



YOUR COMPREHENSIVE DIAGNOSIS  
**Wellness Report**

Client Code :

**Mr. Sameer Ostwal**

Male, 47 years

Lab ID : 60285900002  
Registration Date : 13-02-2026 12:43  
Reported On : 13-02-2026 15:09

Processed By:



Sameer Ostwal  
CRM:  
DCN: LC/HCH/STDF-RPT/ENG/1222/V001

## Test Result and Personal Health Report

NAME : Mr. SAMEER OSTWAL  
 DOB :  
 AGE : 47 Years  
 CRM :

Collected : 13-02-2026 08:00  
 Received : 13-02-2026 12:43  
 Reported : 13-02-2026 15:09  
 Status : Final  
 Ref By :

Lab ID : 60285900002  
 Sample Quality : Adequate  
 Location : BS21876  
 Client : Tryambak Ayurveda -  
 Collection Center - Bs21876



# Personal Health

## Analytics Report

### ? What to expect from this report?

The **LifeCell Wellness Insights Report** gives you a quick overview of your overall health status. It summarises key findings from your lab results and lifestyle-related questions, highlighting areas that need attention.

- +** **Health Journey Charts** : The Interactive Charts visually track your health parameters over time. They help you see how things have changed within your body which helps you keep accurate track of your health.
- +** **Test Insights** : Using advanced technology and strict quality checks, this part dives deep into your test results. It explains each test you've done, sets ideal benchmarks, and points out areas that need immediate attention
- +** **Personalised Recommendations** : Get tailored advice to improve your nutrition and lifestyle choices. From managing your BMI to suggesting proactive tests and guiding you on future consultations, these suggestions
- +** **Preventive Testing Guide** : This section is a quick guide to essential tests based on your age group. Find out which tests are recommended for you and how often you should schedule them to stay proactive about your health.

### + Always consult your doctor

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# Health Report

Walk Through



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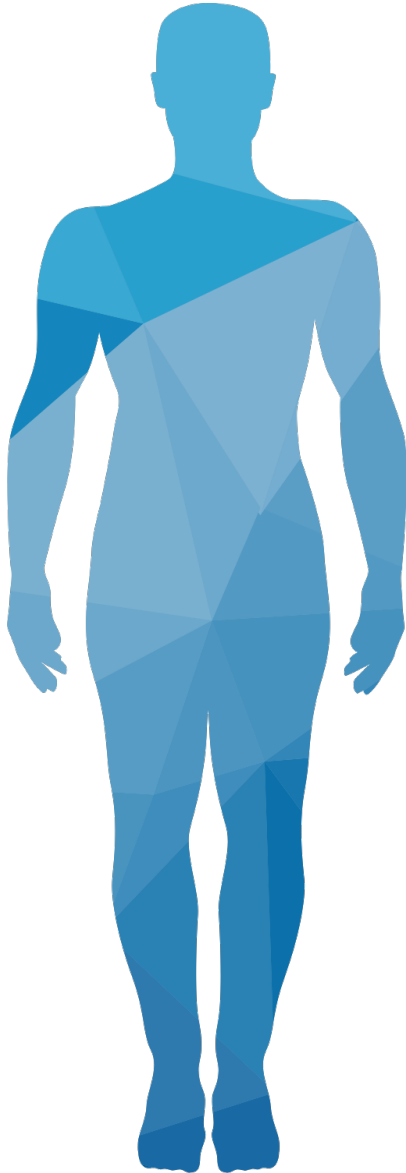


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# Your Health Picture

## Health Summary



■ PANCREAS (DIABETES)

■ HEART

■ THYROID

■ KIDNEY

■ LIVER

■ BLOOD

■ VITAMINS, MINERALS & IRON

■ URINE

■ Normal

■ Concern \*

■ Critical \*

\* Please Consult Your Doctor

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# Important Parameters

At A Glance



## Pancreas (Diabetes)

### Your Result Value

**77.60** mg/dL



**Normal**

Normal : <100

Pre-diabetic : 100-125

Diabetic : >=125

### Glucose Fasting

GOD-POD

This test helps to diagnose the level of glucose in your blood at fasting conditions. It helps in detection of Prediabetes and monitoring of diabetes treatment plan.



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### Your Result Value

**5.50**



**Normal**

Normal : <=5.7

Pre-diabetes : 5.7-6.5

Diabetes : >=6.5

### HbA1c

HbA1c test helps to diagnose Prediabetes and monitor diabetes treatment plan

**Estimated Average Glucose: 111.15 mg/dL**



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**Sample Type :** EDTA Whole Blood(HbA1c), Plasma(Glucose Fasting)

**Suggestions :** (1) Regular physical activity and lifestyle changes to support weight loss and overall health. (2) Regular monitoring of sugar levels needed.

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*Namrata*

Dr.Namrata Bhanushali M.D(2016071822)  
Lab Director



## Heart

### Your Result Value

**174.00** mg/dL



**Desirable**

Desirable : <200

Borderline : 200 - 240

High : >240

### Total Cholesterol

*CHOP-PAP*

Total Cholesterol is a blood test that measures the amount of total cholesterol in your blood. This test will confirm the risk of heart disease



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### Your Result Value

**107.80** mg/dL



**Normal**

Normal : <150

High : 150-200

Hypertriglyceridemia : 200-499

Very High : >499

### Triglycerides

*GPO*

Triglycerides are one of the most common types of fat present in your body. This test checks for presence or absence of heart risk diseases. Triglyceride is the test that will detect the total amount of Triglycerides in your blood. High levels of triglycerides in the blood can increase the risk of developing cardiovascular disease (CVD)



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### Your Result Value

**34.70** mg/dL



**Low**

Low : < 40

Normal : 40-60

High : > 60

### HDL Cholesterol

*DIRECT*

HDL cholesterol also known as “Good-Cholesterol” as they carries Bad cholesterol i.e LDL away from arteries to prevent blockage. This test checks for the level of HDL in your blood The function of the HDL Cholesterol test is to monitor your heart health. HDL Cholesterol is also known as “Good Cholesterol” as it is associated with better heart health.

#### Impact on health

HDL cholesterol is an important tool used to assess an individual's risk of developing CHD. It has a strong negative relationship between its concentration and the incidence of CHD. Values greater than or equal to 80 to 100 mg/dL may indicate metabolic response to certain medications such as hormone replacement therapy and chronic liver disease.



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### Your Result Value

**139** mg/dL



**Borderline High**

Desirable : < 130

Borderline High : 130-160

High : 160-190

Very High : >=190

### Non HDL Cholesterol

*Calculated*

Non HDL Cholesterol test detects amount of “Bad Cholesterol” in your blood. This test is done for various purposes such as screening, diagnosis and monitoring heart disease

#### Impact on health

A non-HDL cholesterol value includes all the atherogenic (artery-clogging) lipoprotein particles.



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## Your Result Value

# 117.74 mg/dL



Near Optimal

Optimal	: <=100
Near Optimal	: 100-130
Borderline High	: 130-160
High	: 160-189
Very High	: >189

## Low Density Lipoprotein - Cholesterol (LDL)

Calculated



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Low Density Lipoprotein - Cholesterol (LDL) is the test that will detect the total amount of LDL in your blood. This test is done for various purposes such as screening, diagnosis and monitoring heart disease. LDL Cholesterol also known as "Bad Cholesterol" as its deposition in arteries can narrow the arteries and cause heart risk. This test assesses the value of LDL cholesterol in your blood.

### Impact on health

Increased LDL is associated with an increased risk of cardiovascular disease. It is commonly associated with diabetes, hypertension, hypertriglyceridemia, and atherosclerosis. LDL is clinically significant as it is crucial to monitor levels of LDL in patients with hypertension and diabetes.

## Your Result Value

# 21.56 mg/dL



Normal

Range : 6.0-40.0 mg/dL

## Very Low Density Lipoprotein - Cholesterol (VLDL)

Calculated



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VLDL is a type of lipoprotein that your liver produces. This test will check the levels of VLDL in your blood to check for any heart risk Very Low Density Lipoprotein - Cholesterol is the test that will detect the total amount of LDL in your blood. High levels of VLDL can cause clogging in the arteries which can cause stroke.

## Your Result Value

# 5.01 %



High

Optimal	: <3.5
Near Optimal	: 3.5 - 5.0
High	: >5

## Total Cholesterol / HDL Ratio

Calculated



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Total Cholesterol/HDL Ratio is the comparison test which compares your Total Cholesterol with your HDL to predict heart risk. Higher the ratio greater will be your heart risk

### Impact on health

The higher the ratio, the higher the risk. A ratio below 3.5:1 is considered very good.

