



# P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

**A PIONEER DIAGNOSTIC CENTRE**

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TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.

**NAME** : Mr. VINAYAK  
**AGE/ GENDER** : 26 YRS/MALE **PATIENT ID** : 1392713  
**COLLECTED BY** : **REG. NO./LAB NO.** : 122502170020  
**REFERRED BY** : **REGISTRATION DATE** : 17/Feb/2025 03:46 PM  
**BARCODE NO.** : 12507066 **COLLECTION DATE** : 17/Feb/2025 04:27PM  
**CLIENT CODE.** : P.K.R JAIN HEALTHCARE INSTITUTE **REPORTING DATE** : 17/Feb/2025 04:49PM  
**CLIENT ADDRESS** : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

Test Name	Value	Unit	Biological Reference interval
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## CLINICAL CHEMISTRY/BIOCHEMISTRY

### GLOMERULAR FILTRATION RATE (GFR) - ESTIMATED

CREATININE: SERUM 1.23 mg/dL 0.40 - 1.40  
by SPECTROPHOTOMETRY-ENZYMATIC  
ESTIMATED GLOMERULAR FILTRATION RATE 80.5 mL/min/1.73m2 KIDNEY FAILURE: < 15.0  
(eGFR): SERUM  
by SPECTROPHOTOMETRY-ENZYMATIC, MDRD CALCULATION

#### INTERPRETATION:

CKD STAGE	DESCRIPTION	GFR ( mL/min/1.73m2 )	ASSOCIATED FINDINGS
G1	Normal kidney function	>90	No proteinuria
G2	Kidney damage with normal or high GFR	>90	Presence of Protein , Albumin or cast in urine
G3a	Mild decrease in GFR	60 -89	
G3b	Moderate decrease in GFR	30-59	
G4	Severe decrease in GFR	15-29	
G5	Kidney failure	<15	

#### COMMENTS:

1. Estimated Glomerular filtration rate (eGFR) is the sum of filtration rates in all functioning nephrons and so an estimation of the GFR provides a measure of functioning nephrons of the kidney.
2. eGFR calculated using the 2009 CKD-EPI creatinine equation and GFR category reported as per KDIGO guideline 2012
3. In patients, with eGFR creatinine between 45-59 ml/min/1.73 m2 (G3) and without any marker of Kidney damage, It is recommended to measure eGFR with Cystatin C for confirmation of CKD
4. eGFR category G1 OR G2 does not fulfill the criteria for CKD, in the absence of evidence of Kidney Damage
5. In a suspected case of Acute Kidney Injury (AKI), measurement of eGFR should be done after 48-96 hours of any Intervention or procedure
6. eGFR calculated by Serum Creatinine may be less accurate due to certain factors like Race, Muscle Mass, Diet, Certain Drugs. In such cases, eGFR should be calculated using Serum Cystatin C
7. A decrease in eGFR implies either progressive renal disease, or a reversible process causing decreased nephron function (eg, severe dehydration).

#### ADVICE:

KDIGO guideline, 2012 recommends Chronic Kidney Disease (CKD) should be classified based on cause, eGFR category and Albuminuria (ACR) category. GFR & ACR category combined together reflect risk of progression and helps Clinician to identify the individual who are progressing at more rapid rate than anticipated

\*\*\* End Of Report \*\*\*



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