**PKR JAIN HEALTHCARE INSTITUTE** NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

【 0171-2532620, 8222896961 🛛 🖾 pkrjainhealthcare@gmail.com

NAME : M	r. BALDEV RAJ				
AGE/ GENDER: 62 YRS/MALECOLLECTED BY:		PAT	FIENT ID	: 1664185	
		<b>REG. NO./LAB NO.</b>		: 122412040016	
REFERRED BY :		REG	<b>GISTRATION DATE</b>	: 04/Dec/2024 01:23 PM	
<b>BARCODE NO.</b> : 12505993		COL	LECTION DATE	: 04/Dec/2024 01:36PM	
CLIENT CODE. : P.	K.R JAIN HEALTHCARE INS	HEALTHCARE INSTITUTE <b>REPORTING DAT</b>		:04/Dec/2024 02:47PM	
CLIENT ADDRESS : N.	ASIRPUR, HISSAR ROAD, AM	/IBALA CITY - HARYA	NA		
Test Name		Value	Unit	Biological Reference interval	
	CLINIC	AL CHEMISTR	Y/BIOCHEMIST	RY	
		LIPID PROFI	LE : BASIC		
CHOLESTEROL TOTAL: SERUM by CHOLESTEROL OXIDASE PAP		217.51 <sup>H</sup>	mg/dL	OPTIMAL: < 200.0 BORDERLINE HIGH: 200.0 - 239.0 HIGH CHOLESTEROL: > OR = 240.0	
TRIGLYCERIDES: SERUM by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC)		238.78 <sup>H</sup>	mg/dL	OPTIMAL: < 150.0 BORDERLINE HIGH: 150.0 - 199.0 HIGH: 200.0 - 499.0 VERY HIGH: > OR = 500.0	
HDL CHOLESTEROL (DIRECT): SERUM by SELECTIVE INHIBITION		47.52	mg/dL	LOW HDL: < 30.0 BORDERLINE HIGH HDL: 30. 60.0 HIGH HDL: > OR = 60.0	
LDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		122.23	mg/dL	OPTIMAL: < 100.0 ABOVE OPTIMAL: 100.0 - 129. BORDERLINE HIGH: 130.0 - 159.0 HIGH: 160.0 - 189.0 VERY HIGH: > OR = 190.0	
NON HDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		169.99 <sup>H</sup>	mg/dL	OPTIMAL: < 130.0 ABOVE OPTIMAL: 130.0 - 159. BORDERLINE HIGH: 160.0 - 189.0 HIGH: 190.0 - 219.0 VERY HIGH: > OR = 220.0	
VLDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY TOTAL LIPIDS: SERUM by CALCULATED, SPECTROPHOTOMETRY		47.76 <sup>H</sup>	mg/dL	0.00 - 45.00	
		673.8	mg/dL	350.00 - 700.00	
CHOLESTEROL/HDL RA by CALCULATED, SPECTRO	4.58 <sup>H</sup>	RATIO	LOW RISK: 3.30 - 4.40 AVERAGE RISK: 4.50 - 7.0		

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

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST

**NOT VALID FOR MEDICO LEGAL PURPOSE** 

440 Dated 17.5.2012 u/s 80 G OF INCOME TAX ACT. PAN NO. AAAAP1600. **REPORT ATTRACTS THE CONDITIONS PRINTED OVERLEAF (P.T.O.)** 



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CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA				
Test Name	Value	Unit	Biological Reference interval		
<u> </u>			MODERATE RISK: 7.10 - 11.0		

IDI /IIDI DATIO, CEDIM	9.57	DATIO	HIGH RISK: > 11.0
LDL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY	2.57	RATIO	LOW RISK: 0.50 - 3.0 MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0
TRIGLYCERIDES/HDL RATIO: SERUM	5.02 <sup>H</sup>	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 HDI

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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