## Your Result Value

# 3.39 %



Near Optimal

Optimal	: <2.5
Near Optimal	: 2.5 - 3.5
High	: >3.5

## LDL / HDL Ratio

Calculated



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LDL / HDL Ratio is the comparison test which compares your LDL / HDL Ratio to predict heart risk.

### Impact on health

The higher the ratio, the higher the risk. A ratio below 2.5:1 is considered very good.

**Sample Type :** Serum

**Suggestions :** (1) Eat heart-healthy foods-Reduce saturated fats, Eliminate trans fats, Eat foods rich in omega-3 fatty acids, Increase soluble fiber. (2) Exercise on most days of the week and increase your physical activity-Taking a brisk daily walk during your lunch hour, Riding your bike to work, Playing a favorite sport (3) Quit smoking (4) Lose weight (5) Avoid alcohol

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## Thyroid

Thyroid test monitors the functioning of your thyroid gland which produces thyroid hormone that controls body mechanisms

### Your Result Value

**1.12** ng/mL



**Normal**

Range : 0.7 - 2.04 ng/mL

### Thyroid - TriIodo Thyronine (T3 Total)

CLIA

TriIodoThyronine is the one of the main hormones produced by thyroid gland. T3 total test helps to detect Hyperthyroidism, a condition where your thyroid gland starts producing excess amount of thyroid hormones



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### Your Result Value

**6.09** ug/dL



**Normal**

Range : 5.5 -12.7 ug/dL

### Thyroid Thyroxine (T4)

CLIA

Thyroxine test looks for the disorder of thyroid by evaluating the functioning of thyroid gland



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### Your Result Value

**2.890** uIU/mL



**Normal**

Range : 0.4 - 5.5 uIU/mL

### Thyroid Stimulating Hormone (TSH)

CLIA

Thyroid Stimulating Hormone looks for the proper functioning of your thyroid gland.



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**Sample Type :** Serum

**Suggestions :**Thyroid hormone levels can be brought to normal in a many ways and each treatment will depend on the cause of your thyroid condition. If you have hyperthyroidism,treatment options can include:Anti-thyroid drugs,beta blockers,radioactive iodine,surgery. If you have hypothyroidism the main treatment option is Thyroid replacement medication.

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## Kidney

### Your Result Value

**0.93** mg/dL

| **Normal**

Range : 0.7 - 1.3 mg/dL

### Creatinine

ENZYMATIC CREATININASE

This test checks the production of Creatinine in your blood. Usually the kidney is used to filter creatinine from your blood. If your creatinine values are high this suggest problem in kidney



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### Your Result Value

**16.80** mg/dL

| **Normal**

Range : 15-48 mg/dL

### Urea

UREASE-GLDH

Urea test is used to detect malfunctioning of kidney



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### Your Result Value

**7.85** mg/dL

| **Normal**

<1 Month : 3-12 mg/dL  
1 Month-12 Months : 4-18 mg/dL  
1-60 Yrs : 6-20 mg/dL  
>60 Yrs : 8-23 mg/dL

### Blood Urea Nitrogen (BUN)

Calculated

Blood Urea Nitrogen monitors kidney health. This test checks how well your kidney is working by measuring the amount of urea nitrogen in your blood



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### Your Result Value

**8.44** %

| **Normal**

Range : 5.0 - 23.5 %

### BUN/Creatinine Ratio

Calculated method

Bun/Creatinine ratio is the test used to detect Chronic Kidney Disease (CKD) & Damage



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## Your Result Value

6.30 mg/dL

| Normal

Range : 4.4-7.6 mg/dL

## Uric Acid

URICASE-POD

Uric Acid measures the amount of uric acid in your blood. Higher value of Uric Acid can cause Kidney Stone & Kidney Failure



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## Your Result Value

9.20 mg/dL

| Normal

Range : 8.6 - 10.2 mg/dL

## Calcium

Arsenazo Method

Calcium monitors the function of Kidney and confirm if any stone formation is happening in Kidney



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## Your Result Value

106 ml/min/1.73m<sup>2</sup>

| Normal

Normal : > 90  
 Mild Decrease In Gfr : 60-90  
 Moderate Decrease In Gfr : 30-59  
 Severe Decrease In Gfr : 15-29  
 Kidney Failure : < 15

## eGFR

Calculated

eGFR test is to screen and monitor kidney problems such as urinary changes, fatigue, swelling in the arms or legs, itching, nausea, and vomiting



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## Electrolytes

### Your Result Value

**139.74** mmol/L



**Normal**

Range : 136-145 mmol/L

### Sodium (Na+), Serum

Direct ISE

Electrolytes are primarily used for assessing acid base balance in a variety of medical conditions.



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### Your Result Value

**4.18** mmol/L



**Normal**

Range : 3.5 - 5.1 mmol/L

### Potassium (K+), Serum

Direct ISE

Electrolytes are primarily used for assessing acid base balance in a variety of medical conditions.



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### Your Result Value

**107.72** mmol/L



**High**

Range : 96-106 mmol/L

### Chloride, Serum

Direct ISE

Electrolytes are primarily used for assessing acid base balance in a variety of medical conditions.

#### Impact on health

An electrolyte imbalance may be a sign of a heart, lung or kidney problem. Dehydration also causes electrolyte imbalances



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**Sample Type :** Serum

**Service Remarks :** Sample has been processed after 4 hours of collection. Fresh sample is advised for confirmation of results.

**Suggestions :** (1) If the test results are outside the standard range, you might need further testing to determine the diagnosis. (2) Medications can help resolve high creatinine levels by treating the condition that's causing the increase. Some examples include antibiotics for a kidney infection or medications that help control high blood pressure. (3) Losing weight, if necessary (4) Watching what you eat limit your intake of organ meats, red meat, fish, and alcoholic beverages. (5) A lifelong urate-lowering therapy may be needed, with medications that prevent gout flares and ultimately dissolve crystals that are already in your body (6) Calcium and Vitamin D supplements can help in increasing calcium levels Good sources of calcium include milk, cheese, yogurt, soy products, sardines, canned salmon, fortified cereal, and dark leafy greens (7) It is the laboratory test for detection and monitoring of kidney disease. The limitation of urea as a test of renal function relates to reduced sensitivity and specificity as there are other causes that can be associated with such a rise e.g. heart failure, dehydration is common. Further evaluation is required for increased serum urea levels. (8) Please consult your physician for personalized medical advice.

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## Liver

Liver test detects the liver infection and monitor functioning of liver in your body by measuring levels of different enzymes & protein in your blood

### Your Result Value

**0.62** mg/dL



**Normal**

Range : 0.1 - 1.3 mg/dL

### Bilirubin - Total

*DIAZO*

Bilirubin blood test measures the amount of Bilirubin total in your blood. This test monitor the health of your live



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### Your Result Value

**0.31** mg/dL



**High**

Range : <0.3 mg/dL

### Bilirubin - Direct

*DIAZO*

Bilirubin blood test measures the amount of Direct Bilirubin total in your blood. This test monitor the health of your live



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### Impact on health

Elevated serum direct bilirubin concentrations can be due to: (1) Impaired uptake, conjugation, or excretion of bilirubin(Gilbert syndrome / Crigler Najjar syndrome / Neonatal jaundice / Drugs) (2) Backward leakage from damaged hepatocytes or bile ducts

### Your Result Value

**0.31** mg/dL



**Normal**

Range : <1.0 mg/dL

### Bilirubin - Indirect

*Calculated*

This test detects the presence or absence of Crystals in your urine



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### Your Result Value

**16.10** U/L



**Normal**

Range : <35 U/L

### SGOT-AST

*IFCC WITHOUT PEP*

SGOT test is used to detect damage in the tissues of your Liver. SGOT is an enzyme found in liver. This test help to detect liver damage or disease by measuring the levels of SGOT levels in your blood



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## Your Result Value

21.50 U/L



Normal

Range : &lt;45 U/L

## SGPT-ALT

IFCC WITHOUT PEP

SGPT test is used to detect disease of liver



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## Your Result Value

100.0 U/L



Normal

Range : 53 - 128 U/L

## Alkaline Phosphatase

IFCC With AMP buffer

Alkaline Phosphatase is the test that measures Alkaline Phosphatase enzyme level in your blood and detects liver diseases



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## Your Result Value

22.50 U/L



Normal

Range : &lt;55 U/L

## Gamma Glutamyl Transferase (GGT)

G-glutamyl-p-nitroanilide

Gamma Glutamyl Transferase test look for liver disease and damage in Bile duct



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## Your Result Value

6.85 gm/dL



Normal

Range : 6.4-8.8 gm/dL

## Total Protein

BIURET

Total Protein test is used to evaluate total protein levels in your blood Total Protein: Majority of Proteins are produced by your liver. Total protein measures the combined levels of Albumin &amp; Globulin in your blood.



