



Name : Muhammad Adnan Ramzan **Sample Date** 

: 04/01/2023 11:46 AM

Lab. No.

: 3023123899

**Report Date** : 04/01/2023 15:42 PM

Contract.

: Nas (WN, VN)-Dubai Branch

**Doctor references: Dr. Tahniyat Iqbal** 

Patient No.

: 30-86866

File No. **Branch** 

: 35188

Age: 32 Year

DOB 27/07/1991 Sex : Male

: Al Borg Lab. Dubai Deirah

**Chemistry Unit** 

Test Result Unit Ref. Range

Alanine Aminotransferase (ALT)

26

U/L

5 - 41

Comments

Primary type: Serum

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

Aspartate Aminotransferase (AST)

23

U/L

Comments

Primary sample: Serum

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

Reviewed By:

Dr. Shailendra Rathod.MD **Laboratory Director Physician Specialist Clinical** 

Pathology

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Deirah

# **C-Reactive Protein (CRP)**

Result Unit Ref. Range 0 - 5 C-Reactive Protein (CRP) 12.43 mg/L

Comments

Contract.

Sample Type: Serum

Methodology: Particle Enhanced Turbidimetric assay

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Contract. : Nas (WN, VN)-Dubai Branch Doctor references : Dr. Tahniyat Iqbal

Patient No. : 30-86866

File No. : 35188

Branch : Al Borg Lab. Dubai Age : 32 Year DOB 27/07/1991 Sex : Male

Deirah

# **Complete Blood Count - (CBC)**

Test	Result	Unit	Ref. Range
Hemoglobin	14.4	g/dL	13.5 - 17.5
Hematocrit	43.4	%	38.8 - 50
Red cell count	5.05	x10 <sup>12</sup> /L	4.32 - 5.72
MCV	85.9	fL	81.2 - 95.1
MCH	28.5	pg	26.5 - 32.6
MCHC	33.2	g/dL	32 - 36
RDW	12.0	%	11.8 - 15.6
Total Leucocytic Count	6.77	x10°/L	3.5 - 10.5
Basophils absolute count	0.02	x10°/L	0 - 0.3
Basophils relative count	0.30	%	
Eosinophils absolute count	0.16	x10°/L	0.05 - 0.5
Eosinophils relative count	2.36	%	
Neutrophils absolute count	5.20	x10°/L	1.7 - 7
Neutrophils relative count	76.81	%	
Lymphocytes absolute count	0.90	x10°/L	0.9 - 3.1
Lymphocytes relative count	13.29	%	
Monocytes absolute count	0.49	x10°/L	0.3 - 0.9
Monocytes relative count	7.24	%	

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# **Complete Blood Count - (CBC)**

 Test
 Result
 Unit
 Ref. Range

 Platelet Count
 225
 x10°/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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Dr. Shailendra Rathod.MD

Laboratory Director

Physician Specialist Clinical

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Lab. No.

Branch : Al Borg Lab. Dubai Deirah

Age: 32 Year

DOB 27/07/1991

**Sample Date** 

**Report Date** 

Sex

Doctor references: Dr. Tahniyat Iqbal

: Male

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# Cholesterol/HDL/LDL/Triglycerides

Test	Result		Unit	Ref. Range
Cholesterol	157		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	118		mg/dL	Normal<200
Comments Primary sample: Serum Methodology: Enzymatic colorimetric assay				
HDL Cholesterol	42	L	mg/dL	Optimum level ≥ 60 Borderline risk: 40-59 High risk: <40
Comments Primary sample: Serum Methodology: HOmogeneous Enzymatic colorimetric assay.				
LDL Cholesterol	91		mg/dl	Optimal <100 Near optimal 100-129 Borderline high 130-159 High 160-189 Very high >189

## Comments

Sample type: Serum Methodology: Calculation

\*This is non-accredited test.

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# Cholesterol/HDL/LDL/Triglycerides

lest	Result	Unit	Ref. Range
Non-HDL Cholesterol	115	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

#### **Comments**

Lab. No.

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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