

Name :	DUMMY	Age :	25 Years
Lab No. :	Z113LPL	Gender :	Male
Ref By :	DR. DUMMY DUMMY	Reported :	30/10/2024 3:23:03PM
Collected :	3/10/2024 10:24:00AM	Report Status :	Interim
A/c Status :	P	Processed at :	LPL-NATIONAL REFERENCE LAB
Collected at :	PRODUCTION TEST COLLECTION CENTRE		National Reference laboratory, Block E,
	SECTOR - 18, BLOCK-E ROHINI		Sector 18, Rohini, New Delhi -110085
	DELHI 110085		



Test Report

Test Name	Results	Units	Bio. Ref. Interval
HEART HEALTH SCREEN			
HbA1c (HPLC, NGSP Certified)		%	4.00 - 5.60
Estimated average glucose (eAG), Calculated		mg/dL	
Cholesterol Total (CHO-POD)	195	mg/dL	<200
Triglycerides (GPO-POD)	125	mg/dL	<150
HDL Cholesterol (Enz Immunoinhibition)	50	mg/dL	>40
LDL Cholesterol, Direct (Enz Selective protection)	80	mg/dL	<100
VLDL Cholesterol (Calculated)	25	mg/dL	<30
Non-HDL Cholesterol (Calculated)	145	mg/dL	<130
Apolipoprotein B (Apo B) (Immunoturbidimetry)	60.00	mg/dL	46 - 174
HsCRP (Immunoturbidimetry)	1.00	mg/L	<1.00

Note

- Test conducted in serum & Whole Blood.
- Measurements in the same patient can show physiological & analytical variations. Three serial samples 1 week apart are recommended for Total Cholesterol, Triglycerides, HDL & LDL Cholesterol.
- Apo B >130 mg/dL is considered high risk feature for ASCVD. Apo B is an optional, secondary lipid target for treatment once LDL & Non HDL goals have been achieved
- HsCRP >2mg/L, Triglycerides levels >150 mg/dL in fasting or >175 mg/dL in non-fasting are considered risk modifier for ASCVD risk
- If initial HsCRP is >10mg/L, it should be disregarded & measured again when patient stabilizes. Avoid measurement during acute infection, chronic inflammatory disease, post menopausal hormone therapy
- If initial HsCRP is <10mg/L - use average of two values (measured 2 or more weeks apart, intra-individual variation being >40%) to estimate risk

Comment

This test panel helps clinician to decide Atherosclerotic Cardiovascular disease (ASCVD) risk Category, based on risk if therapy is required - what should be the treatment goal. It is important to note Indians are at very high risk of developing ASCVD and usually get the disease at an early age, have a more severe form of the disease





MC-2113

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Test Report

Test Name	Results	Units	Bio. Ref. Interval
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Dr Anjalika Goyal
MD, Biochemistry
Consultant Biochemist
NRL - Dr Lal PathLabs Ltd

Dr Himangshu Mazumdar
MD, Biochemistry
Sr. Consultant Biochemist
NRL - Dr Lal PathLabs Ltd

Dr Nimmi Kansal
MD, Biochemistry
Technical Director - Clinical Chemistry
& Biochemical Genetics
NRL - Dr Lal PathLabs Ltd

Result/s to follow:
HEART HEALTH SCREEN

IMPORTANT INSTRUCTIONS

•Test results released pertain to the specimen submitted. •All test results are dependent on the quality of the sample received by the Laboratory. •Laboratory investigations are only a tool to facilitate in arriving at a diagnosis and should be clinically correlated by the Referring Physician. •Report delivery may be delayed due to unforeseen circumstances. Inconvenience is regretted. •Certain tests may require further testing at additional cost for derivation of exact value. Kindly submit request within 72 hours post reporting. •Test results may show interlaboratory variations. •The Courts/Forum at Delhi shall have exclusive jurisdiction in all disputes/claims concerning the test(s) & or results of test(s). •Test results are not valid for medico legal purposes. •This is computer generated medical diagnostic report that has been validated by Authorized Medical Practitioner/Doctor. •The report does not need physical signature.

(#) Sample drawn from outside source.

If Test results are alarming or unexpected, client is advised to contact the Customer Care immediately for possible remedial action.

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National Reference lab, Delhi, a CAP (7171001) Accredited, ISO 9001:2015 (FS60411) & ISO 27001:2013 (616691) Certified laboratory.

