

External Visit Id

PO BOX 214-545, S-G09 / S-G10 , Al Garhoud Business Centre , Al Garhoud , Dubai, UAE.

Toll Free: 800 325 222

Email: info@fortecl.ae | Web: www.fortecl.ae

# CONFIDENTIAL LABORATORY REPORT

: 45450

 Patient Name
 : Mr. FOUAD SAID HELMY
 Request Date
 : 17/04/2025 17:22

 Age / Sex
 : 40 Y / Male
 Collected Date
 : 17/04/2025 17:21

 DOB
 : 17/09/1984
 Acceptance Date
 : 17/04/2025 18:22

 Referral Doctor
 : 18/04/2025 06:43

Referrer : CITICARE MEDICAL CENTER L.L.C Report Status : **Final Report** 

SID.No. : **FD019787** 

Patient No : FCL019882

INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
HAEMATOLOGY CITICARE PULSEFIT PACKAGE COMPLETE BLOOD COUNT (CE				
EDTA Whole Blood HEMOGLOBIN	14.5	g/dL	13.5 - 17.5	Colorimetric
RBC COUNT	5.12	10^6/uL	3.5 - 5.5	EI
HEMATOCRIT	43	%	37 - 54	Calculation
MCV	83.9	fL	80 - 100	Calculation
MCH	28.3	pg	27 - 34	Calculation
MCHC	33.7	g/dL	32 - 36	Calculation
RDW	14.2	%	11 - 16	Calculation
MPV	10	fL	8 - 12	Calculation
PLATELET COUNT	228	10^3 /uL	140 - 450	EI
WBC COUNT	6.42	10^3 /uL	4 - 10	EI
DIFFERENTIAL COUNT (DC)				
EDTA Whole Blood NEUTROPHILS	54.2	%	50 - 70	Flow Cytometry
LYMPHOCYTES	34.6	%	20 - 40	Flow Cytometry
EOSINOPHILS	4.2	%	0.5 - 5	Flow Cytometry
MONOCYTES	6.7	%	3 - 12	Flow Cytometry
BASOPHILS	0.3	%	0 - 1	Flow Cytometry
ABSOLUTE NEUTROPHIL COUNT	3.48	10^3 cells/uL	2 - 7	
ABSOLUTE LYMPHOCYTE COUNT	2.22	10^3 cells/uL	0.8 - 4	
ABSOLUTE MONOCYTE COUNT	0.43	10^3 cells/uL	0.12 - 1.2	
ABSOLUTE EOSINOPHIL COUNT	0.27	10^3 cells/uL		
ABSOLUTE BASOPHIL COUNT	0.02	10^3 cells/uL	0 - 0.1	

**Prepared By** 

Gopika
Medical Laboratory Technologist
26832642

**Approved By** 

Dr Anjum Nawshehri Laboratory Director DHA-00208333-004

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SID.No. : **FD019787** External Visit Id : **45450** 

Patient No : FCL019882

INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
CLINICAL BIOCHEMISTRY				
CITICARE PULSEFIT PACKAGE				
GLUCOSE (RANDOM)	92.2	mg/dL	< 200	GOD - POD
Fluoride Plasma				
GLYCATED HEMOGLOBIN (HbA1C) ^				
EDTA Whole Blood				
HBA1C	5.6	%	Normal:4.6-5.6 Prediabetes: 5.7- 6.4 Diabetes: >6.5	HPLC
eAG (estimated Average Glucose)	114	%		Calculation
BLOOD UREA NITROGEN (SERUM)				
Serum				
UREA	60.2	mg/dL	16.87 - 43.37	Urease-glutamate Dehydrogenase, UV method
BUN	28.0	mg/dL	7 - 18	Calculation
CREATININE	1.31	mg/dL	0.6 - 1.3	Sarcosine Oxidase
Serum				
BUN/CREATININE RATIO	21	NULL	Prerenal: > 20:1 Normal or Postrenal: 10-20:1 Intrarenal: < 10:1	Calculation
Serum				
URIC ACID	6.55	mg/dL	2.5 - 8	Uricase - POD
Serum				
IRON	82.5	ug/dL	45 - 158	Ferrozine
Serum			D : 11 200	CHOD DOD
CHOLESTEROL (TOTAL)	202.1	mg/dL	Desirable: < 200 Borderline High: 200 - 239 High: > 239	CHOD-POD
Serum				
NON-HDL CHOLESTEROL	94.3	mg/dL	< 140	Calculation
Serum				

