

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

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

| | | | |
|-----------------------|--|--------------------------|------------------------|
| NAME | : Miss. KRISHANA KALRA | PATIENT ID | : 1823771 |
| AGE/ GENDER | : 84 YRS/FEMALE | REG. NO./LAB NO. | : 042504090003 |
| COLLECTED BY | : | REGISTRATION DATE | : 09/Apr/2025 09:57 AM |
| REFERRED BY | : | COLLECTION DATE | : 09/Apr/2025 03:00PM |
| BARCODE NO. | : A1260817 | REPORTING DATE | : 09/Apr/2025 03:59PM |
| CLIENT CODE. | : KOS DIAGNOSTIC SHAHBAD | | |
| CLIENT ADDRESS | : 6349/1, NICHOLSON ROAD, AMBALA CANTT | | |

| Test Name | Value | Unit | Biological Reference interval |
|-----------|-------|------|-------------------------------|
|-----------|-------|------|-------------------------------|

CLINICAL CHEMISTRY/BIOCHEMISTRY

ELECTROLYTES COMPLETE PROFILE

| | | | |
|---|-------|--------|---------------|
| SODIUM: SERUM <i>by ISE (ION SELECTIVE ELECTRODE)</i> | 135.6 | mmol/L | 135.0 - 150.0 |
| POTASSIUM: SERUM <i>by ISE (ION SELECTIVE ELECTRODE)</i> | 4.38 | mmol/L | 3.50 - 5.00 |
| CHLORIDE: SERUM <i>by ISE (ION SELECTIVE ELECTRODE)</i> | 101.7 | mmol/L | 90.0 - 110.0 |

INTERPRETATION:-

SODIUM:-

Sodium is the major cation of extra-cellular fluid. Its primary function in the body is to chemically maintain osmotic pressure & acid base balance & to transmit nerve impulse.

HYPONATREMIA (LOW SODIUM LEVEL) CAUSES:-

1. Low sodium intake.
2. Sodium loss due to diarrhea & vomiting with adequate water and iadequate salt replacement.
3. Diuretics abuses.
4. Salt loosing nephropathy.
5. Metabolic acidosis.
6. Adrenocortical insufficiency .
7. Hepatic failure.

HYPERNATREMIA (INCREASED SODIUM LEVEL) CAUSES:-

1. Hyperapnea (Prolonged)
2. Diabetes insipidus
3. Diabetic acidosis
4. Cushings syndrome
5. Dehydration

POTASSIUM:-

Potassium is the major cation in the intracellular fluid. 90% of potassium is concentrated within the cells. When cells are damaged, potassium is released in the blood.

HYPOKALEMIA (LOW POTASSIUM LEVELS):-

1. Diarrhoea, vomiting & malabsorption.
2. Severe Burns.
3. Increased Secretions of Aldosterone

HYPERKALEMIA (INCREASED POTASSIUM LEVELS):-

1. Oliguria



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TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.


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| 2.Renal failure or Shock | | | |
| 3.Respiratory acidosis | | | |
| 4.Hemolysis of blood | | | |

*** End Of Report ***

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