



		Chopra gy & Microbiology) Consultant Pathologist	Dr. Yugam Chopra MD (Pathology) CEO & Consultant Pathologist		
NAME	: Mrs. KAVITA RANI				
AGE/ GENDER	: 45 YRS/FEMALE	PATI	ENT ID	: 1809484	
COLLECTED BY	:	REG.	NO./LAB NO.	: 012503280026	
<b>REFERRED BY</b>	:		STRATION DATE	: 28/Mar/2025 10:23 AM	
BARCODE NO.	:01527925	COLI	ECTION DATE	: 28/Mar/2025 10:25AM	
CLIENT CODE.	: KOS DIAGNOSTIC LAB	REPO	ORTING DATE	: 28/Mar/2025 12:31PM	
CLIENT ADDRESS	: 6349/1, NICHOLSON ROA	AD, AMBALA CANTT			
Test Name		Value	Unit	<b>Biological Reference interval</b>	
	CLINI	CAL CHEMISTR	Y/BIOCHEMIS	STRY	
		LIPID PROFIL	E : BASIC		
CHOLESTEROL TO	TAL · SERUM	165.66	mg/dL	<b>OPTIMAL</b> : < 200.0	
by CHOLESTEROL OXIDASE PAP		105.00	ing/ dL	BORDERLINE HIGH: 200.0 -	
				239.0	
				HIGH CHOLESTEROL: > OR = 240.0	
TRIGLYCERIDES: SERUM by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC)		159.78 <sup>H</sup>	mg/dL	OPTIMAL: < 150.0	
		159.78	ing, di	BORDERLINE HIGH: 150.0 -	
				199.0	
				HIGH: 200.0 - 499.0 VERY HIGH: > OR = 500.0	
HDL CHOLESTER	DL (DIRECT): SERUM	43.86	mg/dL	LOW HDL: < 30.0	
by SELECTIVE INHIBITION			8	BORDERLINE HIGH HDL: 30.0	
				60.0	
	I · SEDIM	89.84	ma/dI	HIGH HDL: > OR = 60.0 OPTIMAL: < 100.0	
LDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		69.64	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 CHOLES	TEROL: SERUM	121.8	mg/dL	OPTIMAL: < 130.0	
by CALCULATED, SPE	CTROPHOTOMETRY			ABOVE OPTIMAL: 130.0 - 159.	
				BORDERLINE HIGH: 160.0 -	
				189.0 HIGH: 190.0 - 219.0	
				VERY HIGH: $> OR = 220.0$	
		31.96	mg/dL	0.00 - 45.00	
VLDL CHOLESTER by Calculated, spe TOTAL LIPIDS: SE		491.1	mg/dL	350.00 - 700.00	

KOS Diagnostic Lab (A Unit of KOS Healthcare)

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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					
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Test Name		Value	Unit	Biological Reference interval		
CHOLESTEROL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY		3.78	RATIO	LOW RISK: 3.30 - 4.40 AVERAGE RISK: 4.50 - 7.0 MODERATE RISK: 7.10 - 11.0 HIGH RISK: > 11.0		
LDL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY		2.05	RATIO	LOW RISK: 0.50 - 3.0 MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0		
TRIGLYCERIDES/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY		3.64	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.

 Cow 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.
 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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