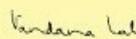


LPL - PSC DILSHAD GARDEN
 F - 244, A/Z, MANGAL BAZAR
 ROAD, DILSHAD GARDEN, DELHI
 - 110095
 DELHI


 (Hony) Brig. Dr. Arvind Lal
 M.B.B.S., D.C.P.
Padma Shri
 FMR HONORARY PHYSICIAN TO THE PRESIDENT OF INDIA




 Dr. Vandana Lal
 M.D (PATH), IFCAP
Chief of Pathology
 SHROMANI AWARD WINNER

Name	: Mr. ANIRUDDHA BHADURI	Collected	: 4/4/2015 8:11:00AM
Lab No.	: 110161075	Received	: 4/4/2015 8:10:33AM
Age	: 43 Years	Reported	: 4/4/2015 4:09:59PM
Gender	: Male	Report Status	: Final
A/c Status	: P		
Ref By	: ANJANA BHAN		

Test Name	Results	Units	Bio. Ref. Interval
MICROALBUMIN,1ST MORNING/RANDOM URINE (Immunoturbidimetry,Spectrophotometry)			
Microalbumin	<5.00	mg/L	
Creatinine	33.45	mg/dL	39.00 - 259.00
Microalbumin : Creatinine Ratio	<30	mg/g creatinine	<30.00

Interpretation

CATEGORY	REFERENCE RANGE IN mg/g creatinine
Normal/Non diabetic	<30
Microalbuminuria	30-300
Clinical albuminuria	> 300

Note: It is recommended that at least two of three specimens collected within a 3-6 month period be abnormal before considering a patient to be within a diagnostic category.

Clinical Use

- Early detection of Diabetic nephropathy
- Therapeutic monitoring of patients with Nephropathy
- Routine management of patients with Diabetes

LPL - PSC DILSHAD GARDEN
 F - 244, A/Z, MANGAL BAZAR
 ROAD, DILSHAD GARDEN, DELHI
 - 110095
 DELHI


 (Hony) Brig. Dr. Arvind Lal
 M.B.B.S., D.C.P.
Padma Shri
 FMR HONORARY PHYSICIAN TO THE PRESIDENT OF INDIA



Vandana Lal
 Dr. Vandana Lal
 M.D (PATH), IFCAP
Chief of Pathology
 SHROMANI AWARD WINNER

Name	: Mr. ANIRUDDHA BHADURI	Collected	: 4/4/2015 8:11:00AM
Lab No.	: 110161075	Received	: 4/4/2015 8:10:33AM
Age:	43 Years	Reported	: 4/4/2015 4:10:03PM
Gender:	Male	Report Status	: Final
A/c Status	: P	Ref By	: ANJANA BHAN

Test Name	Results	Units	Bio. Ref. Interval
LIPID PROFILE, BASIC, SERUM (Spectrophotometry, Calculated)			
Cholesterol Total	204.00	mg/dL	<200.00
Triglycerides	133.00	mg/dL	<150.00
HDL Cholesterol	41.00	mg/dL	40.00 - 60.00
LDL Cholesterol	136.40	mg/dL	<100.00
VLDL Cholesterol	26.60	mg/dL	<30.00
Non-HDL Cholesterol	163.00	mg/dL	

Interpretation

NCEP RECOMMENDATIONS	TOTAL CHOLESTEROL in mg/dL	TRIGLYCERIDE in mg/dL	LDL CHOLESTEROL in mg/dL
Optimal	<200	<150	<100
Above Optimal	-	-	100-129
Borderline High	200-239	150-199	130-159
High	>=240	200-499	160-189
Very High	-	>=500	>=190

Note

- 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.
- As per NCEP 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.
- NCEP identifies elevated Triglycerides as an independent risk factor for Coronary Heart Disease (CHD).
- Low HDL levels are associated with Coronary Heart Disease due to insufficient HDL being available to participate in reverse cholesterol transport, the process by which cholesterol is eliminated from peripheral tissues.
- ATP III guidelines uses LDL Cholesterol as the primary target for cholesterol lowering therapy. Note that major risk factors can modify LDL goals.

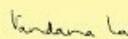
NON HDL CHOLESTEROL

RISK CATEGORY	LDL GOAL (mg/dL)	NON HDL GOAL (mg/dL)
CHD & CHD risk equivalent (10 year risk for CHD > 20%)	< 100	< 130

LPL - PSC DILSHAD GARDEN
 F - 244, A/Z, MANGAL BAZAR
 ROAD, DILSHAD GARDEN, DELHI
 - 110095
 DELHI


 (Hony) Brig. Dr. Arvind Lal
 M.B.B.S., D.C.P.
Padma Shri
 FMR HONORARY PHYSICIAN TO THE PRESIDENT OF INDIA