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## Your Result Value

4.21 gm/dL



Normal

<14 Yrs : 3.8-5.4 gm/dL  
 14-18 Yrs : 3.2-4.5 gm/dL  
 18-60 Yrs : 3.5-5.2 gm/dL  
 60-90 Yrs : 3.2-4.6 gm/dL  
 >90 Yrs : 2.9-4.5 gm/dL

## Albumin

BCG

Albumin test is used to measure the levels of Albumin protein in your blood. This test monitor the liver health



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## Your Result Value

2.64 gm/dL



Normal

Range : 1.9-3.9 gm/dL

## Globulin

Calculated

Globulin is a protein produced by your liver. This test measure the levels of Globulin in your blood Globulins are a group of proteins that is made by your immune system in your blood. Globulin test helps in identifying liver disease or damage



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## Your Result Value

1.59 %



Normal

Range : 1.1 - 2.5 %

## A : G Ratio

Calculated

Albumin to Globulin ratio used for comparison of concentration of Albumin & Globulin in your blood



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## Sample Type : Serum

**Suggestions :** There is no specific diet or lifestyle change you can help to bring down your total protein. taking supplement can help to maintain levels (1) Maintain healthy weight. (2) Eat balanced diet, (3) Exercise regularly (4) Avoid toxins (5) Use alcohol responsibly (6) Avoid contaminated needles (7) Get medical care if you're exposed to blood (8) Practice safe sex. (9) Get vaccinated (10) Consult your physician if you get a abnormal value.

## About your Liver Results

During your health check, we have found out that **Bilirubin - Direct**, is your concern parameters, which can impact your health.

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## Blood

A complete blood count (CBC) analyses all types of cells and gives information about disorders like anaemia, immune system disorders, infections, etc

### Your Result Value

**13.8** gm/dL

| **Normal**

Range : 13.0-17.0 gm/dL

### Hemoglobin

*Colorimetric method*

Hemoglobin test is done to detect Anemia, a condition in which blood have less no. of RBCs Hemoglobin is the protein molecule in red blood cells that carries oxygen from the lungs to the body's tissues and returns carbon dioxide from the tissues back to the lungs. A hemoglobin test measures the amount of hemoglobin in your blood



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### Your Result Value

**4.82** million/cmm

| **Normal**

Range : 4.5 - 5.5 million/cmm

### Erythrocyte Count- RBC

*Electrical Impedance method*

Erythrocyte count or RBC test helps to quantify the amount of RBCs in your blood



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### Your Result Value

**42.90** %

| **Normal**

Range : 40 - 50 %

### Hematocrit-PCV

*Calculated*

Hematocrit test measure the RBCs level in your blood in percentage



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### Your Result Value

**89.1** fL

| **Normal**

Range : 83 - 101 fL

### Mean Corpuscular Volume-MCV

*Calculated Value*

Mean Corpuscular Volume test is used to evaluate the average size and volume of RBCs in your blood. This test helps to understand anaemia conditions



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### Your Result Value

**32.1** g/dL

| **Normal**

Range : 31.5 - 34.5 g/dL

### MCHC

*Calculated Value*

MCHC measures the average amount of hemoglobin present in a group of hemoglobin in your blood



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### Your Result Value

**11.30** %

| **Low**

Range : 11.6 - 14.6 %

### Red Cell Distribution Width CV

*Calculated*

Red Cell Distribution Width CV is used to diagnose anaemia



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### Your Result Value

**49.20** fL

| **High**

Range : 39 - 46 fL

### Red Cell Distribution Width SD

*Calculated*

Red Cell Distribution Width SD is used to rule out conditions like infections, and malnutrition in your body



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## Your Result Value

7.30  $10^3$  Cells/ $\mu$ L

Normal

Range : 4.0 - 10.0  $10^3$  Cells/ $\mu$ L
**Leucocytes  
Count - WBC  
Total**

Flowcytometry

Leucocytes count or WBC test help to quantify the amount of RBCs in your blood



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## Your Result Value

46.60 %



Normal

Range : 40 - 80 %

**Neutrophils**

Flowcytometry

Neutrophils checks body's ability to fight against infection, mostly bacterial infection



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## Your Result Value

44.70 %



High

Range : 20 - 40 %

**Lymphocyte**

Flowcytometry

Lymphocyte test checks levels of Lymphocytes in the blood



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## Your Result Value

6.70 %



Normal

Range : 2 - 10 %

**Monocytes**

Flowcytometry

Monocytes test checks levels of Monocytes in the blood



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## Your Result Value

2.00 %



Normal

Range : 1-6 %

**Eosinophils**

Microscopy

Eosinophil test confirms the presence or absence of infection



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## Your Result Value

00 %



Normal

Range : 0-2 %

**Basophils**

Flowcytometry

Basophils checks the level of basophil in your blood



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## Your Result Value

3.40  $10^3$  Cells/ $\mu$ L

Normal

Range : 1.5-8.0  $10^3$  Cells/ $\mu$ L
**Absolute Neutrophils  
Count**

Flowcytometry

Absolute Neutrophils Count or ANC is a test which checks body's ability to fight against infection, mostly bacterial infection



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## Your Result Value

3.26  $10^3$  Cells/ $\mu$ L

Normal

Range : 1.0-4.8  $10^3$  Cells/ $\mu$ L
**Absolute Lymphocyte  
Count**

Flowcytometry

Absolute Lymphocyte Count test checks levels of Lymphocytes in the blood. This test is used to check the presence of infection



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## Your Result Value

0.49  $10^3$  Cells/ $\mu$ L

Low

Range : 0.5 - 0.9  $10^3$  Cells/ $\mu$ L
**Absolute Monocyte  
Count**

Flowcytometry

Absolute Monocyte Count checks confirm the infection WBCs.



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## Your Result Value

0.15  $10^3$  Cells/ $\mu$ L

Low

Range : 0.2 - 0.5  $10^3$  Cells/ $\mu$ L
**Absolute Eosinophil  
Count**

Calculated

Absolute Eosinophil Count test checks for levels of Eosinophils. This test confirms the presence or absence of infection



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## Your Result Value

0  $10^3$  Cells/ $\mu$ L

| Normal

Range : 0.0 - 0.3  $10^3$  Cells/ $\mu$ L

### Absolute Basophil Count



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Calculated

Absolute Basophil Count test checks for levels of Basophils. This test confirms the presence or absence of infection.

## Your Result Value

246.00  $10^3$ / $\mu$ L

| Normal

Range : 150 - 410  $10^3$ / $\mu$ L

### Platelet Count

Electrical Impedance method



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Platelets are the cell that helps in blood clotting. This test is used to check the levels of platelets in your blood.

## Your Result Value

9.3 fL

| Normal

Range : 7.4-10.4 fL

### MPV

Calculated



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MPV measures the average amount of platelets present in blood. This test helps in detection of bleeding & bone marrow disorders

## Your Result Value

14.3 fL

| Normal

Range : 10 - 17.9 fL

### PDW

Calculated



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PWD is one of the markers to check function & activation of platelets. PDW test check for variability in the size of platelets.

## Your Result Value

0.22 %

| Normal

Range : 0.22 - 0.24 %

### Platelet Crit

Calculated



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## Your Result Value

28.6 Pg

| Normal

Range : 27 - 32 Pg

### MCH (Mean Corpuscular Hb)

Calculated Value



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Mean corpuscular hemoglobin (MCH) refers to the amount of hemoglobin in a red blood cell. High or low numbers may indicate a vitamin deficiency or certain types of anemia.

**Sample Type :** EDTA Whole Blood

**Suggestions :** (1) If your hemoglobin level is lower than normal, you have anemia. There are many forms of anemia and with different causes which include iron deficiency, Vitamin B12 deficiency, folate deficiency, hemoglobinopathies and malignancies. If your hemoglobin level is higher than normal it may be because of causes like Polycythemia Vera, heavy smoking, etc. (2) Low levels of iron or vitamins in the body can cause anemia. Poor diet or certain diseases might lead to anemia. Good sources of iron - Spinach & dark green leafy vegetables, Beetroot, Watermelon, Pomegranate, etc. Good sources of Vitamin B12 - Meat, salmon, milk, cheese, eggs, etc. Kindly consult your clinician for further follow-up & management.

