



Name : Mr. MOHAMED ADEL

DOB : 25/01/1997 Age / Gender : 27 Y / Male

Referred by : DR. HUMAIRA MUMTAZ
Centre : CITICARE MEDICAL CENTER

Ref No.

Sample No.

2408458606

**Collected** : 05/08/2024 10:35

**Registered** : 05/08/2024 20:20 **Reported** : 05/08/2024 22:33

### **BIOCHEMISTRY**

Test Result Flag Unit Reference Range Methodology

**CREATININE (SERUM)** 0.74 mg/dL 0.7 - 1.2

Please note change. Source: Roche IFU. Kinetic colorimetric assay based

on Jaffe method

#### **INTERPRETATION NOTES:**

1. 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, α-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).
- 3. Physiological factors affecting serum creatinine concentration include age, gender, race, muscularity, exercise, pregnancy, certain drugs, diet, dehydration and nutritional status.
- 4. Low serum Creatinine levels is seen in cases of low muscle mass like muscular atrophy, or aging.
- 5. High serum creatinine levels is seen in Acute and Chronic kidney disease, obstruction.
- 6. 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)28mg/dL12.86 - 42.86Please note change.

12.86 - 42.86 Kinetic test with urease and Please note change. glutamate dehydrogenase

Source: Roche IFU

Sample Type : Serum

End of Report

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

This is an electronically authenticated report

P.O Box: 49527

La

Laboratory Technologist Printed on: 06/08/2024 00:03

**NAZAR MOHAMED ALI** 

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.

Dubai, UAE



Page 1 of 5



Tel: +971 4 398 8567 reports@biosytech.ae www.biosytech.com





Name : Mr. MOHAMED ADEL

**DOB** : 25/01/1997 **Age / Gender** : 27 Y / Male

Referred by : DR. HUMAIRA MUMTAZ
Centre : CITICARE MEDICAL CENTER

### abolatory investigation report

**Ref No.** : **Sample No.** : 2408458606

**Collected** : 05/08/2024 10:35 **Registered** : 05/08/2024 20:20

**Reported** : 06/08/2024 00:01

### **CLINICAL PATHOLOGY**

Test Result Flag	Unit	Reference Range	Methodology
URINE ANALYSIS ( ROUTINE)			
COLOR Yellow	I	Pale to Dark Yellow	Photometry
APPEARANCE Clear		-	Turbidimetry
CHEMISTRY EXAMINATION			
SPECIFIC GRAVITY 1.015		1.002 - 1.035	Refractometry
PH 6.0		5 - 9	Litmus paper
GLUCOSE Negative	I	Negative	GOD / POD
BLOOD Negative	1	Negative	Peroxidase
PROTEIN Negative	1	Negative	Protein error of pH indicator
LEUKOCYTE ESTERASE Negative		Negative	Esterase
UROBILINOGEN Negative		Negative	Diazonium Salt
BILIRUBIN Negative		Negative	Diazonium Salt
KETONE Negative	1	Negative	Legal's test
NITRITE Negative	ı	Negative	Griess test
MICROSCOPIC EXAMINATION			
LEUCOCYTES 1-4	/HPF	1 - 4	Automated Microscopy
ERYTHROCYTES 0-2	/HPF	0 - 2	Automated Microscopy
SQUAMOUS EPITHELIAL CELLS 0-1	/HPF .	< 20	Automated Microscopy
NON-SQUAMOUS EPITHELIAL CELLS -	/HPF	Variable	Automated Microscopy
BACTERIA -	/HPF ,	Absent	Automated Microscopy
CASTS - /	/HPF	Absent	Automated Microscopy
HYALINE CAST -	/HPF	Absent	Automated Microscopy
FINE GRANULAR CAST -	/HPF	Absent	Automated Microscopy
COARSE GRANUALR CAST -	/HPF	Absent	Automated Microscopy
WAXY CAST -	/HPF	Absent	Automated Microscopy
FATTY CAST -	/HPF	Absent	Automated Microscopy
RBC CAST -	/HPF	Absent	Automated Microscopy
WBC CAST -	/HPF	Absent	Automated Microscopy
BACTERIAL CAST -	/HPF	Absent	Automated Microscopy
EPITHELIAL CAST -	/HPF	Absent	Automated Microscopy
CRYSTALS -	/HPF	Absent	Automated Microscopy

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

This is an electronically authenticated report

Page 2 of 5

100

JAYADEV C J Laboratory Technologist Printed on: 06/08/2024 00:03

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.









Name : Mr. MOHAMED ADEL

**DOB** : 25/01/1997 **Age / Gender** : 27 Y / Male

Referred by : DR. HUMAIRA MUMTAZ
Centre : CITICARE MEDICAL CENTER

### ort

Ref No.