 Dr. Vandana Lal
 M.D (PATH), IFCAP
Chief of Pathology
 SHROMANI AWARD WINNER

Name	: Mr. ANIRUDDHA BHADURI	Collected	: 4/4/2015 8:11:00AM
Lab No.	: 110161075	Received	: 4/4/2015 8:10:33AM
Age:	43 Years	Reported	: 4/4/2015 4:10:03PM
Gender:	Male	Report Status	: Final
A/c Status	: P	Ref By	: ANJANA BHAN

Test Name	Results	Units	Bio. Ref. Interval
Multiple (2+) Risk Factors and 10 year risk < or = 20%	< 130		< 160
0-1 Risk factor	< 160		<190

Comments

ATP III suggested the addition of Non HDL Cholesterol (Total Cholesterol - HDL Cholesterol) as an indicator of all atherogenic lipoproteins (mainly LDL & VLDL). The Non HDL Cholesterol is used as a secondary target of therapy in persons with triglycerides ≥ 200 mg/dL. The goal for Non HDL Cholesterol in those with increased triglyceride is 30 mg/dL above that set for LDL Cholesterol.

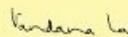
For calculation of CHD risk, history of smoking, any medication for hypertension & current blood pressure levels are required.

GLUCOSE, FASTING (F) AND POST MEAL, PLASMA (Hexokinase)			
Glucose Fasting	90.00	mg/dL	70.00 - 100.00
Glucose (PP)	80.00	mg/dL	70.00 - 140.00

LPL - PSC DILSHAD GARDEN
 F - 244, A/Z, MANGAL BAZAR
 ROAD, DILSHAD GARDEN, DELHI
 - 110095
 DELHI


 (Hony) Brig. Dr. Arvind Lal
 M.B.B.S., D.C.P.
Padma Shri
 FMR HONORARY PHYSICIAN TO THE PRESIDENT OF INDIA




 Dr. Vandana Lal
 M.D (PATH), IFCAP
Chief of Pathology
 SHROMANI AWARD WINNER

Name	: Mr. ANIRUDDHA BHADURI	Collected	: 4/4/2015 8:11:00AM
Lab No.	: 110161075	Received	: 4/4/2015 8:10:33AM
Age:	43 Years	Reported	: 4/4/2015 4:10:06PM
Gender:	Male	Report Status	: Final
A/c Status	: P	Ref By	: ANJANA BHAN

Test Name	Results	Units	Bio. Ref. Interval
HbA1c (GLYCOSYLATED HEMOGLOBIN), BLOOD (HPLC)	5.70	%	

Interpretation

As per American Diabetes Association (ADA)	
Reference Group	HbA1c in %
Non diabetic adults >=18 years	4.0 - 6.0
At risk	>=6.0 to <= 6.5
Diagnosing Diabetes	> 6.5
Therapeutic goals for glycemic control	Age > 19 years . Goal of therapy: < 7.0 . Action suggested: > 8.0
	Age < 19 years . Goal of therapy: <7.5

- Note:** 1. Since HbA1c reflects long term fluctuations in the blood glucose concentration, a diabetic patient who is recently under good control may still have a high concentration of HbA1c. Converse is true for a diabetic previously under good control but now poorly controlled .
2. Target goals of < 7.0 % may be beneficial in patients with short duration of diabetes, long life expectancy and no significant cardiovascular disease. In patients with significant complications of diabetes, limited life expectancy or extensive co-morbid conditions, targeting a goal of < 7.0 % may not be appropriate.

Comments

HbA1c provides an index of average blood glucose levels over the past 8 - 12 weeks and is a much better indicator of long term glycemic control as compared to blood and urinary glucose determinations.

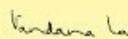
ADA criteria for correlation between HbA1c & Mean plasma glucose levels

HbA1c(%)	Mean Plasma Glucose (mg/dL)
6	126
7	154
8	183
9	212

LPL - PSC DILSHAD GARDEN
 F - 244, A/Z, MANGAL BAZAR
 ROAD, DILSHAD GARDEN, DELHI
 - 110095
 DELHI


 (Hony) Brig. Dr. Arvind Lal
 M.B.B.S., D.C.P.
Pudana Shastri
 FMR HONORARY PHYSICIAN TO THE PRESIDENT OF INDIA




 Dr. Vandana Lal
 M.D (PATH), IFCAP
Chief of Pathology
 SHROMANI AWARD WINNER

Name	: Mr. ANIRUDDHA BHADURI	Collected	: 4/4/2015 8:11:00AM
Lab No.	: 110161075	Received	: 4/4/2015 8:10:33AM
Age	: 43 Years	Reported	: 4/4/2015 4:10:06PM
Gender	: Male	Report Status	: Final
A/c Status	: P	Ref By	: ANJANA BHAN

Test Name	Results	Units	Bio. Ref. Interval
10	240		
11	269		
12	298		



Dr. Nimmi Kansal
 MD (Biochemistry)
 HOD Biochem & IA



Dr. Sushrut Pownikar
 DNB (Pathology)
 HOD Hemat & Imm

-----End of report-----