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## Vitamins, Minerals & Iron

**Vitamins:** Vitamins test is used to check the levels of essential vitamins levels in your blood

**Minerals:** Adequate amount of mineral is required for proper functioning of body

**Iron:** Iron Profile is a set of tests that checks for Iron levels of your body

### Your Result Value

**177.00** pg/mL

**Low**

Range : 200 - 1100 pg/mL

### Vitamin B12

CLIA

Vitamin B12 is one of the essential vitamins of your body. This test measures the level of Vitamin B12 in your blood. Vitamin B12 controls many body functions such as regulation of brain health, production of blood cells and other functioning. Deficiency of Vitamin B is common

#### Impact on health

It helps to determine the cause of Anemia. Levels also indicate nutritional status in some individuals and help to monitor efficacy of treatment for vitamin b12 or folate deficiency



MC-5941

### Your Result Value

**8.02** ng/mL

**Severe Deficiency**

Severe Deficiency	: <10 possible
Mild To Moderate Deficiency	: 10-20 possible
Optimum Level	: 20-50 possible
Increased Risk Of Hypercalciuria	: 50-80 possible
Toxicity Possible	: >80 possible

### Vitamin D-25 Hydroxy

CLIA

Vitamin D- 25 Hydroxy monitors Vitamin- D levels in your body. In your bloodstream, vitamin D2 and vitamin D3 are changed into a form of vitamin D called Vitamin D-25 Hydroxy. A vitamin D blood test measures the level of 25 (OH) D in your blood.

#### Impact on health

Abnormal levels of vitamin D can indicate bone disorders, nutrition problems, organ damage, or other medical conditions



MC-5941

### Your Result Value

**178.90** µg/dL

**Normal**

Range : 112- 346 µg/dL

### UIBC

Ferrozine

UIBC checks for the body efficiency to transport Iron in the blood



MC-5941

Processed By:



Sameer Ostwal  
CRM:

DCN: LC/HCH/STDF-RPT/ENG/1222/V001

Dr. Namrata Bhanushali M.D.(2016071822)  
Lab Director

Sample Collected

13-02-2026 08:00

Reported

13-02-2026 15:09

Basic Info

Male/47



## Your Result Value

245 µg/dL

| Low

Range : 250-400 µg/dL

## TIBC

*Ferrene*

TIBC check iron level in your blood TIBC (total iron-binding capacity) measures the total amount of iron that can be bound by proteins in the blood.



MC-5941

## Your Result Value

65.6 µg/dL

| Normal

Range : 50-150 µg/dL

## Iron

*Ferrene*

Iron is an essential mineral that forms RBCs of your blood. This test measures the level of iron in your blood.



MC-5941

## Your Result Value

27 %

| Normal

Range : Male 20% - 50% Female 15% - 50%

## % of Iron Saturation

*Calculated*

Percentage of Iron Saturation also known as Transferrin saturation is the ratio of serum iron and TIBC. This parameter provides an estimate of how much serum iron is actually bound to transferrin and is expressed as a percentage. Transferrin saturation is typically utilised to determine a patient's iron status to detect either iron deficiency or overload.



MC-5941

## Sample Type : Serum

**Suggestions :** (1) Usually, vitamin B12 deficiency anemia is easy to treat with diet and vitamin supplements. To increase the amount of vitamin B12 in your diet, eat more of foods that contain it, such as: Beef, liver, and chicken Fish Fortified breakfast cereal Low-fat milk, yogurt, and cheese Eggs. (2) Common effective ways to increase vitamin D levels in the body: Sunlight, Seafood, Mushrooms, Egg yolks, Fortified foods, Supplements.

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Lab Director



## Urine

Your Result Value  
**Pale Yellow**

### Colour

*Naked Eye Examination*

This is a physical exam of urine



MC-5941

Your Result Value  
**20 ml**

### Volume

*Visual*

This is a physical exam of urine



MC-5941

Your Result Value  
**1.015**

Range : 1.015 - 1.025

### Specific Gravity

*Refractometric Method*

Specific Gravity test is used in the evaluation of water balance and urine concentration



MC-5941

Your Result Value  
**6.5**



**Normal**

Range : 5.0 - 8.0

### pH

*Double indicator*

pH of urine may confirm Kidney stone conditions



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Your Result Value  
**Negative**

### Protein

*Reagent Strip*

This test checks for presence or absence of protein in urine



MC-5941

Your Result Value  
**Negative**

### Glucose

*Reagent Strip*

This test checks for presence or absence of Glucose in urine



MC-5941

Your Result Value  
**Negative**

### Ketones

*Rotheras nitroprusside*

This test checks for presence or absence of Ketones in urine



MC-5941

Your Result Value  
**Normal**

### Urobilinogen

*Erlich's*

This test checks for presence or absence of Urobilinogen in urine



MC-5941

Your Result Value  
**Negative**

### Bilirubin

*AZO*

This test checks for presence or absence of Bilirubin in urine



MC-5941

Your Result Value  
**Negative**

### Nitrite

*Diazotization Reaction*

This test checks for presence or absence of Nitrite in urine



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*Namrata*

Dr.Namrata Bhanushali M.D(2016071822)  
Lab Director



Your Result Value  
**Negative**

**Blood***Reagent Strip*

MC-5941

This test checks for presence or absence of Blood in urine

Your Result Value  
**Nil**

**Crystals***Microscopy*

MC-5941

This test detects the presence or absence of Crystals in your urine

Your Result Value

**2 - 3 /hpf****Normal**

Range : 0-5 /hpf

**Pus Cell***Microscopy*

MC-5941

This test detects Pyuria which confirms Urinary Tract Infection (UTI)

Your Result Value

**1 - 2 /hpf****Normal**

Range : 0-2 /hpf

**Epithelial Cells***Microscopy*

MC-5941

This test detects the amount of Epithelial cells in your urine

Your Result Value

**Absent****Yeast***Microscopy*

MC-5941

This test detects the presence or absence of Crystals in your urine

Your Result Value

**Absent****Bacteria***Microscopy*

MC-5941

This test detects the presence or absence of Bacteria in your urine  
Bacteria in urine confirms Urinary Tract Infection.

Your Result Value

**Clear****Appearance***Visual*

MC-5941

This is a physical exam of urine

Your Result Value

**Nil****Casts***Microscopy*

MC-5941

This test detects the presence or absence of Casts in your urine

Your Result Value

**Nil /hpf****RBCs***Microscopy*

MC-5941

This test detects the presence or absence of RBCs in your urine

**Sample Type :** Urine

**Suggestions :** Drink plenty of water, use neat & clean washroom, Release your urine at shorter period

**About your Results**

All the test results are Normal.

Processed By:



Sameer Ostwal

CRM:

DCN: LC/HCH/STDF-RPT/ENG/1222/V001

*Namrata*

Dr.Namrata Bhanushali M.D(2016071822)

Lab Director



## Nutrition

### Do's

- ✓ Boost calcium with milk, yogurt, cheese, and leafy greens Add variety with Brazil nuts, sesame seeds, and sunflower
- ✓ Add variety with Brazil nuts, sesame seeds, and sunflower seeds
- ✓ Enjoy apples, berries, and melons for fruit diversity
- ✓ Choose whole grains like whole wheat bread, brown rice, and oats
- ✓ Prioritize fresh fruits, greens, and unsalted nuts and seeds
- ✓ Ensure iodized salt intake for thyroid health
- ✓ Include fresh fruit and veggie juices for extra nutrients
- ✓ Maintain balance with whole grains, legumes, dairy, fruits, vegetables, nuts, and healthy fats

### Dont's

- ✗ Reduce consumption of colas and sugary drinks
- ✗ Decrease caffeine consumption
- ✗ Refrain from flavored and seasoned foods
- ✗ Avoid saturated fats, trans fats, and greasy foods such as cakes and fried items
- ✗ Exclude cruciferous vegetables like cauliflower, cabbage, and spinach
- ✗ Steer clear of soy products like soy milk or tofu
- ✗ Minimize intake of refined carbohydrates and processed foods
- ✗ Limit consumption of red meat and organ meats
- ✗ Control sugar intake



## Lifestyle

### Do's

- ✓ Keep physically active and maintain a healthy weight
- ✓ Ensure consistent sunlight exposure

### Dont's

- ✗ Refrain from overexerting yourself without consuming food or beverages.
- ✗ Steer clear of smoking and alcohol consumption.
- ✗ Avoid engaging in rigorous exercises.
- ✗ Resist the temptation of overeating or consuming calorie-rich foods.
- ✗ Prevent prolonged stress or overwork.
- ✗ Reduce the frequency of dining out.
- ✗ Pay attention to your body's signal and attend your routine health check-ups.

