

Name : Wael Mostafa Houhou Sample Date : 25/11/2022 21:50 PM
Lab. No. : 3022120583 Report Date : 25/11/2022 21:54 PM
Contract. : Nas (GN, CN, EN, RN, SR) 10% - Dubai Branch Doctor references : Dr. Tahniyat Iqbal
Patient No. : 30-84542
File No. : 38614

Branch : Al Borg Lab. Dubai Deirah Age : 33 Year DOB 03/02/1989 Sex : Male

C-Reactive Protein (CRP)

Test	Result	Unit	Ref. Range
C-Reactive Protein (CRP)	< 0.60	mg/L	0 - 5

Comments

Sample Type: Serum
Methodology: Particle Enhanced Turbidimetric assay

Reviewed By:



Dr. Shailendra Rathod.MD
Laboratory Director
Physician Specialist Clinical
Pathology
License no. 10944644-001

**** End Of Report ****

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Age : 33 Year
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Sex : Male

Cholesterol/HDL/LDL/Triglycerides

Test	Result	Unit	Ref. Range
Cholesterol	164	mg/dl	No risk <200 Moderate risk 200 - 240 High risk >240

Comments

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

Triglycerides (TG) in Serum	55	mg/dL	Normal<200
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Comments

Primary sample: Serum
 Methodology : Enzymatic colorimetric assay

HDL Cholesterol	54	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	98	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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 Deirah **Age** : 33 Year **DOB** 03/02/1989 **Sex** : Male

Cholesterol/HDL/LDL/Triglycerides

Test	Result	Unit	Ref. Range
Non-HDL Cholesterol	110	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.

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Sample Date : 25/11/2022 21:50 PM
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Doctor references : Dr. Tahniyat Iqbal

Branch : Al Borg Lab. Dubai
Deirah **Age** : 33 Year **DOB** 03/02/1989 **Sex** : Male

Complete Blood Count - (CBC)

Test	Result	Unit	Ref. Range
Hemoglobin	14.2	g/dL	13.5 - 17.5
Hematocrit	44.8	%	38.8 - 50
Red cell count	5.09	$\times 10^{12}/L$	4.32 - 5.72
MCV	88.0	fL	81.2 - 95.1
MCH	27.9	pg	26.5 - 32.6
MCHC	31.7	L g/dL	32 - 36
RDW	12.6	%	11.8 - 15.6
Total Leucocytic Count	5.89	$\times 10^9/L$	3.5 - 10.5
Basophils absolute count	0.04	$\times 10^9/L$	0 - 0.3
Basophils relative count	0.68	%	
Eosinophils absolute count	0.14	$\times 10^9/L$	0.05 - 0.5
Eosinophils relative count	2.38	%	
Neutrophils absolute count	3.07	$\times 10^9/L$	1.7 - 7
Neutrophils relative count	52.12	%	
Lymphocytes absolute count	2.27	$\times 10^9/L$	0.9 - 3.1
Lymphocytes relative count	38.54	%	
Monocytes absolute count	0.37	$\times 10^9/L$	0.3 - 0.9
Monocytes relative count	6.28	%	

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Complete Blood Count - (CBC)

Test	Result	Unit	Ref. Range
Platelet Count	164	x10 ⁹ /L	150 - 450

Comments

Sample type: EDTA Whole Blood

Methodology: (Hemoglobin =Cyanmethemoglobin) (Hematocrit = Calculation) (RBC, PLT, WBC and Diff Count = Flow cytometry)

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Chemistry Unit

Test	Result	Unit	Ref. Range
Creatinine in Serum	0.80	mg/dl	0.67 - 1.17

Comments

Sample type: Serum
Methodology : Kinetic colorimetric assay Jaffe method with picrate in alkaline solution.

Alanine Aminotransferase (ALT)	13	U/L	5 - 41
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Comments

Primary type: Serum
Methodology : Enzymatic colorimetric assay according to IFCC without pyrodoxal-5-phosphate.

Aspartate Aminotransferase (AST)	16	U/L	0 - 40
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Comments

Primary sample: Serum
Methodology : Enzymatic colorimetric assay according to IFCC without pyridoxal-5-phosphate.

Alkaline Phosphatase	72	U/L	40 - 129
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Comments

Primary sample: Serum
Methodology : AMP (Amino Methyl Propanol) optimized IFCC

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Verified By : Shailendra Rathod.MD

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