

## **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. RAM PARSAD

**AGE/ GENDER** : 54 YRS/MALE **PATIENT ID** : 1552799

**COLLECTED BY** : 042408140002 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 14/Aug/2024 09:22 AM BARCODE NO. **COLLECTION DATE** : 14/Aug/2024 03:17PM : A0465217 CLIENT CODE. : KOS DIAGNOSTIC SHAHBAD REPORTING DATE : 14/Aug/2024 04:41PM

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

Value Unit **Biological Reference interval** Test Name

## **CLINICAL CHEMISTRY/BIOCHEMISTRY**

LIPID PROFILE: BASIC

CHOLESTEROL TOTAL: SERUM 158.41 mg/dL OPTIMAL: < 200.0

by CHOLESTEROL OXIDASE PAP BORDERLINE HIGH: 200.0 - 239.0

HIGH CHOLESTEROL: > OR = 240.0

TRIGLYCERIDES: SERUM 171.24<sup>H</sup> mg/dL **OPTIMAL: < 150.0** 

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 53.57 LOW HDL: < 30.0 mg/dL

by SELECTIVE INHIBITION

BORDERLINE HIGH HDL: 30.0 -

60.0

 $HIGH\ HDL: > OR = 60.0$ LDL CHOLESTEROL: SERUM 70.59 OPTIMAL: < 100.0 mg/dL

by CALCULATED, SPECTROPHOTOMETRY 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 OPTIMAL: < 130.0 104.84 mg/dL 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 34.25 mg/dL 0.00 - 45.00by CALCULATED, SPECTROPHOTOMETRY

TOTAL LIPIDS: SERUM 488.06 mg/dL 350.00 - 700.00

2.96

by CALCULATED, SPECTROPHOTOMETRY

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 1.32 **RATIO** LOW RISK: 0.50 - 3.0



CHOLESTEROL/HDL RATIO: SERUM

by CALCULATED, SPECTROPHOTOMETRY

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

**RATIO** 





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Test Name	Value	Unit	Biological Reference interval
by CALCULATED, SPECTROPHOTOMETRY			MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0
TRIGLYCERIDES/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY	3.2	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

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

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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