



Name : Masooda Iqbal Sample Date : 10/03/2023 12:36 PM Lab. No. : 3023129010 Report Date : 10/03/2023 14:44 PM

Contract. : Nas (WN, VN) 20% - Dubai Branch Doctor references : Dr. Tahniyat Iqbal

Patient No. : 30-90406

File No. : 32787

Branch : Al Borg Lab. Dubai Age : 71 Year DOB 25/10/1952 Sex : Femal

Deirah

Cholesterol/HDL/LDL/Triglycerides

Test	Result		Unit	Ref. Range
Cholesterol	173		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	119		mg/dL	Normal<200
Comments Primary sample: Serum Methodology: Enzymatic colorimetric assay				
HDL Cholesterol	52	L	mg/dL	Optimum level ≥ 60 Borderline risk: 50-59 High risk: <50 mg/dl
Comments Primary sample: Serum Methodology: HOmogeneous Enzymatic colorimetric assay.				
LDL Cholesterol	98		mg/dl	Patient at very high CV risk: Less than 55 Patient at high CV risk: Less than 70 Patient at moderate CV risk: Less than 100 Patient at low risk: Less than 116

Comments

Sample type: Serum Methodology: Calculation

Recommended LDL- Cholesterol goal (mg/dL) based on cardiovascular risk stratification according to 2019 ESC/ EAS guidelines:

Please note the new reference range

*This is non-accredited test.

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: Al Borg Lab. Dubai **Branch** Age: 71 Year : Femal DOB 25/10/1952 Sex

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Cholesterol/HDL/LDL/Triglycerides

Test	Result	Unit	Ref. Range
Non-HDL Cholesterol	121	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:

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

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Name : Masooda Iqbal **Sample Date** : 10/03/2023 12:36 PM Lab. No. : 3023129010 : 10/03/2023 14:28 PM **Report Date**

Doctor references: Dr. Tahniyat Iqbal Contract. : Nas (WN, VN) 20% - Dubai Branch

Patient No. : 30-90406

File No. : 32787

: Al Borg Lab. Dubai **Branch** Age: 71 Year : Femal DOB 25/10/1952 Sex

> Deirah e

C-Reactive Protein (CRP)

Result Unit Ref. Range 13.76 0 - 5 C-Reactive Protein (CRP) mg/L

Comments

Sample Type: Serum

Methodology: Particle Enhanced Turbidimetric assay

Reviewed By:

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

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Contract. : Nas (WN, VN) 20% - Dubai Branch Doctor references : Dr. Tahniyat Iqbal

Patient No. : 30-90406

File No. : 32787

Branch : Al Borg Lab. Dubai Age : 71 Year DOB 25/10/1952 Sex : Femal

Deirah

Complete Blood Count - (CBC)

Test	Result		Unit	Ref. Range
Hemoglobin	10.6	L	g/dL	12 - 15.5
Hematocrit	32.0	L	%	34.9 - 44.5
Red cell count	3.71	L	x10 ¹² /L	3.9 - 5.03
MCV	86.3		fL	81.6 - 98.3
MCH	28.6		pg	26.5 - 32.6
MCHC	33.1		g/dL	32 - 36
RDW	13.1		%	11.9 - 15.5
Total Leucocytic Count	8.51		x10°/L	3.5 - 10.5
Basophils absolute count	0.07		x10°/L	0 - 0.3
Basophils relative count	0.82		%	
Eosinophils absolute count	0.45		x10°/L	0.05 - 0.5
Eosinophils relative count	5.29		%	
Neutrophils absolute count	5.82		x10°/L	1.7 - 7
Neutrophils relative count	68.39		%	
Lymphocytes absolute count	1.73		x10°/L	0.9 - 3.1
Lymphocytes relative count	20.33		%	
Monocytes absolute count	0.44		x10°/L	0.3 - 0.9
Monocytes relative count	5.17		%	

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Branch : Al Borg Lab. Dubai Age : 71 Year DOB 25/10/1952 Sex : Femal

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Complete Blood Count - (CBC)

 Test
 Result
 Unit
 Ref. Range

 Platelet Count
 342
 x10°/L
 150 - 450

Comments

Sample type: EDTA Whole Blood

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

Reviewed By:

Dr. Shailendra Rathod.MD

Laboratory Director

Physician Specialist Clinical

Pathology

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