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## Physical Activity

- ✓ If regular workouts are tough, try using stairs and doing household chores
- ✓ Options for physical exertion vary, including walks, sports, and weightlifting
- ✓ Engage in physical activity for at least 30 minutes, 3-4 times weekly
- ✓ Incorporate incidental activities like stair climbing and household tasks for fitness
- ✓ Physical activities range from walks to yoga and light weight lifting, recommended for 30 minutes, 3-4 days a week



## Balanced Diet

- ✓ Prioritize a high-protein breakfast and a modest dinner for optimal nutrition.
- ✓ Steer clear of processed foods, potatoes, and calorie-laden sugary products.
- ✓ Remember to hydrate consistently by drinking water throughout the day.
- ✓ Optimal nutrition entails incorporating whole foods and avoiding processed items while maintaining a balanced meal schedule.
- ✓ A healthy lifestyle hinges on a balanced diet comprising whole grains, vegetables, fruits, nuts, seeds, beans, and plant oils.



## Stress Management

- ✓ Prioritizing adequate sleep, aiming for 6-8 hours nightly, is foundational to stress reduction.
- ✓ Engaging in meditation fosters mental clarity and resilience against stressors.
- ✓ Cultivating a positive lifestyle outlook and incorporating humor into daily routines can alleviate stress.
- ✓ Traveling, connecting with supportive individuals, and dedicating time to beloved hobbies are effective stress-relief strategies.
- ✓ Stress management plays a crucial role in maintaining overall well-being, necessitating daily adjustments.



## Suggested follow up test

Pancreas - Nil
Heart - HDL Cholesterol, Low Density Lipoprotein - Cholesterol (LDL), Total Cholesterol / HDL Ratio, LDL / HDL Ratio, Non HDL Cholesterol,
Thyroid - Nil
Kidney - Chloride Serum,
Liver - Bilirubin - Direct,
Blood - Absolute Monocyte Count, Red Cell Distribution Width CV, Red Cell Distribution Width SD, Absolute Eosinophil Count, Lymphocyte,
Vitamins, Minerals & Iron - Vitamin B12, Vitamin D-25 Hydroxy, TIBC,
Urine - Nil

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## Suggestions for preventive screening

Risks Factors	Recommended Tests	Age Group			
		(18-29 Yrs.)	(30-39 Yrs.)	(40-55 Yrs.)	(Above 55 Yrs.)
Diabetes	HbA1c Blood Glucose fasting	3/6	3/6	3/6	3/6
Thyroid Disorder	Thyroid Profile- Total (T3, T4 & TSH Ultra- sensitive)	3/6	3/6	3/6	3/6
Vitamin-D Deficiency	Vitamin D Total 25 -Hydroxy	3/6	3/6	3/6	3/6
Vitamin B12 Deficiency	Vitamin B12 Cyanocobalamin	3/6	3/6	3/6	3/6
High Cholesterol /Dyslipidemia	Lipid Profile Cholesterol-Total, Serum	3/6	3/6	3/6	3/6
Kidney Disorder	Kidney function test Urine Routine & MicroscopySerum Urea Serum	3/6	3/6	3/6	3/6
Liver Disorder	Liver function test SGOT/AST SGPT/ALT	3/6	3/6	3/6	3/6

Recommended

Strongly Recommended

Screen annually

Repeat earlier in case of symptoms

Under treatment- Repeat every 3 months

### Disclaimer

This is an electronically authenticated report, if test results are alarming or unexpected, customer/Client is advised to contact the customer care immediately for possible remedial action. All lab results are subject to clinical interpretation by qualified medical professional and this report is not subject to use for any medico-legal purpose.

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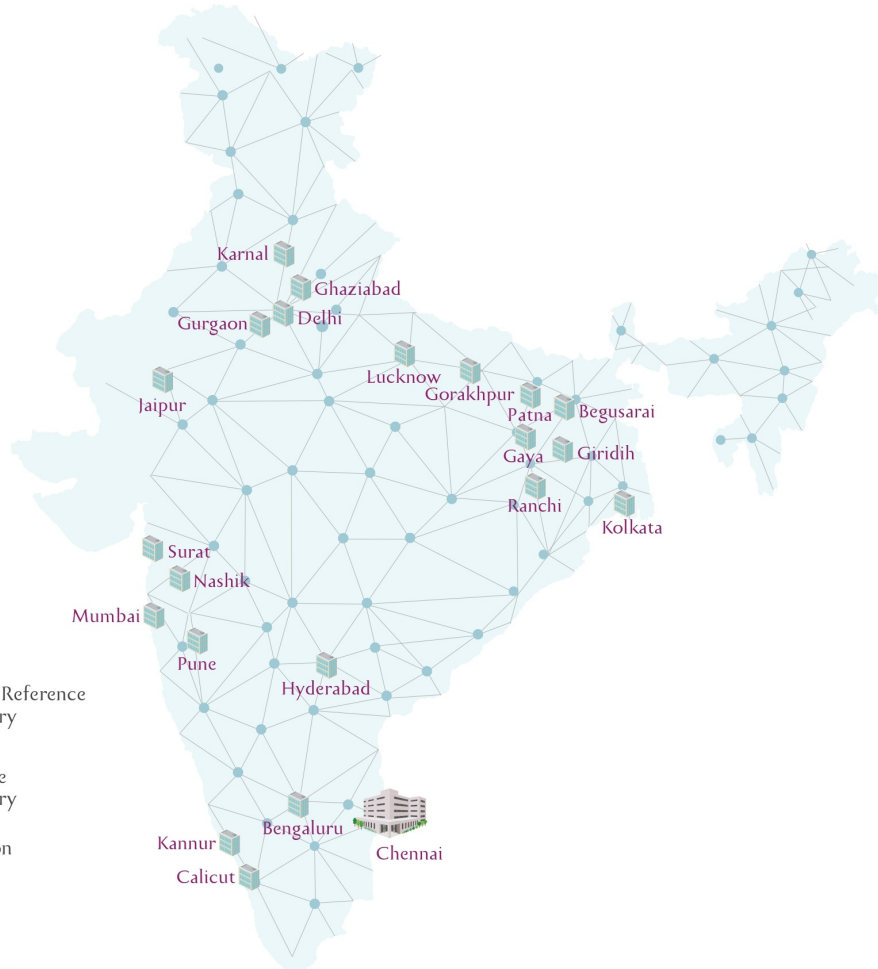
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CRM:  
DCN: LC/HCH/STDF-RPT/ENG/1222/V001

Mr. SAMEER OSTWAL	Collected : 13-02-2026 08:00	Lab ID : 60285900002
DOB :	Received : 13-02-2026 12:43	Sample Quality : Adequate
Age : 47 Years	Reported : 13-02-2026 13:37	Location : MUMBAI MULUND
Gender : Male	Status : Final	Ref By :
CRM :	Patient ID : 3129071	Client : TRYAMBAK AYURVEDA - Collection Center - BS21876

Parameter	Result	Unit	Biological Ref. Interval
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**Ayushman Vital.**

**COMPLETE BLOOD COUNT (CBC), Whole Blood EDTA**

<b><u>RBC</u></b>			
<b>Red Blood Cells</b> <i>Electrical Impedance method</i>	4.82	million/cmm	4.5 - 5.5
<b>Hemoglobin (HB), EDTA Blood</b> <i>Colorimetric method</i>	13.8	gm/dL	13.0-17.0
<b>PCV (Hematocrit)</b> <i>Calculated</i>	42.90	%	40 - 50
<b>MCV(Mean Corpuscular Volume)</b> <i>Calculated Value</i>	89.1	fL	83 - 101
<b>MCH (Mean Corpuscular Hb)</b> <i>Calculated Value</i>	28.6	Pg	27 - 32
<b>MCHC (Mean Corpuscular Hb Concentration)</b> <i>Calculated Value</i>	32.1	g/dL	31.5 - 34.5
<b>Red Cell Distribution Width CV</b> <i>Calculated</i>	L <b>11.30</b>	%	11.6 - 14.6
<b>Red Cell Distribution Width SD</b> <i>Calculated</i>	H <b>49.20</b>	fL	39 - 46
<b><u>Leucocytes</u></b>			
<b>WBC -Total Leucocytes Count</b> <i>Flowcytometry</i>	7.30	10 <sup>3</sup> Cells/ $\mu$ L	4.0 - 10.0
<b><u>Differential leucocyte count</u></b>			
<b>Neutrophils</b> <i>Flowcytometry</i>	46.60	%	40 - 80
<b>Lymphocytes</b> <i>Flowcytometry</i>	H <b>44.70</b>	%	20 - 40
<b>Monocytes</b> <i>Flowcytometry</i>	6.70	%	2 - 10
<b>Eosinophils</b> <i>Microscopy</i>	2.00	%	1-6
<b>Basophils</b> <i>Flowcytometry</i>	00	%	0-2

