

# **KOS Diagnostic Lab**

(A Unit of KOS Healthcare)



Dr. Vinay Chopra
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NAME : Mrs. SANTOSH CHHABRA

**AGE/ GENDER** : 64 YRS/FEMALE **PATIENT ID** : 1701227

COLLECTED BY : SURJESH REG. NO./LAB NO. : 012412170021

 REFERRED BY
 : 17/Dec/2024 09:45 AM

 BARCODE NO.
 : 01522568
 COLLECTION DATE
 : 17/Dec/2024 09:59AM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 17/Dec/2024 11:34AM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit Biological Reference interval

# CLINICAL CHEMISTRY/BIOCHEMISTRY URIC ACID

URIC ACID: SERUM 4.65 mg/dL 2.50 - 6.80

by URICASE - OXIDASE PEROXIDASE

#### **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. Polycythemai vera & myeloid metaplasia.

5.Psoriasis.

6.Sickle cell anaemia etc.

## (B).DUE TO DECREASED EXCREATION (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 EXCREATION

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

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



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