

## **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. VINEET

**AGE/ GENDER** : 37 YRS/MALE **PATIENT ID** : 1767780

**COLLECTED BY** : 012502240006 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 24/Feb/2025 08:17 AM BARCODE NO. :01526049 **COLLECTION DATE** : 24/Feb/2025 08:23AM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 24/Feb/2025 10:34AM

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

**Value** Unit **Test Name Biological Reference interval** 

## CLINICAL CHEMISTRY/BIOCHEMISTRY

LIPID PROFILE: BASIC

CHOLESTEROL TOTAL: SERUM OPTIMAL: < 200.0 227.24<sup>H</sup> mg/dL

by CHOLESTEROL OXIDASE PAP BORDERLINE HIGH: 200.0 -

239.0

HIGH CHOLESTEROL: > OR =

240.0

OPTIMAL: < 150.0 TRIGLYCERIDES: SERUM 811.66<sup>H</sup> mg/dL

by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC) **BORDERLINE HIGH: 150.0 -**

199.0

HIGH: 200.0 - 499.0 VERY HIGH: > OR = 500.0

HDL CHOLESTEROL (DIRECT): SERUM LOW HDL: < 30.0 35.84 mg/dL

by SELECTIVE INHIBITION BORDERLINE HIGH HDL: 30.0 -

> 60.0  $HIGH\ HDL: > OR = 60.0$

LDL CHOLESTEROL: SERUM NOT CALCULATED mg/dL OPTIMAL: < 100.0

by CALCULATED, SPECTROPHOTOMETRY ABOVE OPTIMAL: 100.0 - 129.0

BORDERLINE HIGH: 130.0 -

HIGH: 160.0 - 189.0 VERY HIGH: > OR = 190.0

NON HDL CHOLESTEROL: SERUM 191.4<sup>H</sup> mg/dL OPTIMAL: < 130.0

by CALCULATED, SPECTROPHOTOMETRY ABOVE OPTIMAL: 130.0 - 159.0

BORDERLINE HIGH: 160.0 -

189.0

HIGH: 190.0 - 219.0 VERY HIGH: > OR = 220.0

VLDL CHOLESTEROL: SERUM NOT CALCULATED mg/dL 0.00 - 45.00

by CALCULATED, SPECTROPHOTOMETRY

TOTAL LIPIDS: SERUM

NOT CALCULATED mg/dL 350.00 - 700.00 by CALCULATED, SPECTROPHOTOMETRY

CHOLESTEROL/HDL RATIO: SERUM  $6.34^{H}$ RATIO LOW RISK: 3.30 - 4.40 by CALCULATED, SPECTROPHOTOMETRY

AVERAGE RISK: 4.50 - 7.0



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

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





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Test Name	Value	Unit	Biological Reference interval
LDL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY	NOT CALCULATED	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 by CALCULATED, SPECTROPHOTOMETRY	22.65 <sup>H</sup>	RATIO	3.00 - 5.00
NOTE 2	WHEN TRIGLYCERIDI	ES VALUE >400 mg/d	IL THE CALCULATED VALUES OF

LDL AND VLDL ARE NOT RELIABLE

**ADVICE** KINDLY CORRELATE CLINICALLY

**INTERPRETATION:** 

T.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

5. Additional testing for Apolipoprotein B, hsCRP,Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement

NOTE - SAMPLE IS LIPEMIC. LIPEMIC SAMPLE CAN FALSELY ALTER OTHER PARAMETERS RESULTS.

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



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