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Dr. Namrata Bhanushali M.D.(2016071822)  
Lab Director

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**Absolute leucocyte count**

<b>Neutrophils (Abs)</b> <i>Flowcytometry</i>	3.40	10 <sup>3</sup> Cells/ $\mu$ L	1.5-8.0
<b>Lymphocytes (Abs)</b> <i>Flowcytometry</i>	3.26	10 <sup>3</sup> Cells/ $\mu$ L	1.0-4.8
<b>Monocytes (Abs)</b> <i>Flowcytometry</i>	L 0.49	10 <sup>3</sup> Cells/ $\mu$ L	0.5-0.9
<b>Eosinophils (Abs)</b> <i>Calculated</i>	L 0.15	10 <sup>3</sup> Cells/ $\mu$ L	0.2 - 0.5
<b>Basophils (Abs)</b> <i>Calculated</i>	0	10 <sup>3</sup> Cells/ $\mu$ L	0.0 - 0.3

**Platelets**

<b>Platelet Count, EDTA Blood</b> <i>Electrical Impedance method</i>	246.00	10 <sup>3</sup> / $\mu$ L	150 - 410
<b>MPV</b> <i>Calculated</i>	9.3	fL	7.4-10.4
<b>PDW</b> <i>Calculated</i>	14.3	fL	10 - 17.9
<b>PlateletCrit</b> <i>Calculated</i>	0.22	%	0.22 - 0.24
<b>PLCR (Platelet-Large Cell Ratio)</b> <i>Calculated</i>	27.30	%	15 - 35

**PBS Findings**

<b>WBC Morphology</b>	Lymphocytosis +		
<b>RBC Morphology</b>	Normochromic Normocytic.		
<b>Platelets on Smear</b> <i>Microscopy</i>	Adequate		
<b>Mentzer Index Formula</b> <i>Calculated</i>	18	Index	<13 : Strong suspect of Thalassaemia.

**Clinical significance:**

CBC is used as a screening tool in the diagnosis or monitoring of many diseases. RBCs, WBCs, and platelets are produced in the bone marrow and released into the peripheral blood. The primary function of the RBC is to deliver oxygen to tissues. WBCs are key components of the immune system. Platelets play a vital role in blood clotting. Abnormal cell counter results are confirmed by peripheral blood smear examination by trained pathologist.

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Parameter	Result	Unit	Biological Ref. Interval
<b>Ayushman Vital.</b>			
<b>Glucose (Fasting) Plasma</b> <i>GOD-POD</i>	77.60	mg/dL	Normal: <100 Pre-Diabetic: 100-125 Diabetic: >=125
<b>HBA1C by HPLC</b>			
<b>HbA1c By HPLC,EDTA Blood</b>	5.50		Normal: <=5.7 Pre-Diabetes: 5.7-6.5 Diabetes: >=6.5
<b>Estimated Average Glucose(eAG)</b> <i>Calculated</i>	111.15	mg/dL	70-126

**Clinical significance :**

Hemoglobin A1c (HbA1c) is a result of the nonenzymatic attachment of a hexose molecule to the N-terminal amino acid of the hemoglobin molecule. HbA1c estimation is useful in evaluating the long-term control of blood glucose concentrations in patients with diabetes, for diagnosing diabetes and to identify patients at increased risk for diabetes (prediabetes). The ADA recommends measurement of periodic HbA1c measurements to keep the same within the target range. The presence of hemoglobin variants can interfere with the measurement of hemoglobin A1c (HbA1c).

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Dr. Namrata Bhanushali M.D(2016071822)  
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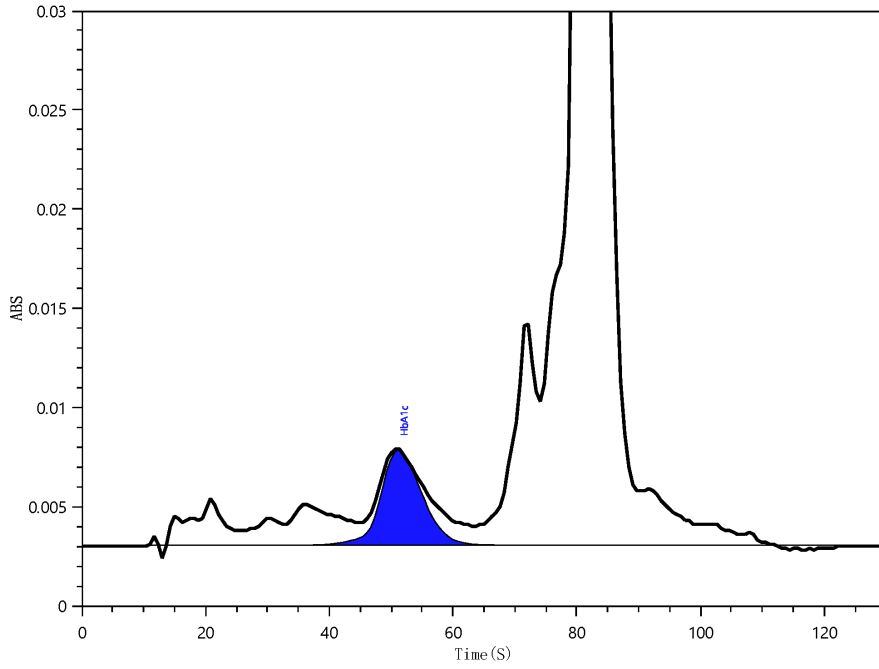
Mr. SAMEER OSTWAL

DOB :  
Age : 47 Years  
Gender : Male  
CRM :



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Parameter	Result	Unit	Biological Ref. Interval
<b>Ayushman Vital.</b>			
<b><u>LIVER FUNCTION TEST</u></b>			
<b>Bilirubin - Total, Serum</b> <i>DIAZO</i>	0.62	mg/dL	0.1 - 1.3
<b>Bilirubin - Direct, Serum</b> <i>DIAZO</i>	H 0.31	mg/dL	<0.3
<b>Bilirubin - Indirect, Serum</b> <i>Calculated</i>	0.31	mg/dL	<1.0
<b>SGOT, Serum</b> <i>IFCC WITHOUT PEP</i>	16.10	U/L	<35
<b>SGPT, Serum</b> <i>IFCC WITHOUT PEP</i>	21.50	U/L	<45
<b>Alkaline Phosphatase, Serum</b> <i>IFCC With AMP buffer</i>	100.0	U/L	53 - 128
<b>GGT (Gamma Glutamyl Transferase), Serum</b> <i>G-glutamyl-p-nitroanilide</i>	22.50	U/L	<55
<b>Total Protein, Serum</b> <i>BIURET</i>	6.85	gm/dL	6.4-8.8
<b>Albumin, Serum</b> <i>BCG</i>	4.21	gm/dL	<14 yrs: 3.8-5.4, 14-18 yrs: 3.2-4.5, 18-60 yrs: 3.5-5.2, 60-90 yrs: 3.2-4.6, >90 yrs: 2.9-4.5
<b>Globulin, Serum</b> <i>Calculated</i>	2.64	gm/dL	1.9-3.9
<b>A:G ratio</b> <i>Calculated</i>	1.59	%	1.1 - 2.5

**Clinical significance:**

Liver function tests measure how well the liver is performing its normal functions of producing protein and clearing bilirubin, a blood waste product. Other liver function tests measure enzymes that liver cells release in response to damage or disease. The hepatic function panel may be used to help diagnose liver disease if a person has signs and symptoms that indicate possible liver dysfunction. If a person has a known condition or liver disease, testing may be performed at intervals to monitor the health of the liver and to evaluate the effectiveness of any treatments. Abnormal tests.

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Parameter	Result	Unit	Biological Ref. Interval
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**Ayushman Vital.**

**THYROID FUNCTION TEST**

**Tri Iodo Thyronine (T3 Total), Serum**                      1.12                      ng/mL                      0.7 - 2.04  
CLIA

**Clinical significance:-**

Triiodothyronine (T3) values above 3.07 ng/mL in adults or over age related cutoffs in children are consistent with hyperthyroidism or increased thyroid hormone-binding proteins. Abnormal levels (high or low) of thyroid hormone-binding proteins (primarily albumin and thyroid-binding globulin) may cause abnormal T3 concentrations in euthyroid patients. Please note that Triiodothyronine (T3) is not a reliable marker for hypothyroidism. Therapy with amiodarone can lead to depressed T3 values.

