

MEDSOL AL ABBAR LABORATORIES for Research & Medical Analysis L.L.C مختبرات ميدسول العبار للابحاث والتحاليل الطبية ش.ذ.م.م



إدارة دبى للإعتماد طبقا لمواصفات الأيزو ١٥١٨٩ | Dubai Accreditation Department for ISO 15189

LABORATORY REPORT

Name : MA LENINA FLORES File. No. : DML02-273438 DOB/Gender : 02-10-1987 (37 Yrs 7 Month 7 Days/Female) Referral Doctor : Dr. Aisha Umer

Lab No. : 22251170151 Referral Clinic : Citicare Medical Center LLC

Request Date : 27-04-2025 15:05:55 Clinic File No : 46147

: NEXTCARE Insurance

HAEMATOLOGY & COAGULATION

COMPLETE BLOOD COUNT (CBC) WITH DIFFERENTIAL RBC 4.19 10^12/L 3.80 - 4.80	Hydrodynamic focusing (DC Detection)
RBC 4.19 10^12/L 3.80 - 4.80	focusing (DC Detection)
Haemoglobin 12.6 g/dl 12.0 - 15.0	Photometry-SLS
HCT 38.4 % 36.0 - 46.0	Hydrodynamic focusing (HF)
MCV 91.6 fl 83.0 - 101.0	Calculation
MCH 30.1 pg 27-32	Calculation
MCHC 32.8 g/dL 31.5 - 34.5	Calculation
Platelet Count 341 10^3/uL 150-400	HF (DCD)
WBC 7.10 10^3/uL 4.00 - 10.00	Flow Cytometry
DIFFERENTIAL COUNT (%)	
Neutrophils 49.1 % 40.0 - 80.0	Flow Cytometry
Lymphocytes 37.3 % 20.0 - 40.0	Flow Cytometry
Monocytes 8.9 % 2-10	Flow Cytometry
Eosinophils 4.1 % 1 - 6	Flow Cytometry
Basophils 0.6 % <1-2	Flow Cytometry
DIFFERENTIAL COUNT (ABSOLUTE)	
Neutrophils (Absolute) 3.49 10^3/uL 2.00 - 7.00	Calculation
Lymphocytes (Absolute) 2.65 10^3/uL 1.00 - 3.00	Calculation
Monocytes (Absolute) 0.63 10^3/uL 0.20 - 1.00	Calculation
Eosinophils (Absolute) 0.29 10^3/uL 0.02 - 0.50	Calculation
Basophils (Absolute) 0.04 10^3/uL 0.02 - 0.10	Calculation

Sample Type: EDTA WB

Laboratory Director

DHA/LS/248469

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Dr. Solmaz Siddiqui

Patient Sample Collected On: 26-04-2025 21:40:00

Authenticated On: 27-04-2025 17:53:57

Released On: 27-04-2025 17:59:27

Rhea Suberon Medical Laboratory Technician

DHA-P-0123639



Received On: 27-04-2025 15:09:00





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Insurance : NEXTCARE

CLINICAL BIOCHEMISTRY

Test Name	Result	Units	Ref. Range	Method
Microalbumin	4.05	mg/L	Please see comment	Immunoturbidim etric

Kindly note that no normal range is given for Microalbumin of Spot Urine Sample, and the normal range of 24 hrs collection is (less than 30 mg/day).

To evaluate the diagnostic performance of the micro-albumin measurements in urine sample, it is suggested to request one of the following:

- Microalbumin 24 hrs
- Microalbumin/Creatinine Ratio Spot Urine

Due to variability in urinary albumin excretion, atleast two of three results measured within 6 months should show elevated levels before a patient is designated as having microalbuminuria.

Exercise within 24 hrs, infection, fever, congestive heart failure, marked hyperglycemia and marked hypertension may elevate urinary albumin excretion over baseline values

Sample Type: Random Urine

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DOB/Gender

Insurance

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Final Report

ECLIA

ECLIA

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: NEXTCARE

: 02-10-1987 (37 Yrs 7 Month 7 Days/Female)

: 22251170151 Lab No.

Request Date : 27-04-2025 15:05:55

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: Citicare Medical Center LLC Referral Clinic

Clinic File No : 46147

HORMONES/ENDOCRINE/TUMOR MARKERS

Test Name	Result	Units	Ref. Range	Method
Free T3 (Tri-iodothyronine - Free)	3.57	pg/mL	2.0 - 4.4 Pregnancy: 1st Trimester: 2.5 - 3.9 2nd Trimester: 2.1 - 3.6 3rd Trimester: 2.0 - 3.3	ECLIA

Conversion Formula: (Concentration in pg/mL) x (1.536) = pmol/L. This free fraction represents the physiologically active thyroid hormone. Free T3 is typically elevated to a greater degree than free thyroxine (T4) in Graves' disease. Free T3 is also important in monitoring patients on anti-thyroid therapy where treatment is focused on reducing the T3 production and the T4 conversion to T3.Please note Reference Range Reviewed w.ef 15/10/23

Free T4(Thyroxine- Free) 1.20

ng/dL

0.92 - 1.68Pregnancy:

1st Trimester: 0.9 - 1.5 2nd Trimester: 0.8 - 1.3

3rd Trimester: 0.7 - 1.2

Conversion Formula: (Concentration in ng/dL) x (12.87) = pmol/L. Free T4 values may provide the best indication of thyroid dysfunction, since free T4 is less sensitive to changes in the serum binding proteins. Free T4 levels are elevated to a greater degree than free T3 in toxic multinodular goiter and excessive T4

therapy. Please note Reference Range Reviewed w.ef 15/10/23

TSH (Thyroid Stimulating Hormone)

µIU/mL

0.27-4.20

Pregnancy: 1st Trimester: 0.33 - 4.59

2nd Trimester: 0.35 - 4.10 3rd Trimester: 0.21 - 3.15

Conversion Formula: (Concentration in IU/ mL) x (1.0) = mIU/L. The determination of TSH serves as the initial test in thyroid diagnostics. Even very slight changes in the concentrations of the free thyroid hormones bring about much greater opposite changes in the TSH level. Accordingly, TSH is a very sensitive and specific parameter for assessing thyroid function and is particularly suitable for early detection or exclusion of disorders in the central regulating circuit between the hypothalamus, pituitary and thyroid. Please note Reference Range Reviewed w.ef 15/10/23.

Sample Type : Serum

--- End Of Report ----

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