



	Dr. Vinay Cł MD (Pathology & Chairman & Cor		MD	Dr. Yugam Chopra MD (Pathology) CEO & Consultant Pathologist	
NAME	: Mr. RICKY BHATIA				
AGE/ GENDER	: 44 YRS/MALE	F	PATIENT ID	: 1629407	
COLLECTED BY	:	F	REG. NO./LAB NO.	: 012412110014	
REFERRED BY	:	ŀ	REGISTRATION DATE	: 11/Dec/2024 09:37 AM	
BARCODE NO.	:01522294	C	COLLECTION DATE	: 11/Dec/2024 09:38AM	
CLIENT CODE.	: KOS DIAGNOSTIC LAB	F	REPORTING DATE	: 11/Dec/2024 11:42AM	
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD,	AMBALA CANTT			
Test Name		Value	Unit	Biological Reference interval	
	CUNI	сат снеміст	RY/BIOCHEMIST	'RV	
	CLINI		FILE : BASIC	NI	
				OPTIMAL: < 200.0	
CHOLESTEROL TOTAL: SERUM by CHOLESTEROL OXIDASE PAP		171.6	mg/dL	BORDERLINE HIGH: 200.0 - 239.0 HIGH CHOLESTEROL: > OR = 240.0	
TRIGLYCERIDES: S by GLYCEROL PHOSE	ERUM phate oxidase (enzymatic)	189.11 ^H	mg/dL	OPTIMAL: < 150.0 BORDERLINE HIGH: 150.0 - 199.0 HIGH: 200.0 - 499.0	
		45.00	. / 11	VERY HIGH: $> OR = 500.0$	
HDL CHOLESTEROL (DIRECT): SERUM by SELECTIVE INHIBITION		45.88	mg/dL	LOW HDL: < 30.0 BORDERLINE HIGH HDL: 30.0 60.0 HIGH HDL: > OR = 60.0	
LDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		87.9	mg/dL	OPTIMAL: < 100.0 ABOVE OPTIMAL: 100.0 - 129.0 BORDERLINE HIGH: 130.0 - 159.0 HIGH: 160.0 - 189.0 VERY HIGH: > OR = 190.0	
NON HDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		125.72	mg/dL	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(by CALCULATED, SPE		37.82	mg/dL	0.00 - 45.00	
FOTAL LIPIDS: SEF	RUM	532.31	mg/dL	350.00 - 700.00	
by CALCULATED, SPE	CTROPHOTOMETRY	3.74	RATIO	LOW RISK: 3.30 - 4.40	

KOS Diagnostic Lab (A Unit of KOS Healthcare)



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

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	MD (Patholog	Vinay ChopraDr. Yugam Chopra(Pathology & Microbiology)MD (Pathology)airman & Consultant PathologistCEO & Consultant Pathologist		(Pathology)
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Test Name		Value	Unit	Biological Reference interval
LDL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY		1.92	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		4.12	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 ***





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