Patient NAME	: Mr.SHATRUGHAN SINHA	Collected	: 01/Jul/2019 03:27PM
Age/Gender	: 30 Y 4 M 12 D /M	Received	: 01/Jul/2019 03:30PM
UAID	: ACDG.0000060307	Reported	: 01/Jul/2019 03:33PM
Visit ID	: ADE412	STATUS	: Final Report
CLIENT NAME	: CC DEMO4	Ref Doctor	: Dr.SELF

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
***URIC ACID - 24 HR URINE**				
Uric Acid	10.00	mg/dL		Enzymatic
Uric Acid - 24 HR Urine	**10**	mg/24 hrs	150 - 990	Calculated
Total Volume	100.0	mL/day		

Comment:

BIOLOGICAL REFERENCE RANGES

VITAMIN D STATUS	VITAMIN D 25 HYDROXY (ng/mL)
DEFICIENCY	<10
INSUFFICIENCY	10 – 30
SUFFICIENCY	30 – 100
TOXICITY	>100

The assay measures both D2 (Ergocalciferol) and D3 (Cholecalciferol) metabolites of vitamin D.Vitamin D status is best determined by measurement of 25 hydroxy vitamin D, as it is the major circulating form and has longer half life (2-3 weeks) than 1,25 Dihydroxy vitamin D (5-8 hrs)
The reference ranges discussed in the preceding are related to total 25-OHD; as long as the combined total is 30 ng/mL or more, the patient has sufficient vitamin D. Levels needed to prevent rickets and osteomalacia (15 ng/mL) are lower than those that dramatically suppress parathyroid hormone levels (20–30 ng/mL). In turn, those levels are lower than levels needed to optimize intestinal calcium absorption (34 ng/mL). Neuromuscular peak performance is associated with levels approximately 38 ng/mL.

Dr. Romilla Mittal
(Consultant Pathologist)

SIN No:sawe32

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DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
***COMPLEMENT LEVEL C4**				
COMPLEMENT LEVEL-C4	0.25	gm/l	0.16-0.38	Nephlometry

Comment:

The complement system is a major component of innate and adaptive immunity; upon activation, the complement results in the formation of the membrane attack complex (MAC) that releases peptides called anaphylatoxins. About 90% of complement components are synthesized in the liver and are acute-phase proteins. C4 is one of the activation proteins of the classic pathway.
C4 levels will be decreased in acquired autoimmune disorders, in active phase of lupus erythematosus, and in rheumatoid arthritis.
An undetectable C4 level (with normal C3) suggests a congenital C4 deficiency.
Levels will be increased in patients with autoimmune hemolytic anemia.

***** End Of Report *****

Dr. Romilla Mittal
(Consultant Pathologist)

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