

NAME : MR VIRENDRA YADAV

Ref. By : DR. SHRIVASTAVA D.K.

Address :

45 Years / Male Reg No. : 20683

Reg. Date : 20/08/2022 12:17PM

Collected At : MedZone Center

INVESTIGATION REPORT

CLINICAL BIOCHEMISTRY

TEST	RESULT	<u>UNIT</u>	BIOLOGICAL REF RANGE	TEST METHOD	
ADA (Adenosine Deaminase)-Serum					
Sample Type	: SERUM				
ADA (Adenosine Deaminase)-Serum	: 21.2	U/L	Nomal : < 30 Suspect : 30 – 40 Strong suspect : 40 – 60 Positive : > 60	Spectrophotometr	

Adenosine deaminase (ADA) is an enzyme widely distributed in mammalian tissues, particularly in T-Lymphocytes. ADA is an enzyme that catalyzes the deamination of adenosine, forming inosine in the process. The chief physiological function of ADA is related to lymphocytic proliferation and differentiation. As a marker of cellular immunity, activity is found to be elevated in those diseases in which there is a cell-mediated immune response. Increased levels of ADA are found in various forms of tuberculosis making it a marker for the same. Though ADA is also increased in various infectious diseases like Infectious Mononucleosis, Typhoid, Viral Hepatitis, Acute Hepatitis, Alcoholic Hepatic Fibrosis, Chronic Active Hepatitis, Liver Cirrhosis, Hepatoma Initial stages of HIV, and in cases of malignant tumours, the same can be ruled out clinically.

METHOD: Spectrophotometry

INSTRUMENT: A-25 Chemistry Analyser



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INVESTIGATION REPORT

CLINICAL BIOCHEMISTRY

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	BIOLOGIC	AL REF RANGE	TEST METHOD
25 Hydroxy Vitamin D3					
Sample Type	: SERUM				
25 Hydroxy Vitamin D3	: 14.46	ng/ml	< 06 Deficiency 06 - 20	: · Insufficiency	Fully Automated Roche E411 (ECL)
			> 30 : Suffi > 100 Toxicity	ciency :	

Vitamin D is a fat-soluble steroid hormone precursor that is mainly produced in the skin by exposure to sunlight or it is supplied via dietary sources (mainly egg yolk, fish oil and plants). Vitamin D is biologically inert and must undergo two successive hydroxylations in the liver and kidney to become the biologically active 1,25 dihydroxyvitamin D. The two most important forms of vitamin D are vitamin D3 (cholecalciferol) and vitamin D2 (ergocalciferol). In contrast to vitamin D3, vitamin D2 has to be taken up with food. In the human body vitamin D3 and D2 are bound to vitamin D-binding protein in plasma and transported to the liver where both are hydroxylated in position 25 forming 25-OH vitamin D. 25-OH vitamin D is the metabolite that should be measured in blood to determine the overall vitamin D status because it is the major storage form of vitamin D in the human body. This primary circulating form of vitamin D is biologically inactive with levels approximately 1000-fold greater than the circulating 1,25 (OH)2 vitamin D. The half life of circulating 25-OH vitamin D is 2-3 weeks. More than 95% of 25-OH vitamin D, measurable in serum, is 25-OH vitamin D3 whereas 25-OH vitamin D2 reaches measurable levels only in patients taking vitamin D2 supplements. Vitamin D deficiency is common cause of secondary hyperparathyroidism. Elevations of PTH levels, especially in elderly vitamin D deficient adults can result in osteomalacia, increased bone turnover, reduced bone mass and risk of bone fractures. Low 25-OH vitamin D concentrations are also associated with lower bone mineral density. In conjunction with other clinical data, the results may be used as an aid in the assessment of bone metabolism. The Roche Cobas Vitamin D3 (25-OH) assay employs a polyclonal antibody directed against vitamin D3.

Sample Registered On Sample Received On **Report Released On**

Sample Barcode :



--- End Of Report ---

Dr. VANDANA CHANDANI

Checked By:gopal



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MaleReg No. : 20683Reg. Date: 20/08/2022 12:17PMCollected At : MedZone Center

INVESTIGATION REPORT

HAEMATOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE	TEST METHOD
CBP (Complete Blood Picture)				
Sample Type	: WB - EDTA			
Haemoglobin	: 13.4	gm%	12.0 - 18.0	
Total Erythrocyte Count	: 5.80	M/cmm	4.0 - 6.2	Cell Counter
Hemotocrit (PCV)	: 42.7	Vol %	35.0 - 50.0	
Mean Corpuscular Volume	: 73.6	fL	80 - 100	
Mean Corpuscular Hemoglobin	: 23.1	PG	26 - 34	
МСНС	: 31.4	g/L	31 - 35	
RDW	: 13.5	%	11.5 - 14.5	
Total Leucocyte Count.	: 8480	/cumm	4000 - 11000	
DIFFERENTIAL COUNT :				
Neutrophils	: 73	%	40 - 75	
Lymphocytes.	: 19	%	20 - 40	Cell Counter
Monocytes.	: 04	%	2 - 10	Cell Counter
Eosinophils	: 04	%	1 - 6	Cell Counter
Basophils	: 0	%	0 - 1	Cell Counter
Platelet Count	: 279000	/cmm	150000 - 450000	

ESR (Erythrocyte Sedimentation Rate)

Sample Type	: PLASMA -Na Citrate			
ESR (Erythrocyte Sedimentation Rate)	: 10	mm/hr	0 - 15 :1st Hour	Sedimentation me

		End Of Report	
Sample Registered On	: 20/08/2022 12:17PM		
Sample Received On	: 20/08/2022 12:22PM		Dhr.
Report Released On	: 20/08/2022 05:50PM		Dr. VANDANA CHANDANI
Sample Barcode :		Checked By:Vandana	