**Thyroxine (T4), Serum**    6.09    ug/dL    5.5 -12.7  
CLIA

**Clinical significance:-**

Thyroxine (T4) is synthesized in the thyroid gland. High T4 are seen in hyperthyroidism and in patients with acute thyroiditis. Low T4 are seen in hypothyroidism, myxedema, cretinism, chronic thyroiditis, and occasionally, subacute thyroiditis. Increased total thyroxine (T4) is seen in pregnancy and patients who are on estrogen medication. These patients have increased total T4 levels due to increased thyroxine-binding globulin (TBG) levels. Decreased total T4 is seen in patients on treatment with anabolic steroids or nephrosis (decreased TBG levels).

**Thyroid Stimulating Hormone (TSH), Serum**                      2.890    uIU/mL    0.4 - 5.5  
CLIA


**Clinical significance:**

In primary hypothyroidism, TSH (thyroid-stimulating hormone) levels will be elevated. In primary hyperthyroidism, TSH levels will be low. TSH estimation is especially useful in the differential diagnosis of primary (thyroid) from secondary (pituitary) and tertiary (hypothalamus) hypothyroidism. In primary hypothyroidism, TSH levels are significantly elevated, while in secondary and tertiary hypothyroidism, TSH levels are low or normal. Elevated or low TSH in the context of normal free thyroxine is often referred to as subclinical hypo- or hyperthyroidism, respectively.

Pregnancy	American Thyroid Association	American European Endocrine	Thyroid society Association
1st trimester	< 2.5	< 2.5	< 2.5
2nd trimester	< 3.0	< 3.0	< 3.0
3rd trimester	< 3.5	< 3.0	< 3.0

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Parameter	Result	Unit	Biological Ref. Interval
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**Ayushman Vital.**

**RENAL PROFILE**

<b>Creatinine, Serum</b> <i>ENZYMATIC CREATININASE</i>	0.93	mg/dL	0.7 - 1.3
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**Clinical significance :-**

An increased level of creatinine may be a sign of poor kidney function. The measure of serum creatinine may also be used to estimate glomerular filtration rate (GFR). The formula for calculating GFR takes into account the serum creatinine count and other factors, such as age and sex. A GFR score below 60 suggests kidney disease. Creatinine clearance is usually determined from a measurement of creatinine in a 24-hour urine sample and from a serum sample taken during the same time period. However, shorter time periods for urine samples may be used. Accurate timing and collection of the urine sample is important.

<b>eGFR</b> <i>Calculated</i>	106	ml/min/1.73m <sup>2</sup>	Normal : > 90 Mild decrease in GFR : 60-90 Moderate decrease in GFR : 30-59 Severe decrease in GFR : 15-29 Kidney Failure: < 15
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**Clinical Significance:**

Tests to precisely measure GFR are highly complex. Therefore, healthcare providers use a formula to come up with an estimated GFR (eGFR). The formula combines results from a serum creatinine blood test with information like your age and gender. A serum creatinine blood test measures levels of creatinine, a waste product in your blood. Your body makes and uses creatine, a chemical, to provide energy to muscles. When muscles use this energy, muscle tissue breaks down, releasing creatinine (a toxin) into the blood. Healthy kidneys filter this toxin out of the blood and your body gets rid of it when you urinate. But when you have kidney disease, creatinine stays in the blood and gradually builds up.

<b>Urea, Serum</b> <i>UREASE-GLDH</i>	16.80	mg/dL	15-48
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**Clinical Significance:**

Urea is the final breakdown product of the amino acids found in proteins. High urea levels suggest poor kidney function. This may be due to acute or chronic kidney disease. However, there are many things besides kidney disease that can affect urea levels such as decreased blood flow to the kidneys as in congestive heart failure, shock, stress, recent heart attack or severe burns; bleeding from the gastrointestinal tract; conditions that cause obstruction of urine flow; or dehydration

<b>Blood Urea Nitrogen (BUN), Serum</b> <i>Calculated</i>	7.85	mg/dL	<1 month: 3-12, 1 month-12 months: 4-18, 1-60 Yrs: 6-20, >60 Yrs: 8-23
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**Clinical significance:**

Increased blood urea nitrogen (BUN) may be due to prerenal causes (cardiac decompensation, water depletion due to decreased intake and excessive loss, increased protein catabolism, and high protein diet), renal causes (acute glomerulonephritis, chronic nephritis, polycystic kidney disease, nephrosclerosis, and tubular necrosis), and postrenal causes (eg, all types of obstruction of the urinary tract, such as stones, enlarged prostate gland, tumors). The determination of serum BUN currently is the most widely used screening test for the evaluation of kidney function.

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Dr. Namrata Bhanushali M.D(2016071822)  
Lab Director

Mr. SAMEER OSTWAL	Collected : 13-02-2026 08:00	Lab ID : 60285900002
DOB :	Received : 13-02-2026 12:43	Sample Quality : Adequate
Age : 47 Years	Reported : 13-02-2026 15:09	Location : MUMBAI MULUND
Gender : Male	Status : Final	Ref By :
CRM :	Patient ID : 3129071	Client : TRYAMBAK AYURVEDA - Collection Center - BS21876

**BUN/Creatinine Ratio, Serum**

8.44

%

5.0 - 23.5

*Calculated method*

**Clinical Significance:**

The blood urea nitrogen (BUN)/creatinine ratio (BCR) is one of the common laboratory tests used to distinguish Pre renal azotemia and Acute tubular necrosis.

**Uric Acid, Serum**

6.30

mg/dL

4.4-7.6

*URICASE-POD*

**Clinical significance:-**

Uric acid is the final product of purine metabolism in humans. The major causes of hyperuricemia are increased purine synthesis, inherited metabolic disorder, excess dietary purine intake, increased nucleic acid turnover, malignancy, cytotoxic drugs, and decreased excretion due to chronic renal failure or increased renal reabsorption. Hypouricemia may be secondary to severe hepatocellular disease with reduced purine synthesis, defective renal tubular reabsorption, overtreatment of hyperuricemia with allopurinol, as well as some cancer therapies (eg, 6-mercaptopurine).

**Calcium, Serum**

9.20

mg/dL

8.6 - 10.2

*Arsenazo Method*

**Clinical significance :**

Calcium is useful for diagnosis and monitoring of a wide range of disorders including diseases of bone, kidney, parathyroid gland, or gastrointestinal tract. Values of total calcium can be affected by serum proteins, particularly albumin thus, latter's value should be taken into account when interpreting serum calcium levels.

The following regression equation may be helpful.

Corrected total calcium (mg/dl)= total calcium (mg/dl) + 0.8 (4- albumin [g/dl])

**Clinical significance:**

Kidney function tests are a reliable way of testing the kidneys, but it is important to remember that they can also change dramatically with illness or dehydration. This panel could be ordered when a patient has risk factors for kidney dysfunction such as high blood pressure (hypertension), diabetes, cardiovascular disease, obesity, elevated cholesterol, or a family history of kidney disease. This panel may also be ordered when someone has signs and symptoms of kidney disease, though early kidney disease often does not cause any noticeable symptoms. It may be initially detected through routine blood or urine testing.

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Parameter	Result	Unit	Biological Ref. Interval
<b>Ayushman Vital.</b>			
<b><u>Lipid Profile</u></b>			
<b>Total Cholesterol, Serum</b> <i>CHOP-PAP</i>	174.00	mg/dL	Desirable: <200 Borderline: 200 - 240 High: >240
<b>Triglycerides, Serum</b> <i>GPO</i>	107.80	mg/dL	Normal: <150 High:150-200 Hypertriglyceridemia: 200-499 Very high: >499
<b>HDL Cholesterol, Serum</b> <i>DIRECT</i>	L <b>34.70</b>	mg/dL	Low : < 40 Normal : 40-60 High : > 60
<b>Low Density Lipoprotein-Cholesterol (LDL)</b> <i>Calculated</i>	H <b>117.74</b>	mg/dL	Optimal: <=100 Near Optimal: 100-130 Borderline High: 130-160 High: 160-189 Very High: >189
<b>VDL</b> <i>Calculated</i>	21.56	mg/dL	6.0-40.0
<b>Total Cholesterol/HDL Ratio</b> <i>Calculated</i>	H <b>5.01</b>	%	Optimal: <3.5 Near Optimal: 3.5 - 5.0 High: >5
<b>LDL / HDL Ratio</b> <i>Calculated</i>	H <b>3.39</b>	%	Optimal: <2.5 Near optimal: 2.5 - 3.5 High: >3.5
<b>Non HDL Cholesterol, Serum</b> <i>Calculated</i>	H <b>139</b>	mg/dL	Desirable: < 130 Borderline High: 130-160 High: 160-190 Very High: >=190

**Clinical significance:**

A complete cholesterol test — also called a lipid panel or lipid profile — is a blood test that can measure the amount of cholesterol and triglycerides in your blood. A cholesterol test can help determine your risk of the buildup of fatty deposits (plaques) in your arteries that can lead to narrowed or blocked arteries throughout your body (atherosclerosis). A cholesterol test is an important tool. High levels of lipids (fats) in the blood, including cholesterol and triglycerides, is also called "hyperlipidemia." Hyperlipidemia can significantly increase a person's risk of heart attacks, strokes, and other serious problems due to vessel wall narrowing or obstruction.