Reported

**Sample No.** : 2408458606

**Collected** : 05/08/2024 10:35 **Registered** : 05/08/2024 20:20

: 06/08/2024 00:01

#### **CLINICAL PATHOLOGY**

Test	Result	Flag	Unit	Reference Range
CALCIUM OXALATE	-		/HPF	Absent
CALCIUM CARBONATE	-		/HPF	Absent
CALCIUM PHOSPHATE	-		/HPF	Absent
TRIPLE PHOSPHATE	-		/HPF	Absent
URIC ACID CRYSTAL	-		/HPF	Absent
AMMONIUM BIURATE	-		/HPF	Absent
AMORPHOUS URATES	-		/HPF	Absent
AMORPHOUS PHOSPHATES	-		/HPF	Absent
CYSTINE	-		/HPF	Absent
LEUCINE			/HPF	Absent
TYROSINE	-		/HPF	Absent
DRUG CRYSTAL	- 3		/HPF	Absent
MUCUS THREADS	Present		/HPF	Absent
BUDDING YEAST CELLS	-		/HPF	Absent
НҮРНАЕ	-		/HPF	Absent
OVA	-		/HPF	Absent
CYST	-		/HPF	Absent
PARASITE	-		/HPF	Absent
ARTIFACTS	-		/HPF	Absent
Commente y Diagram annualeta eliminally				

Methodology **Automated Microscopy Automated Microscopy** 

Comments: Please correlate clinically

#### INTERPRETATION NOTES:

Please note change in method (Roche Cobas U6500).

Note: "-" means Absent

Sample Type: URINE

End of Report

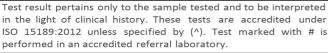
Dr. Adley Mark Fernandes Dr. Vyoma V Shah
M.D (Pathology) M.D (Pathology)
Pathologist Clinical Pathologist

This is an electronically authenticated report

Page 3 of 5

Printed on: 06/08/2024 00:03

JAYADEV C J
Laboratory Technologist











Name Mr. MOHAMED ADEL

DOB 25/01/1997 Age / Gender 27 Y / Male

Referred by DR. HUMAIRA MUMTAZ CITICARE MEDICAL CENTER Centre

Ref No.

Sample No.

2408458606

Collected 05/08/2024 10:35 Registered 05/08/2024 20:20

05/08/2024 22:01 Reported

HEMATOLOGY									
Test	Result	Flag	Unit	Reference Range	Methodology				
COMPLETE BLOOD COUNT (CBC)									
HEMOGLOBIN	16.9		g/dL	13.5 - 17.5	Photometric				
RBC COUNT	5.5		10^6/μL	4.3 - 5.7	Electrical Impedance				
HEMATOCRIT	50.3	Н	%	38 - 50	Calculation				
MCV	90.9		fL	82 - 98	Calculation				
MCH	30.5		pg	27 - 32	Calculation				
МСНС	33.5		g/dL	32 - 37	Calculation				
RDW	14.9		%	11.8 - 15.6	Calculation				
RDW-SD	46.4		fL		Calculation				
MPV	10		fL	7.6 - 10.8	Calculation				
PLATELET COUNT	267		10^3/uL	150 - 450	Electrical Impedance				
PCT	0.3		%	0.01 - 9.99	Calculation				
PDW	19.4		Not Applicable	0.1 - 99.9	Calculation				
NUCLEATED RBC (NRBC)^	0.7		/100 WBC		VCS 360 Technology				
ABSOLUTE NRBC COUNT^	0.1		10^3/uL		Calculation				
EARLY GRANULOCYTE COUNT (EGC)^	0.6		%		VCS 360 Technology				
ABSOLUTE EGC^	0.1		10^3/uL		Calculation				
WBC COUNT	14.9	н	10^3/μL	4 - 11	Electrical Impedance				
DIFFERENTIAL COUNT (DC)									
NEUTROPHILS	60		%	40 - 75	VCS 360 Technology				
LYMPHOCYTES	32		%	20 - 45	VCS 360 Technology				
EOSINOPHILS	3		%	0 - 6	VCS 360 Technology				
MONOCYTES	5		%	1 - 6	VCS 360 Technology				
BASOPHILS	0		%	0 - 1	VCS 360 Technology				
ABSOLUTE COUNT									
ABSOLUTE NEUTROPHIL COUNT	8.9	н	10^3/uL	1.6 - 8.25	Calculation				
ABSOLUTE LYMPHOCYTE COUNT	4.7		10^3/uL	0.8 - 4.95	Calculation				
ABSOLUTE MONOCYTE COUNT	0.4		10^3/uL	0.04 - 0.66	Calculation				
ABSOLUTE EOSINOPHIL COUNT	0.4		10^3/uL	0 - 0.66	Calculation				
ABSOLUTE BASOPHIL COUNT	0.0		10^3/uL	0 - 0.11	Calculation				

**Dr. Adley Mark Fernandes** 

M.D (Pathology)

**Pathologist** 

Comments: Please correlate clinically.

Dr. Vyoma V Shah M.D (Pathology) **Clinical Pathologist** This is an electronically authenticated report

Page 4 of 5

**MUBASHER ZAHOOR Laboratory Technologist** Printed on: 06/08/2024 00:03

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





Name Mr. MOHAMED ADEL

DOB 25/01/1997 Age / Gender 27 Y / Male

Referred by DR. HUMAIRA MUMTAZ CITICARE MEDICAL CENTER Centre

Ref No.

Sample No.

2408458606

Collected

05/08/2024 10:35 05/08/2024 20:20

Registered Reported

05/08/2024 22:01

### **HEMATOLOGY**

Test Result Flag Unit **Reference Range** Methodology

**COMPLETE BLOOD COUNT (CBC)** 

INTERPRETATION NOTES: Please note update on CBC report format, reference ranges and method(Beckman Coulter).

EDTA Whole Blood Sample Type:

End of Report



**Dr. Adley Mark Fernandes** M.D (Pathology) **Pathologist** 

Dr. Vyoma V Shah M.D (Pathology) **Clinical Pathologist** This is an electronically authenticated report

Page 5 of 5

**MUBASHER ZAHOOR** Laboratory Technologist Printed on: 06/08/2024 00:03

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