

Name : Patrick Josef Literal Caluza
Lab. No. : 3022116901
Contract. : Nas (GN, CN, EN, RN, SR)-Dubai Branch
Patient No. : 30-82020
File No. : 38122

Sample Date : 17/10/2022 14:30 PM
Report Date : 17/10/2022 16:30 PM
Doctor references : Dr. Tooba Karim

Branch : Al Borg Lab. Dubai Deirah **Age** : 38 Year **DOB** 26/11/1984 **Sex** : Male

Cholesterol/HDL/LDL/Triglycerides

Test	Result	Unit	Ref. Range
Cholesterol	273 H	mg/dl	No risk <200 Moderate risk 200 - 240 High risk >240

Comments

Primary sample: Serum
 Methodology : Enzymatic colorimetric assay in the presence pf peroxidase.

Triglycerides (TG) in Serum	328 H	mg/dL	Normal<200
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Comments

Primary sample: Serum
 Methodology : Enzymatic colorimetric assay

HDL Cholesterol	45 L	mg/dL	Optimum level ≥ 60 Borderline risk: 40-59 High risk: <40
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Comments

Primary sample: Serum
 Methodology : HOmogeneous Enzymatic colorimetric assay.

LDL Cholesterol	163 H	mg/dl	Optimal <100 Near optimal 100-129 Borderline high 130-159 High 160-189 Very high >189
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Comments

Sample type: Serum
 Methodology: Calculation

*This is non-accredited test.

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Cholesterol/HDL/LDL/Triglycerides

Test	Result	Unit	Ref. Range
Non-HDL Cholesterol	228 H	mg/dL	very high >220 High 190-219 Borderline high 160-189 Near Ideal 130-159 Ideal for people at risk of heart disease <130 Ideal for people at very high risk of heart disease <100

Comments

Patients with elevated levels of non-HDL-C and normal levels of LDL-C, often have an increased number of LDL particles, increased apo B or increased small, dense LDL particles and these are associated with an increased risk of CVD. Therefore non-HDL-C might be more valuable indicator of cardiovascular risk than LDL-C.
 The treatment goal for non-HDL cholesterol in persons with high triglycerides (>199 mg/dl) is 30 mg/dl higher than their LDL cholesterol goal.

Reviewed By:



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** End Of Report **