

## **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

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**NAME** : Mr. MANOJ GULATI

**AGE/ GENDER** : 49 YRS/MALE **PATIENT ID** : 1667933

COLLECTED BY REG. NO./LAB NO. :012503280030

REFERRED BY **REGISTRATION DATE** : 28/Mar/2025 11:22 AM BARCODE NO. :01527929 **COLLECTION DATE** : 28/Mar/2025 11:24AM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 28/Mar/2025 04:47PM

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

Value Unit Test Name **Biological Reference interval** 

## **TUMOUR MARKER** CARCINO EMBRYONIC ANTIGEN (CEA)

CARCINO EMBRYONIC ANTIGEN (CEA): SERUM ng/mL

by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)

1. Carcinoembryonic antigen (CEA) is a glycoprotein normally found in embryonic entodermal epithelium.
2. Increased levels may be found in patients with primary colorectal cancer or other malignancies including medullary thyroid carcinoma and breast, gastrointestinal tract, liver, lung, ovarian, pancreatic, and prostatic cancers

3. Serial monitoring of CEA should begin prior to initiation of cancer therapy to verify post therapy decrease in concentration and to establish a baseline for evaluating possible recurrence. Levels generally return to normal within 1 to 4 months after removal of cancerous tissue. **CLINICAL SIGNIFICANCE**:

1. Monitoring colorectal cancer and selected other cancers such as medullary thyroid carcinoma 2. May be useful in assessing the effectiveness of chemotherapy or radiation treatment.

1. Carcinoembryonic antigen levels should not be used for screening of the general population for undetected cancers.
2. Grossly elevated carcino-embryonic antigen (CEA) concentrations (>20 ng/mL) in a patient with compatible symptoms are strongly suggestive of the presence of cancer and also suggest metastasis.

3. Most healthy subjects (97%) have values < or =3.0 ng/mL.

4. After removal of a colorectal tumor, the serum CEA concentration should return to normal by 6 weeks, unless there is residual tumor.

5. Increases in test values over time in a patient with a history of cancer suggest tumor recurrence.

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



CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST