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Age : 47 Years	Reported : 13-02-2026 14:31	Location : MUMBAI MULUND
Gender : Male	Status : Final	Ref By :
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Parameter	Result	Unit	Biological Ref. Interval
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**Ayushman Vital.**

**ELECTROLYTES**

<b>Sodium (Na+), Serum</b>	139.74	mmol/L	136-145
<i>Direct ISE</i>			

**Clinical significance:-**

Sodium is the primary extracellular cation. Hyponatremia (high sodium) is often attributable to excessive loss of sodium-poor body fluids. Hyponatremia is often associated with hypercalcemia and hypokalemia and is seen in liver disease, cardiac failure, pregnancy, burns, and osmotic diuresis. Hyponatremia occurs in dehydration, increased renal sodium conservation in hyperaldosteronism, Cushing syndrome, and diabetic acidosis. Severe hyponatremia may be associated with volume contraction, lactic acidosis, and increased hematocrit.

<b>Potassium (K+), Serum</b>	4.18	mmol/L	3.5 - 5.1
<i>Direct ISE</i>			

**Clinical significance:-**

Potassium is the major cation of the intracellular fluid. Disturbance of potassium homeostasis has serious consequences. Decreases in extracellular potassium are characterized by muscle weakness, irritability, and eventual paralysis. Hypokalemia (low potassium) is common in vomiting, diarrhea, alcoholism, and folic acid deficiency. Hyperkalemia may be seen in end-stage renal failure, hemolysis, trauma, Addison disease, metabolic acidosis, acute starvation, dehydration, and with rapid potassium infusion.

<b>Chloride, Serum</b>	H 107.72	mmol/L	96-106
<i>Direct ISE</i>			

**Clinical significance:-**

Chloride is the major anion in the extracellular water space. Chloride is increased in dehydration, renal tubular acidosis (hyperchloremia metabolic acidosis), acute renal failure, metabolic acidosis associated with prolonged diarrhea and loss of sodium bicarbonate, diabetes insipidus, adrenocortical hyperfunction, salicylate intoxication, and with excessive infusion of isotonic saline or extremely high dietary intake of salt. Hyperchloremia acidosis may be a sign of severe renal tubular pathology. Chloride is decreased in overhydration, chronic respiratory acidosis, salt-losing nephritis, metabolic alkalosis, congestive heart failure.

**Remarks:** Sample has been processed after 4 hours of collection. Fresh sample is advised for confirmation of results.

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Parameter	Result	Unit	Biological Ref. Interval
<b>Ayushman Vital.</b>			
<b><u>IRON STUDIES</u></b>			
<b>Iron, Serum</b> <i>Ferrene</i>	65.6	µg/dL	50-150
<b>UIBC, Serum</b> <i>Ferrozine</i>	178.90	µg/dL	112- 346
<b>Total Iron Binding Capacity (TIBC), Serum</b> <i>Ferrene</i>	L 245	µg/dL	250-400
<b>% OF IRON SATURATION</b> <i>Calculated</i>	27	%	Male 20% - 50% Female 15% - 50%

**Clinical Significance: -**

Serum iron can be decreased in conditions like iron deficiency anemia and in inflammatory disorders (acute infection, immunization, and myocardial infarction), Hemorrhage etc.  
Increased serum iron can be seen in conditions like hemochromatosis, hemolytic anemia, hepatitis, Iron poisoning and Frequent blood transfusions.

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Parameter	Result	Unit	Biological Ref. Interval
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### Ayushman Vital.

<b>Vitamin B12, Serum</b> CLIA	L 177.00	pg/mL	200 - 1100
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#### Clinical significance:

Vitamin B12 (cobalamin) is necessary for hematopoiesis and normal neuronal function. The body uses its vitamin B12 stores very economically, reabsorbing vitamin B12 from the ileum and returning it to the liver; very little is excreted. Vitamin B12 deficiency may be due to lack of IF secretion by gastric mucosa (eg, gastrectomy, gastric atrophy) or intestinal malabsorption (eg, ileal resection, small intestinal diseases). Pernicious anemia is a macrocytic anemia caused by vitamin B12 deficiency that is due to a lack of IF secretion by gastric mucosa. Serum methylmalonic acid and homocysteine levels are also elevated in vitamin B12 deficiency states.

<b>Vitamin D - 25-Hydroxy, Serum</b> CLIA	L 8.02	ng/mL	<10: Severe deficiency 10-20: Mild to moderate deficiency 20-50: Optimum level 50-80: Increased risk of hypercalciuria >80: Toxicity possible
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#### Clinical significance:-

A low blood level of 25-hydroxyvitamin D may mean that a person is not getting enough exposure to sunlight or enough dietary vitamin D to meet his or her body's demand or that there is a problem with its absorption from the intestines. Occasionally, drugs used to treat seizures, particularly phenytoin (Dilantin), can interfere with the production of 25-hydroxyvitamin D in the liver. There is some evidence that vitamin D deficiency may increase the risk of some cancers, immune diseases, and cardiovascular disease. A high level of 25-hydroxyvitamin D usually reflects excess supplementation from vitamin pills or other nutritional supplements.

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Parameter	Result	Unit	Biological Ref. Interval
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**Ayushman Vital.**

**URINE ROUTINE EXAMINATION**

**PHYSICAL EXAMINATION**

<b>Colour</b> <i>Naked Eye Examination</i>	Pale Yellow		Pale Yellow
<b>Volume</b> <i>Visual</i>	20	ml	
<b>Specific Gravity</b> <i>Refractometric Method</i>	1.015		1.015 - 1.025
<b>Appearance</b> <i>Visual</i>	Clear		Clear
<b>pH</b> <i>Double indicator</i>	6.5		5.0 -8.0

**BIOCHEMICAL EXAMINATION**

<b>Protein, Urine</b> <i>Reagent Strip</i>	Negative		Negative
<b>Glucose</b> <i>Reagent Strip</i>	Negative		Negative
<b>Ketones</b> <i>Rotheras nitroprusside</i>	Negative		Negative
<b>Urobilinogen</b> <i>Erlachs</i>	Normal		Normal
<b>Bilirubin</b> <i>AZO</i>	Negative		Negative
<b>Nitrite</b> <i>Diazotization Reaction</i>	Negative		Negative
<b>Bile Pigments, Urine</b> <i>Fouchets Reagent</i>	Negative		Negative
<b>Bile Salt, Urine</b> <i>Sulphur Powder</i>	Negative		Negative
<b>Blood</b> <i>Reagent Strip</i>	Negative		Negative

**MICROSCOPIC EXAMINATION**

<b>Pus cells</b> <i>Microscopy</i>	2 - 3	/hpf	0-5
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<b>Epithelial Cells</b> <i>Microscopy</i>	1 - 2	/hpf	0-2
<b>RBCs</b> <i>Microscopy</i>	Nil	/hpf	Nil
<b>Casts</b> <i>Microscopy</i>	Nil		Nil
<b>Crystals</b> <i>Microscopy</i>	Nil		Nil
<b>Yeast cells</b> <i>Microscopy</i>	Absent		Absent
<b>Bacteria</b> <i>Microscopy</i>	Absent		Absent

**Clinical Significance:**

A urinalysis alone usually doesn't provide a definite diagnosis. Depending on the reason your provider recommended this test, you might need follow-up for unusual results. Evaluation of the urinalysis results with other tests can help your provider determine next steps. Getting standard test results from a urinalysis doesn't guarantee that you're not ill. It might be too early to detect disease or your urine could be too diluted.

----- End Of Report -----

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