

NAME	: Mrs. MEENA JINDAL		
AGE/ GENDER	: 52 YRS/FEMALE	PATIENT ID	: 1697942
COLLECTED BY	: SURJESH	REG. NO./LAB NO.	: 012412130014
REFERRED BY	: CENTRAL PHOENIX CLUB (AMBALA CANTT)	REGISTRATION DATE	: 13/Dec/2024 09:17 AM
BARCODE NO.	: 01522389	COLLECTION DATE	: 13/Dec/2024 09:26AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB	REPORTING DATE	: 13/Dec/2024 12:13PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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CLINICAL CHEMISTRY/BIOCHEMISTRY

URIC ACID

URIC ACID: SERUM <i>by URICASE - OXIDASE PEROXIDASE</i>	4.88	mg/dL	2.50 - 6.80
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INTERPRETATION:-

1.GOUT occurs when high levels of Uric Acid in the blood cause crystals to form & accumulate around a joint.
2.Uric Acid is the end product of purine metabolism . Uric acid is excreted to a large degree by the kidneys and to a smaller degree in the intestinal tract by microbial degradation.

INCREASED:-

(A).DUE TO INCREASED PRODUCTION:-

- 1.Idiopathic primary gout.
- 2.Excessive dietary purines (organ meats,legumes,anchovies, etc).
- 3.Cytolytic treatment of malignancies especially leukemais & lymphomas.
- 4.Polycythema vera & myeloid metaplasia.
- 5.Psoriasis.
- 6.Sickle cell anaemia etc.

(B).DUE TO DECREASED EXCRETION (BY KIDNEYS)

- 1.Alcohol ingestion.
- 2.Thiazide diuretics.
- 3.Lactic acidosis.
- 4.Aspirin ingestion (less than 2 grams per day).
- 5.Diabetic ketoacidosis or starvation.
- 6.Renal failure due to any cause etc.

DECREASED:-

(A).DUE TO DIETARY DEFICIENCY

- 1.Dietary deficiency of Zinc, Iron and molybdenum.
- 2.Fanconi syndrome & Wilsons disease.
- 3.Multiple sclerosis .
- 4.Syndrome of inappropriate antidiuretic hormone (SIADH) secretion & low purine diet etc.

(B).DUE TO INCREASED EXCRETION

- 1.Drugs:-Probenecid , sulphinyprazone, aspirin doses (more than 4 grams per day), corticosteroids and ACTH, anti-coagulants and estrogens etc.

*** End Of Report ***



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