrow by cancer)
- 4) Suppression by red blood cell synthesis by chemotherapy drugs
- 5) Kidney failure
- 6) Abnormal hemoglobin structure (sickle cell anemia or thalassemia).

#### POLYCYTHEMIA (INCREASED HAEMOGLOBIN):

- 1) People in higher altitudes (Physiological)
- 2) Smoking (Secondary Polycythemia)
- 3) Dehydration produces a falsely rise in hemoglobin due to increased haemoconcentration
- 4) Advanced lung disease (for example, emphysema)
- 5) Certain tumors
- 6) A disorder of the bone marrow known as polycythemia rubra vera,
- 7) Abuse of the drug erythropoietin (Epogen) by athletes for blood doping purposes (increasing the amount of oxygen available to the body by chemically raising the production of red blood cells).

NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD



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CLINICAL CHEMISTRY/BIOCHEMISTRY

UREA

UREA: SERUM by UREASE - GLUTAMATE DEHYDROGENASE (GLDH)	111.27 <sup>H</sup>	mg/dL	10.00 - 50.00
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CREATININE

CREATININE: SERUM  
by ENZYMATIC, SPECTROPHOTOMETRY

8.66<sup>H</sup>

mg/dL

0.40 - 1.20



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<b>BARCODE NO.</b>	: 01522062	<b>REPORTING DATE</b>	: 06/Dec/2024 11:52AM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
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### POTASSIUM

POTASSIUM: SERUM by ISE (ION SELECTIVE ELECTRODE)	4.84	mmol/L	3.50 - 5.00
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#### INTERPRETATION:-

##### 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
4. Hemolysis of blood

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



  
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