biosytech
MEDICAL LABORATORY

BML451301

Laboratory Investigation Report

Name	:	Ms. HADEER KHALED HASSAN MOSTAFA	**Ref No.**	:	43418
DOB	:	01/10/1994	**Sample No.**	:	2408461318
Age / Gender	:	29 Y / Female	**Collected**	:	11/08/2024 22:30
Referred by	:	DR AHSAN	**Registered**	:	12/08/2024 13:24
Centre	:	CITICARE MEDICAL CENTER	**Reported**	:	12/08/2024 20:00

IMMUNOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
VITAMIN D, 25-OH (TOTAL)	16	L	ng/mL	Deficiency: <20 Insufficiency: 20 - <30 Sufficiency: 30 - 80 Toxicity: >80 Please note change. Source: Roche IFU.	ECLIA

INTERPRETATION NOTES :

Vit D (25 – OH) is the sum of Vit D2 (25 – OH) and Vit D3 (25 – OH). In normal persons not taking external supplements - Vit D3 comprises approximately 90 % of the total.

25 hydroxy (25–OH) vitamin D3 or calcidiol is the storage form of vitamin D3. Deficiency is associated with osteoporosis, multiple sclerosis, and rheumatoid arthritis, and mood disorders. Both Vitamin D2 and Vitamin D3 are converted to 25–OH vitamin D3 in the liver. 25 hydroxy vitamin D3 circulates to the kidney where it is converted to 1, 25 hydroxy vitamins D3 or calcitriol, the functional form of the vitamin.

Calcitriol is vital to calcium regulation and low serum calcium causes release of parathormone which converts 25–OH vitamin D3 to 1, 25 –OH vitamin D3 which then triggers osteolysis releasing calcium into the bloodstream.

Sample Type : Serum

End of Report

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

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

HARSHAD MANIKANDAN
Laboratory Technician
Printed on: 12/08/2024 20:02

This is an electronically authenticated report

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