



## **Laboratory Investigation Report**

Ms. MARICAR VALDEZ NAVALTA Name Ref No. 43720

**DOB** 05/11/1974 Sample No. 2407456222 Age / Gender 49 Y / Female **Collected** 31/07/2024 12:09

Referred by DR HUMAIRA Registered 31/07/2024 14:05 CITICARE MEDICAL CENTER 31/07/2024 15:31 Centre Reported

**BIOCHEMISTRY** 

Flag Unit Result Test **Reference Range** Methodology **URIC ACID (SERUM)** 5.7 2.4 - 5.7 Uricase, UV mg/dL Please note change. Source: Roche IFU. **CREATININE (SERUM)** Alkaline picrate (IFCC 0.73 mg/dL 0.5 - 0.9 standardised) Please note change.

Source: Roche IFU.

#### **INTERPRETATION NOTES:**

Creatinine measurements are used as an aid in diagnosis and monitoring of renal disorders, Chronic Kidney disease (CKD) and in monitoring of renal dialysis and also used for the calculation of the fractional excretion of other urine analytes (e. g., albumin,  $\alpha$ -amylase).

- Creatinine is a break-down product of creatine phosphate in muscle, and is produced at a fairly constant rate by the body (depending on muscle mass). It is freely filtered by the glomeruli and, under normal conditions, is not reabsorbed by the tubules to any appreciable extent. A small but significant amount is also actively secreted. Its concentration is thus, inversely related to glomerular filtration rate (GFR).
- Physiological factors affecting serum creatinine concentration include age, gender, race, muscularity, exercise, pregnancy, certain drugs, diet, dehydration and nutritional status.
- Low serum Creatinine levels is seen in cases of low muscle mass like muscular atrophy, or aging.
- High serum creatinine levels is seen in Acute and Chronic kidney disease, obstruction.

Since a rise in blood creatinine is observed only with marked damage of the nephrons, it is not suited to detect early stage kidney disease. **UREA (SERUM)** 12.86 - 42.86

Please note change.

Kinetic test with urease and glutamate

Source: Roche IFU

Serum Sample Type:

End of Report

Dr. Vyoma V Shah Dr. Adley Mark Fernandes M.D (Pathology) M.D (Pathology) **Pathologist Clinical Pathologist** 

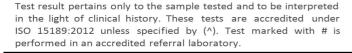
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P.O Box: 49527

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Tel: +971 4 398 8567





Dubai, UAE



reports@biosytech.ae

www.biosytech.com

**BHAVYA THENDANKANDY** 

**Biochemistry Technologist** 

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CITICARE MEDICAL CENTER Centre

Ref No. 43720

Sample No. 2407456222

**Collected** 31/07/2024 12:09 Registered 31/07/2024 14:05

31/07/2024 16:19 Reported

## **CLINICAL PATHOLOGY**

Test	Result F	lag Unit	Reference Range	Methodology
URINE ANALYSIS ( ROUTINE)				
MACROSCOPIC EXAMINATION COLOR	VELLOW		Dala ta Daylı Vallayı	Visual
	YELLOW		Pale to Dark Yellow	
APPEARANCE	TURBID		-	Visual
CHEMISTRY EXAMINATION SPECIFIC GRAVITY	1.015		1.002 - 1.035	Bromothymol blue
PH	6.0		4.5 - 8.0	Litmus paper
GLUCOSE	NEGATIVE		Negative	GOD / POD
BLOOD	NEGATIVE		Negative	Peroxidase
PROTEIN	NEGATIVE		Negative	Protein error of pH indicator
LEUKOCYTE ESTERASE	NEGATIVE		Negative	Esterase
UROBILINOGEN	0.2	E.U./dL	0.2 - 1.0	Diazo
BILIRUBIN	NEGATIVE		Negative	Diazo
KETONE	NEGATIVE		Negative	Legal's test
NITRITE	NEGATIVE		Negative	Griess test
MICROSCOPIC EXAMINATION				
LEUCOCYTES	2 - 4	/HPF	1 - 4	Microscopy
ERYTHROCYTES	0 - 1	/HPF	0 - 2	Microscopy
EPITHELIAL CELLS	3 - 5	/HPF	Variable	Microscopy
BACTERIA	Present	/HPF	Absent	Microscopy
CASTS	-	/HPF	Absent	Microscopy
HYALINE CAST	-	/HPF	Absent	Microscopy
FINE GRANULAR CAST	-	/HPF	Absent	Microscopy
COARSE GRANUALR CAST	-	/HPF	Absent	Microscopy
WAXY CAST	-	/HPF	Absent	Microscopy
FATTY CAST	-	/HPF	Absent	Microscopy
RBC CAST	-	/HPF	Absent	Microscopy
WBC CAST	-	/HPF	Absent	Microscopy
BACTERIAL CAST	-	/HPF	Absent	Microscopy
EPITHELIAL CAST	-	/HPF	Absent	Microscopy
CRYSTALS	-	/HPF	Absent	Microscopy

Dr. Vyoma V Shah **Dr. Adley Mark Fernandes** M.D (Pathology) M.D (Pathology) **Pathologist Clinical Pathologist** 

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**HALEEM HAKKIM** Laboratory Technician Printed on: 31/07/2024 16:21

Q-aleem

Test result pertains only to the sample tested and to be interpreted in the light of clinical history. These tests are accredited under ISO 15189:2012 unless specified by (^). Test marked with # is performed in an accredited referral laboratory.





P.O Box: 49527 Dubai, UAE Tel: +971 4 398 8567 reports@biosytech.ae www.biosytech.com





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## **CLINICAL PATHOLOGY**

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Test	Result Flag	Unit	Reference Range	Methodology
CALCIUM OXALATE	-	/HPF	Absent	Microscopy
CALCIUM CARBONATE	-	/HPF	Absent	Microscopy
CALCIUM PHOSPHATE	-	/HPF	Absent	Microscopy
TRIPLE PHOSPHATE	-	/HPF	Absent	Microscopy
URIC ACID CRYSTAL	-	/HPF	Absent	Microscopy
AMMONIUM BIURATE	-	/HPF	Absent	Microscopy
AMORPHOUS URATES	- 67	/HPF	Absent	Microscopy
AMORPHOUS PHOSPHATES	-	/HPF	Absent	Microscopy
CYSTINE	-	/HPF	Absent	Microscopy
LEUCINE	-	/HPF	Absent	Microscopy
TYROSINE	<del>-</del>	/HPF	Absent	Microscopy
DRUG CRYSTAL	-	/HPF	Absent	Microscopy
MUCUS THREADS	-	/HPF	Absent	Microscopy
BUDDING YEAST CELLS	-	/HPF	Absent	Microscopy
НҮРНАЕ	-	/HPF	Absent	Microscopy
OVA	-	/HPF	Absent	Microscopy and Micrometry
CYST	-	/HPF	Absent	Microscopy
PARASITE	-	/HPF	Absent	Microscopy
ARTIFACTS	-	/HPF	Absent	Microscopy
INTERDRETATION NOTES .				

### **INTERPRETATION NOTES:**

Instrumentation used for Chemistry test: Siemens Clinitek Advantus.

Note: "-" means Absent

Sample Type: URINE

End of Report

Dr. Adley Mark Fernandes Dr. Vyoma V Shah
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Pathologist Clinical Pathologist

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**HALEEM HAKKIM**Laboratory Technician

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