

A PIONEER DIAGNOSTIC CENTRE

■ 0171-2532620, 8222896961 **■** pkrjainhealthcare@gmail.com

NAME : Mr. SHYAM LAL

: 1682425 AGE/ GENDER : 70 YRS/MALE **PATIENT ID**

COLLECTED BY REG. NO./LAB NO. : 122411260008

REFERRED BY **REGISTRATION DATE** : 26/Nov/2024 10:07 AM BARCODE NO. **COLLECTION DATE** : 26/Nov/2024 10:27AM : 12505848 CLIENT CODE. : P.K.R JAIN HEALTHCARE INSTITUTE REPORTING DATE : 26/Nov/2024 11:35AM

CLIENT ADDRESS : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

Value Unit **Test Name Biological Reference interval**

CLINICAL CHEMISTRY/BIOCHEMISTRY

LIPID PROFILE: BASIC

CHOLESTEROL TOTAL: SERUM 181.01 OPTIMAL: < 200.0 mg/dL

by CHOLESTEROL OXIDASE PAP BORDERLINE HIGH: 200.0 -

239.0

HIGH CHOLESTEROL: > OR =

240.0

TRIGLYCERIDES: SERUM 232.44^H OPTIMAL: < 150.0 mg/dL by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC) BORDERLINE HIGH: 150.0 -

199.0

HIGH: 200.0 - 499.0 VERY HIGH: > OR = 500.0

LOW HDL: < 30.0 54.63

HDL CHOLESTEROL (DIRECT): SERUM mg/dL

by SELECTIVE INHIBITION BORDERLINE HIGH HDL: 30.0 -

> 60.0 $HIGH\ HDL: > OR = 60.0$

LDL CHOLESTEROL: SERUM 79.89 OPTIMAL: < 100.0 mg/dL

by CALCULATED, SPECTROPHOTOMETRY ABOVE OPTIMAL: 100.0 - 129.0 BORDERLINE HIGH: 130.0 -

HIGH: 160.0 - 189.0 VERY HIGH: > OR = 190.0

NON HDL CHOLESTEROL: SERUM 126.38 mg/dL OPTIMAL: < 130.0 by CALCULATED, SPECTROPHOTOMETRY

ABOVE OPTIMAL: 130.0 - 159.0

BORDERLINE HIGH: 160.0 -

HIGH: 190.0 - 219.0 VERY HIGH: > OR = 220.0

mg/dL VLDL CHOLESTEROL: SERUM 46.49^H 0.00 - 45.00

by CALCULATED. SPECTROPHOTOMETRY

TOTAL LIPIDS: SERUM

594.46 350.00 - 700.00 mg/dL by CALCULATED, SPECTROPHOTOMETRY

CHOLESTEROL/HDL RATIO: SERUM 3.31 RATIO LOW RISK: 3.30 - 4.40 by CALCULATED, SPECTROPHOTOMETRY

AVERAGE RISK: 4.50 - 7.0



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

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| Test Name | Value | Unit | Biological Reference interval |
|---|-------|-------|--|
| LDL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY | 1.46 | RATIO | MODERATE RISK: 7.10 - 11.0 HIGH RISK: > 11.0 LOW RISK: 0.50 - 3.0 MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0 |
| TRIGLYCERIDES/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY | 4.25 | 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.

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 with LDL-cholesterol as co- primary target for cholesterol lowering therapy. Note that major risk factors can modify treatment goals for LDL &Non

5. Additional testing for Apolipoprotein B, hsCRP,Lp(a) & LP-PLA2 should be considered among patients with moderate risk for ASCVD for risk refinement



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Test Name Value Unit **Biological Reference interval**

LIVER FUNCTION TEST (COMPLETE)

| BILIRUBIN TOTAL: SERUM by DIAZOTIZATION, SPECTROPHOTOMETRY | 0.61 | mg/dL | INFANT: 0.20 - 8.00 ADULT: 0.00 - 1.20 |
|--|--------|-------|---|
| BILIRUBIN DIRECT (CONJUGATED): SERUM by DIAZO MODIFIED, SPECTROPHOTOMETRY | 0.17 | mg/dL | 0.00 - 0.40 |
| BILIRUBIN INDIRECT (UNCONJUGATED): SERUM by CALCULATED, SPECTROPHOTOMETRY | 0.44 | mg/dL | 0.10 - 1.00 |
| SGOT/AST: SERUM by IFCC, WITHOUT PYRIDOXAL PHOSPHATE | 26.99 | U/L | 7.00 - 45.00 |
| SGPT/ALT: SERUM by IFCC, WITHOUT PYRIDOXAL PHOSPHATE | 25.91 | U/L | 0.00 - 49.00 |
| AST/ALT RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY | 1.04 | RATIO | 0.00 - 46.00 |
| ALKALINE PHOSPHATASE: SERUM by Para nitrophenyl phosphatase by amino methyl propanol | 100.96 | U/L | 40.0 - 130.0 |
| GAMMA GLUTAMYL TRANSFERASE (GGT): SERUM by SZASZ, SPECTROPHTOMETRY | 36.55 | U/L | 0.00 - 55.0 |
| TOTAL PROTEINS: SERUM by BIURET, SPECTROPHOTOMETRY | 7.17 | gm/dL | 6.20 - 8.00 |
| ALBUMIN: SERUM by BROMOCRESOL GREEN | 4.45 | gm/dL | 3.50 - 5.50 |
| GLOBULIN: SERUM by CALCULATED, SPECTROPHOTOMETRY | 2.72 | gm/dL | 2.30 - 3.50 |
| A : G RATIO: SERUM | 1.64 | RATIO | 1.00 - 2.00 |

INTERPRETATION

by CALCULATED, SPECTROPHOTOMETRY

NOTE:- To be correlated in individuals having SGOT and SGPT values higher than Normal Referance Range.

USE:- Differential diagnosis of diseases of hepatobiliary system and pancreas.

INCREASED:

| DRUG HEPATOTOXICITY | > 2 |
|--|----------------------------|
| ALCOHOLIC HEPATITIS | > 2 (Highly Suggestive) |
| CIRRHOSIS | 1.4 - 2.0 |
| INTRAHEPATIC CHOLESTATIS | > 1.5 |
| HEPATOCELLULAR CARCINOMA & CHRONIC HEPATITIS | > 1.3 (Slightly Increased) |



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DECREASED:

CLIENT CODE.

1. Acute Hepatitis due to virus, drugs, toxins (with AST increased 3 to 10 times upper limit of normal)

2. Extra Hepatic cholestatis: 0.8 (normal or slightly decreased).

PROGNOSTIC SIGNIFICANCE:

| NORMAL | < 0.65 | |
|----------------------|-----------|--|
| GOOD PROGNOSTIC SIGN | 0.3 - 0.6 | |
| POOR PROGNOSTIC SIGN | 1.2 - 1.6 | |

*** End Of Report



NOT VALID FOR MEDICO LEGAL PURPOSE

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