biosytech
MEDICAL LABORATORY

BML550864

Laboratory Investigation Report

Name	:	Ms. MAHA MOHAMMED AHMED ELMETWALY	**Ref No.**	:	46520
DOB	:	29/03/1954	**Sample No.**	:	2504564558
Age / Gender	:	71 Y / Female	**Collected**	:	16/04/2025 20:00
Referred by	:	Dr. FARHAN	**Registered**	:	17/04/2025 15:47
Centre	:	CITICARE MEDICAL CENTER	**Reported**	:	17/04/2025 17:46

BIOCHEMISTRY

Test	Result	Flag	Unit	Reference Range	Methodology
URIC ACID (SERUM)	5		mg/dL	2.4 - 5.7 Please note change. Source: Roche IFU.	Enzymatic colorimteric assay
CREATININE (SERUM)	0.65		mg/dL	0.6 - 1.2 Please note change. Source: Tietz Fundamentals of Clinical Chemistry and Molecular Diagnostics	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).
2. 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)	33		mg/dL	17.14 - 49.28 Please note change. Source: Roche IFU	Kinetic test with urease and glutamate dehydrogenase

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

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

HARSHAD MANIKANDAN
Laboratory Technician
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BIOCHEMISTRY

Test	Result	Flag	Unit	Reference Range	Methodology
LIVER FUNCTION TEST					
ALT / SGPT	21		U/L	< or = 35 Please note change. Source: Roche IFU.	IFCC
AST / SGOT	28		U/L	< or = 35 Please note change. Source: Roche IFU.	IFCC
ALP (ALKALINE PHOSPHATASE)	93		U/L	35 - 104 Please note change. Source: Roche IFU.	Colorimetric assay
GGT (GAMMA GLUTAMYL TRANSFERASE)	9		U/L	6 - 42 Please note change. Source: Roche IFU.	Enzymatic colorimetric assay
BILIRUBIN (TOTAL)	0.4		mg/dL	0 - 1.2 Please note change. Source: Roche IFU.	Diazotization
BILIRUBIN (DIRECT)	0.1		mg/dL	0 - 0.2 Please note change. Source: Roche IFU.	Diazotization
INDIRECT BILIRUBIN	0.30		mg/dL	< or = 0.9	Calculated
TOTAL PROTEIN	7.3		g/dL	6.4 - 8.3	Biuret reaction
ALBUMIN (SERUM)	4.5		g/dL	3.5 - 5.2 Please note change. Source: Roche IFU.	Colorimetric assay (Bromocresol Green)
GLOBULIN	2.8		g/dL	2.0 - 3.5	Calculation
A/G RATIO	1.6			0.8 - 2.0	Calculation

Sample Type : Serum

End of Report

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HEMATOLOGY

Test	Result	Flag	Unit	Reference Range	Methodology
COMPLETE BLOOD COUNT (CBC)					
HEMOGLOBIN	12.5		g/dL	12 - 15.5	Photometric
RBC COUNT	4.7		10^6/µL	3.9 - 5	Electrical Impedance
HEMATOCRIT	38.1		%	35 - 45	Calculation
MCV	**81.6**	**L**	fL	82 - 98	Calculation
MCH	**26.9**	**L**	pg	27 - 32	Calculation
MCHC	32.9		g/dL	32 - 37	Calculation
RDW	15.1		%	11.9 - 15.5	Calculation
RDW-SD	42.4		fL		Calculation
MPV	10.7		fL	7.6 - 10.8	Calculation
PLATELET COUNT	174		10^3/uL	150 - 450	Electrical Impedance
PCT	0.2		%	0.01 - 9.99	Calculation
PDW	17.3		Not Applicable	0.1 - 99.9	Calculation
NUCLEATED RBC (NRBC)^	0.6		/100 WBC		VCS 360 Technology
ABSOLUTE NRBC COUNT^	0.05		10^3/uL		Calculation
EARLY GRANULOCYTE COUNT (EGC)^	0.0		%		VCS 360 Technology
ABSOLUTE EGC^	0.0		10^3/uL		Calculation
WBC COUNT	7.9		10^3/µL	4 - 11	Electrical Impedance
DIFFERENTIAL COUNT (DC)					
NEUTROPHILS	53		%	40 - 75	VCS 360 Technology
LYMPHOCYTES	33		%	30 - 60	VCS 360 Technology
EOSINOPHILS	**9**	**H**	%	0 - 6	VCS 360 Technology
MONOCYTES	5		%	1 - 6	VCS 360 Technology
BASOPHILS	0		%	0 - 1	VCS 360 Technology
ABSOLUTE COUNT					
ABSOLUTE NEUTROPHIL COUNT	4.2		10^3/uL	1.6 - 8.25	Calculation
ABSOLUTE LYMPHOCYTE COUNT	2.6		10^3/uL	1.2 - 6.6	Calculation
ABSOLUTE MONOCYTE COUNT	0.4		10^3/uL	0.04 - 0.66	Calculation
ABSOLUTE EOSINOPHIL COUNT	**0.7**	**H**	10^3/uL	0 - 0.66	Calculation
ABSOLUTE BASOPHIL COUNT	0.0		10^3/uL	0 - 0.11	Calculation

Comments : Please correlate clinically.

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Thahsina Anees
Laboratory Technologist

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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).

Sample Type : *EDTA Whole Blood*

End of Report

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