



Mr. MOHAMED SALIQ

PID NO : 45188

Age : 49 Years Sex : Male 23-Jan-1976



Reference : Dr AISHA

Sample Collected At :

CITICARE MEDICAL CENTER

Unit G03, Al Barsha South Bldg, Al Barsha South
Third, Dubai

VID : 5060100388

Registered on :

02-Jun-2025 03:00 PM

Collected on :

02-Jun-2025 10:00 AM

Reported on :

02-Jun-2025 05:24 PM

<u>Investigation</u>	<u>Observed Value</u>	<u>Flag</u>	<u>Unit</u>	<u>Biological Reference Interval</u>
GLUCOSE FASTING (Fluoride Plasma, Hexokinase)	83		mg/dL	< 100

INTERPRETATION :

Note: An individual may show higher fasting glucose level in comparison to post prandial glucose level due to following reasons :The glycaemic index and response to food consumed, Changes in body composition, Increased insulin response and sensitivity,Alimentary hypoglycemia, Renal glycosuria, Effect of oral hypoglycaemics & Insulin treatment.

Associated Tests:

- HbA1c ,HOMA Index , Insulin.

DR. ADLEY MARK FERNANDES
M.D (Pathology)
Pathologist

Vyoma V. Shah

DR. VYOMA SHAH
M.D (Pathology)
Clinical Pathologist

Eloisa May Delmo

ELOISA MAY DELMO
Laboratory Technologist

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Printed on: 02-Jun-2025 05:25 PM

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Investigation	Observed Value	Flag	Unit	Biological Reference Interval	Method
URINE ANALYSIS (ROUTINE)					
PHYSICAL EXAMINATION					
COLOR	Yellow			Pale to Dark Yellow	Photometry
APPEARANCE	Clear				Turbidimetry
CHEMICAL EXAMINATION					
SPECIFIC GRAVITY	1.018			1.002 - 1.035	Refractometry
PH	5.00			5 - 9	Litmus paper
GLUCOSE	Negative			Negative	GOD / POD
BLOOD	Negative			Negative	Peroxidase
PROTEIN	Negative			Negative	Protein error of pH indicator
LEUKOCYTE ESTERASE	Negative			Negative	Esterase
UROBILINOGEN	Negative			Negative	Diazonium Salt
BILIRUBIN	Negative			Negative	Diazonium Salt
KETONE	Negative			Negative	Legal's test
NITRITE	Negative			Negative	Griess test
MICROSCOPIC EXAMINATION					
LEUCOCYTES	1-4		/HPF	1 - 4	Microscopy
ERYTHROCYTES	0-2		/HPF	0 - 2	Microscopy
SQUAMOUS EPITHELIAL CELLS	0-1		/HPF	< 20	Microscopy
NON-SQUAMOUS EPITHELIAL CELLS	Absent		/HPF	Variable	Microscopy
BACTERIA	Absent		/HPF	Absent	Microscopy
CASTS	Absent		/HPF	Absent	Microscopy
HYALINE CAST	Absent		/HPF	Absent	Microscopy
FINE GRANULAR CAST	Absent		/HPF	Absent	Microscopy
COARSE GRANULAR CAST	Absent		/HPF	Absent	Microscopy
WAXY CAST	Absent		/HPF	Absent	Microscopy
FATTY CAST	Absent		/HPF	Absent	Microscopy
RBC CAST	Absent		/HPF	Absent	Microscopy
WBC CAST	Absent		/HPF	Absent	Microscopy
BACTERIAL CAST	Absent		/HPF	Absent	Microscopy

Dr. Vyoma Shah

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Dr. Greeshma Sidharthan

GREESHMA SIDHARTHAN
Laboratory Technician

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EPITHELIAL CAST	Absent	/HPF	Absent	Microscopy
CRYSTALS	Absent	/HPF	Absent	Microscopy
CALCIUM OXALATE	Absent	/HPF	Absent	Microscopy
CALCIUM CARBONATE	Absent	/HPF	Absent	Microscopy
CALCIUM PHOSPHATE	Absent	/HPF	Absent	Microscopy
TRIPLE PHOSPHATE	Absent	/HPF	Absent	Microscopy
URIC ACID CRYSTAL	Absent	/HPF	Absent	Microscopy
AMMONIUM BIURATE	Absent	/HPF	Absent	Microscopy
AMORPHOUS URATES	Absent	/HPF	Absent	Microscopy
AMORPHOUS PHOSPHATES	Absent	/HPF	Absent	Microscopy
CYSTINE	Absent	/HPF	Absent	Microscopy
LEUCINE	Absent	/HPF	Absent	Microscopy
TYROSINE	Absent	/HPF	Absent	Microscopy
DRUG CRYSTAL	Absent	/HPF	Absent	Microscopy
MUCUS THREADS	Present	A /HPF	Absent	Microscopy
BUDDING YEAST CELLS	Absent	/HPF	Absent	Microscopy
HYPHAE	Absent	/HPF	Absent	Microscopy
OVA	Absent	/HPF	Absent	Microscopy
CYST	Absent	/HPF	Absent	Microscopy
PARASITE	Absent	/HPF	Absent	Microscopy
ARTIFACTS	Absent	/HPF	Absent	Microscopy

Sample type: Spot urine

INTERPRETATION:

1. Urine routine and microscopy is a screening test.
2. Abnormal results of chemical examination are confirmed by manual methods.
3. Pre-test conditions to be observed while submitting the sample- First void, mid-stream urine, collected in a clean, dry, sterile container is recommended for routine urine analysis, avoid contamination with any discharge from vaginal, urethra, perineum, as applicable, avoid prolonged transit time & undue exposure to sunlight.
4. During interpretation, points to be considered are Negative nitrite test does not exclude the presence of the bacteria or urinary tract infections.
5. Trace proteinuria can be seen with many physiological conditions like prolonged recumbency, exercise, high protein diet etc.
8. False reactions for bile pigments, proteins, glucose and nitrites can be caused by peroxidase like activity by disinfectants, therapeutic dyes, ascorbic acid and certain drugs etc.
9. Physiological variations may affect the test results.
10. The Microscopic examination findings reported are in decimal numbers as they represent arithmetic mean of multiple fields scanned using Microscopy.

----- End Of Report -----

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