

### **KOS Diagnostic Lab**

(A Unit of KOS Healthcare)



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

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

NAME : Mr. SARAB SINGH

**AGE/ GENDER** : 72 YRS/MALE **PATIENT ID** : 1712780

COLLECTED BY : REG. NO./LAB NO. : 012412310032

 REFERRED BY
 : 31/Dec/2024 01:40 PM

 BARCODE NO.
 : 01523265
 COLLECTION DATE
 : 31/Dec/2024 01:42 PM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 31/Dec/2024 02:08 PM

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

Test Name Value Unit Biological Reference interval

# COAGULATION PANEL PROTHROMBIN TIME STUDIES (PT/INR)

PT TEST (PATIENT) by PHOTO OPTICAL CLOT DETECTION	14.4	SECS	11.5 - 14.5
PT (CONTROL) by PHOTO OPTICAL CLOT DETECTION	12	SECS	
ISI by PHOTO OPTICAL CLOT DETECTION	1.1		
INTERNATIONAL NORMALISED RATIO (INR) by PHOTO OPTICAL CLOT DETECTION	1.22 <sup>H</sup>		0.80 - 1.20
PT INDEX by PHOTO OPTICAL CLOT DETECTION	83.33	%	

#### INTERPRETATION:-

- 1.INR is the parameter of choice in monitoring adequacy of oral anti-coagulant therapy. Appropriate therapeutic range varies with the disease and treatment intensity.
- 2. Prolonged INR suggests potential bleeding disorder /bleeding complications
- 3. Results should be clinically correlated.
- 4. Test conducted on Citrated Plasma

RECOMMENDED THERAPEUTIC RANGE FOR ORAL ANTI-COAGULANT THERAPY (INR)					
INDICATION		INTERNATIONAL NORMALIZED RATIO (INR)			
Treatment of venous thrombosis					
Treatment of pulmonary embolism					
Prevention of systemic embolism in tissue heart valves					
Valvular heart disease	Low Intensity		2.0 - 3.0		
Acute myocardial infarction					
Atrial fibrillation					
Bileaflet mechanical valve in aortic position					
Recurrent embolism					
Mechanical heart valve	High Intensity	-/-	2.5 - 3.5		



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Antiphospholipid antibodies <sup>+</sup>			

#### **COMMENTS:**

The prothrombin time (PT) and its derived measures of prothrombin ratio (PR) and international normalized ratio (INR) are measures of the efficacy of the extrinsic pathway of coagulation. PT test reflects the adequacy of factors I (fibrinogen), II (prothrombin), V, VII, and X. It is used in conjunction with the activated partial thromboplastin time (aPTT) which measures the intrinsic pathway.

The common causes of prolonged prothrombin time are:

1. Oral Anticoagulant therapy.

2.Liver disease.

3. Vit K. deficiency.

4. Disseminated intra vascular coagulation.

5. Factor 5, 7, 10 or Prothrombin dificiency

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### ACTIVATED PARTIAL THROMBOPLASTIN TIME (APTT)

APTT (PATIENT VALUE)

37.2 SECS

28.6 - 38.2

by PHOTO OPTICAL CLOT DETECTION

#### **INTERPRETATION:-**

The activated partial thromboplastin time (aPTT or APTT) is a performance indicator measuring the efficacy of both the **intrinsic** (now referred to as the contact activation pathway) and the common coagulation pathways. Apart from detecting abnormalities in blood clotting, it is also used to monitor the treatment effects with heparin, a major anticoagulant. It is used in conjunction with the prothrombin time (PT) which measures the extrinsic pathway.

#### **COMMON CAUSES OF PROLONGED APTT:-**

- 1. Disseminated intravascular coagulation.
- 2. Liver disease.
- 3. Massive transfusion with stored blood.
- 4. Heparin administration or contamination.
- 5. A circulating Anticogulant.
- 6. Deficiency of a coagulation Factor other than factor 7.

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



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