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

A PIONEER DIAGNOSTIC CENTRE

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

NAME	: Mr. AMANPREET SINGH						
AGE/ GENDER	: 42 YRS/MALE		PATIENT ID	: 1709915 <b>: 122502100002</b>			
COLLECTED BY	:		REG. NO./LAB NO.				
REFERRED BY	:		<b>REGISTRATION DATE</b>	: 10/Feb/2025 08:38 AM : 10/Feb/2025 10:00AM			
BARCODE NO.	: 12506916		COLLECTION DATE				
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INS	STITUTE	<b>REPORTING DATE</b>	: 10/Feb/2025 01:28PM			
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, A	JASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA					
Test Name		Value	Unit	Biological Reference interval			
	CLINIC	CAL CHEMIS	<b>FRY/BIOCHEMIST</b>	RY			
		LIPID PRO	FILE : BASIC				
CHOLESTEROL TOTAL: SERUM by CHOLESTEROL OXIDASE PAP		193.26	mg/dL	OPTIMAL: < 200.0 BORDERLINE HIGH: 200.0 - 239.0 HIGH CHOLESTEROL: > OR = 240.0			
TRIGLYCERIDES: SERUM by GLYCEROL PHOSPHATE OXIDASE (ENZYMATIC)		135.92	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		44.71	mg/dL	LOW HDL: < 30.0 BORDERLINE HIGH HDL: 30.0 60.0 HIGH HDL: > OR = 60.0			
LDL CHOLESTEROL: SERUM by CALCULATED, SPECTROPHOTOMETRY		121.37	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 CHOLES' by calculated, spe	TEROL: SERUM ectrophotometry	148.55 <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 CHOLESTEROL/HDL RATIO: SERUM by CALCULATED, SPECTROPHOTOMETRY		27.18	mg/dL	0.00 - 45.00			
		522.44	mg/dL	350.00 - 700.00			
		4.32	RATIO	LOW RISK: 3.30 - 4.40 AVERAGE RISK: 4.50 - 7.0			

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT

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

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST

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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Test Name	Value	Unit	<b>Biological Reference interval</b>
LDL/HDL RATIO: SERUM	2.71	RATIO	MODERATE RISK: 7.10 - 11.0 HIGH RISK: > 11.0 LOW RISK: 0.50 - 3.0
by CALCULATED, SPECTROPHOTOMETRY	<i>ω.</i> / 1	MATIO	MODERATE RISK: 3.10 - 6.0 HIGH RISK: > 6.0
TRIGLYCERIDES/HDL RATIO: SERUM by CALCULATED. SPECTROPHOTOMETRY	3.04	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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