



NAME : Mrs. KAMLE AGE/ GENDER : 64 YRS/FEMA COLLECTED BY : REFERRED BY : BARCODE NO. : 01526146 CLIENT CODE. : KOS DIAGNO CLIENT ADDRESS : 6349/1, NICH Test Name CHOLESTEROL TOTAL: SERUM by CHOLESTEROL OXIDASE PAP	ALE	PATIENT ID REG. NO./LAB NO. REGISTRATION DATE COLLECTION DATE REPORTING DATE	: 1770764 : 012502260002 : 26/Feb/2025 07:49 AM : 26/Feb/2025 07:51AM : 26/Feb/2025 10:49AM
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Test Name CHOLESTEROL TOTAL: SERUM by CHOLESTEROL OXIDASE PAP TRIGLYCERIDES: SERUM		ſT	
CHOLESTEROL TOTAL: SERUM by cholesterol oxidase pap TRIGLYCERIDES: SERUM	Value		
by CHOLESTEROL OXIDASE PAP		Unit	Biological Reference interval
by CHOLESTEROL OXIDASE PAP	CLINICAL CHEM	ISTRY/BIOCHEMIST	'RV
by CHOLESTEROL OXIDASE PAP		ROFILE : BASIC	NI
by CHOLESTEROL OXIDASE PAP	171.19	mg/dL	OPTIMAL: < 200.0
	171.19	liig/ uL	BORDERLINE HIGH: 200.0 -
			HIGH CHOLESTEROL: > OR = 240.0
by GLYCEROL PHOSPHATE OXIDASE (E	146.79	mg/dL	OPTIMAL: < 150.0
	:NZYMATIC)		BORDERLINE HIGH: 150.0 - 199.0
			HIGH: 200.0 - 499.0
		()7	VERY HIGH: $> OR = 500.0$
HDL CHOLESTEROL (DIRECT): SE by SELECTIVE INHIBITION	CRUM 46.73	mg/dL	LOW HDL: < 30.0 BORDERLINE HIGH HDL: 30.0
			60.0
LDL CHOLESTEROL: SERUM	95.1	mg/dI	HIGH HDL: > OR = 60.0 OPTIMAL: < 100.0
by CALCULATED, SPECTROPHOTOMET		mg/dL	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, SPECTROPHOTOMET		mg/dL	OPTIMAL: < 130.0 ABOVE OPTIMAL: 130.0 - 159.0
.,			BORDERLINE HIGH: 160.0 -
			189.0 IUCU: 100.0 - 210.0
			HIGH: 190.0 - 219.0 VERY HIGH: > OR = 220.0
VLDL CHOLESTEROL: SERUM	29.36	mg/dL	0.00 - 45.00
by CALCULATED, SPECTROPHOTOMET	RY 489.17	mg/dL	350.00 - 700.00
by CALCULATED, SPECTROPHOTOMET	RY	_	
CHOLESTEROL/HDL RATIO: SERU by CALCULATED, SPECTROPHOTOMET		RATIO	LOW RISK: 3.30 - 4.40
			AVERAGE RISK: 4.50 - 7.0

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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TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.





	Dr. Vinay ChopraDr. Yugam ChopraMD (Pathology & Microbiology)MD (Pathology)Chairman & Consultant PathologistCEO & Consultant Pathologist						
NAME	: Mrs. KAMLESH RANI						
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CLIENT ADDRESS	: 6349/1, NICHOLSON ROAI), AMBALA CANTT					
Test Name		Value	Unit	Biological Reference interval			
LDL/HDL RATIO: S by CALCULATED, SPE		2.04	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		3.14	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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