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INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
CLINICAL BIOCHEMISTRY				
CITICARE PULSEFIT PACKAGE				
TRIGLYCERIDES	183.8	mg/dl	Normal: < 150 Borderline High: 150 - 199 High: 200 - 499 Very High: > 499	GPO-POD
Serum			· -	
HDL CHOLESTEROL	43	mg/dL	Optimum>60 Borderline : 50-59 High risk : <50	Direct
Serum			3	
LDL CHOLESTEROL	155.4	mg/dl	Optimal: < 100 Near/Above Optimal: 100 - 129 Borderline High: 130 - 159 High: 160 - 189 Very High: > 189	Direct
Serum			, -	
VLDL CHOLESTEROL	36.76	mg/dL	0 - 30	Calculation
Serum				
LDL / HDL RATIO	3.6		< 3.5	Calculation
Serum				

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INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
CLINICAL BIOCHEMISTRY CITICARE PULSEFIT PACKAGE				
TOTAL CHOLESTEROL / HDL RATIO	4.7		< 4.5	Calculation
Serum				

**Prepared By** 

Gopika **Medical Laboratory Technologist** 26832642

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Patient No : FCL019882

INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
CLINICAL BIOCHEMISTRY CITICARE PULSEFIT PACKAGE				
BILIRUBIN (TOTAL)	0.35	mg/dL	Up to 1.2	DSA
Serum BILIRUBIN (DIRECT)	0.12	mg/dL	0.00 - 0.4	DSA
Serum INDIRECT BILIRUBIN	0.23	mg/dL	< or = 0.90	Calculation
Serum TOTAL PROTEIN	6.9	g/dL	6 - 8	Biuret
Serum ALBUMIN (SERUM)	4.3	g/dL	3.5 - 4.8	Bromcresol green (BCG)
Serum GLOBULIN	2.6	g/dL	2.0 - 3.5	Calculation
Serum ALBUMIN / GLOBULIN RATIO	1.65	NULL	0.8 - 2.0	Calculation
Serum ALT / SGPT	130.8	U/L	10 - 40	IFCC
Serum ALP (ALKALINE PHOSPHATASE)	49.2	U/L	30 - 115	IFCC
Serum GGT (GAMMA GLUTAMYL TRANSFERASE)	29	U/L	7 - 50	IFCC
Serum AST / SGOT	49.2	U/L	10 - 40	IFCC
Serum				

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DOB : 17/09/1984 Acceptance Date : 17/0

**RESULT** 

1.232

7.495

3.11

0.487

0.01

25.3

543.23

34.291

Referral Doctor :

**ENDOCRINOLOGY** 

THYROXINE, TOTAL (T4)

**TESTOSTERONE (TOTAL)** 

**TESTOSTERONE (FREE)** 

SHBG (SEX HORMONE BINDING

VITAMIN D, 25-OH (TOTAL)

Serum

Serum

Serum

Serum

Serum

GLOBULIN) Serum VITAMIN B12

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Patient No : FCL019882

**INVESTIGATION / SPECIMEN** 

CITICARE PULSEFIT PACKAGE
TRIIODOTHYRONINE, TOTAL (T3)

THYROID STIMULATING HORMONE (TSH)

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UNIT REFERENCE RANGE **METHOD** ng/mL 0.8 - 1.9CLIA ug/dL 5 - 13 CLIA µIU/mL 0.35 - 4.75CLIA ng/mL 2.32 - 8.58 CLIA 0.07-0.3 Calculation ng/mL nmol/L 13.3 - 89.5 CLIA 180 - 916 CLIA pg/mL ng/mL Deficient: < 20 CLIA

: 45450

Insufficient: 20 - < 30 Sufficient : 30 - 100 Upper Safety Limit:: > 100

Serum

Serum

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: 17/04/2025 18:22 Acceptance Date Report Date : 18/04/2025 14:24

: Final Report Report Status

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INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
ENDOCRINOLOGY				
CITICARE PULSEFIT PACKAGE				
BETA HCG	<2.0	mIU/mL	< 0.5 - 2.2	CLIA
Serum				

Prepared By

Juhana Pullichola **Microbiology Technologist** 17945483

Approved By

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DOB : 17/09/1984 Referral Doctor

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INVESTIGATION / SPECIMEN	RESULT	UNIT	REFERENCE RANGE	METHOD
ENDOCRINOLOGY				
CITICARE PULSEFIT PACKAGE				
PROGESTERONE	0.46	ng/mL	Adult Male: 0.28 - 1.22	CLIA

Serum

Interpretation Notes: A progesterone test may be used: To help recognize and manage some causes of infertility. Since progesterone levels vary throughout the menstrual cycle, multiple (serial) measurements can be used for this purpose. To determine whether or not a woman has ovulated, when ovulation occurred, or to monitor the success of induced ovulationIn early pregnancy to help diagnose an ectopic or failing pregnancy, along with human chorionic gonadotropin (hCG) testing To monitor a high-risk pregnancy to help evaluate placenta and fetal healthlf a woman is receiving progesterone injections to help support her early pregnancy, to help determine the effectiveness of the replacement treatmentAlong with other tests such as an FSH, LH, hCG, thyroid tests, clotting tests, and a complete blood count (CBC) to help determine the cause of abnormal uterine bleeding in non-pregnant women

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