

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

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

NAME : Mr. LOVISH
AGE/ GENDER : 16 YRS/MALE
COLLECTED BY :
REFERRED BY :
BARCODE NO. : 01526221
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 226529
REG. NO./LAB NO. : 012502270047
REGISTRATION DATE : 27/Feb/2025 05:44 PM
COLLECTION DATE : 27/Feb/2025 05:44PM
REPORTING DATE : 27/Feb/2025 07:43PM


Test Name	Value	Unit	Biological Reference interval
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CLINICAL CHEMISTRY/BIOCHEMISTRY

CREATININE

CREATININE: SERUM by ENZYMATIC, SPECTROPHOTOMETRY	1.54 ^H	mg/dL	0.40 - 1.40
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BARCODE NO.	: 01526221	REPORTING DATE	: 28/Feb/2025 03:58AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		
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CLINICAL PATHOLOGY

MICROALBUMIN/CREATININE RATIO - RANDOM URINE

MICROALBUMIN: RANDOM URINE by SPECTROPHOTOMETRY	521.5^H	mg/L	0 - 25
CREATININE: RANDOM URINE by SPECTROPHOTOMETRY	38.29	mg/dL	20 - 320
MICROALBUMIN/CREATININE RATIO - RANDOM URINE by SPECTROPHOTOMETRY	1361.97^H	mg/g	0 - 30

INTERPRETATION:-

PHYSIOLOGICALLY NORMAL:	mg/L	0 - 30
MICROALBUMINURIA:	mg/L	30 - 300
GROSS PROTEINURIA:	mg/L	> 300

Long standing un-treated Diabetes and Hypertension can lead to renal dysfunction.

2. Diabetic nephropathy or kidney disease is the most common cause of end stage renal disease(ERSD) or kidney failure.

3. Presence of Microalbuminuria is an early indicator of onset of compromised renal function in these patients.

4. Microalbuminuria is the condition when urinary albumin excretion is between 30-300 mg & above this it is called as macroalbuminuria, the presence of which indicates serious kidney disease.

5. Microalbuminuria is not only associated with kidney disease but of cardiovascular disease in patients with diabetes & hypertension.

6. Microalbuminuria reflects vascular damage & appear to be a marker of early arterial disease & endothelial dysfunction.

NOTE:- IF A PATIENT HAS = 1+ PROTEINURIA (30 mg/dl OR 300 mg/L) BY URINE DIPSTICK (URINE ANALYSIS), OVERT PROTEINURIA IS PRESENT AND TESTING FOR MICROALBUMIN IS INAPPROPRIATE. IN SUCH A CASE, URINE PROTEIN:CREATININE RATIO OR 24 HOURS TOTAL URINE MICROPROTEIN IS APPROPRIATE.

*** End Of Report ***




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