

PATIENT NAME	T.RAJESHAM	
AGE	73 Y	
PROBLEM	HTN,HYPER UREEMIA,BPH	
PLACE	LB NAGAR	

BLOOD PARAMETERS

S.NO	PARAMETER	BEFORE	AFTER	
		02.03.26	04.05.26	07.08.26
1	HBAIC		4.3	
2	CREATININE	1.3	1.4	1.3
3	eGFR	56.7	51.8	56.7
4	URIC ACID	7.5	8.7	8
5	ESR	14	14	15
6	HB		12.8	13.9
7	PSR		1.19	
8	TSH		0.945	



VIJAYA
DIAGNOSTIC

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Opp Metro Pillar No. A1516, Indira Nagar, Dilsukhnagar, Hyderabad - 50

TEST REPORT

Name : Dr T RAJESHAM
Age/Gender : 75 Years / Male
Registration ID : 260870015281
Ref. By : CGHS-HYDERABAD
Sample Type : Serum

BirthDate : 11-Sep-1950

Registered on : 03-May-2026 07:2
Collected on : 03-May-2026 07:4
Released on : 03-May-2026 11:2
Printed on : 04-May-2026 17:5
Regn Centre : LBNagar - 87

CREATININE

TEST NAME

✓ Creatinine

Method: Jaffe Kinetic IDMS traceable

RESULT

1.4

UNIT

mg/dL

BIOLOGICAL REFERENCE INTERVAL

0.7 - 1.2

✓ e-GFR (Glomerular Filtration Rate)

Method: Calculation, CKD EPI equation

51.8

ml/min/1.73 m²

>= 90

Interpretation / Comments :

- Serum Creatinine is useful in the diagnosis of renal insufficiency and is more specific and sensitive indicator of renal disease than serum Urea /BUN.
- Use of simultaneous Urea / BUN and creatinine levels provide more information in the diagnosis of renal insufficiency.
- Amount of Creatinine produced in the body is relatively constant (unlike Urea) and is primarily a function of muscle mass (Creatinine being a waste product formed in muscles.).
- Age, gender, Race, Muscle mass, Exercise, Certain Drugs, diet, Dehydration are amongst the physiological factors affecting serum creatinine concentration.
- GFR (Glomerular Filtration Rate) is generally considered the best index of overall kidney function. Repeated determination in conjunction with creatinine assay establish whether the patient has stable or progressive disease.
- The CKD-EPI equation is the most widely used IDMS traceable equations for estimating GFR in patients above 18 years of age. This equation includes variables for age and gender, and it may be observed that Kidney may be involved despite a serum creatinine concentration appearing to be within or just above the Biological Reference Interval. The results of e-GFR by CKD-EPI equation are normalized to 1.73 m² body surface area. CKD-EPI equation is not valid for individuals under 18 years of age.
- Estimates for GFR based on serum creatinine will be less accurate for patients at the extremes of muscle mass (such as frail elderly, critically ill, cancer patients) and also those with unusual diets, sudden acute renal failure, patients on dialysis and patients with severe liver disease.
- Confirmatory tests with exogenous measured GFR or directly measured creatinine clearance should be performed for such individuals.
- The influence of creatinine measurement imprecision at low creatinine concentrations (and hence high e-GFR) has a possible contribution to the variability at higher e-GFR values.

----- End of Report -----



Ash
DR. AFSHAN RAFI
MD BIOCHEMISTRY
Registration No. 48809



VIJAYA DIAGNOSTIC CENTRE

Opp Metro Pillar No. A1516, Indira Nagar, Dilshuknagar, Hyderabad - 500018

TEST REPORT

Name : Dr T RAJESHAM
Age Gender : 75 Years / Male
Registration ID : 260870007655
Ref. By : Dr CGHS ON PAYMENT
Sample Type : Serum

Birth Date : 11-Sep-1950

Ref. No : whole life

Registered on : 02-Mar-2026 08:43
Collected on : 02-Mar-2026 08:46
Released on : 02-Mar-2026 13:37
Printed on : 02-Mar-2026 17:29
Regn Centre : LBNagar - 87

CREATININE

TEST NAME

Creatinine

Method: Jaffe Kinetic / IDMS traceable

RESULT

1.3

UNIT

mg/dL

BIOLOGICAL REFERENCE INTERVAL

0.7 - 1.2

e-GFR (Glomerular Filtration Rate)

Method: Calculation, CKD-EPI equation

56.7

ml/min/1.73 m²

>= 90

Interpretation / Comments :

- Serum Creatinine is useful in the diagnosis of renal insufficiency and is more specific and sensitive indicator of renal disease than serum Urea /BUN.
- Use of simultaneous Urea / BUN and creatinine levels provide more information in the diagnosis of renal insufficiency.
- Amount of Creatinine produced in the body is relatively constant (unlike Urea) and is primarily a function of muscle mass (Creatinine being a waste product formed in muscles).
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- Confirmatory tests with exogenous measured GFR or directly measured creatinine clearance should be performed for such individuals.
- The influence of creatinine measurement imprecision at low creatinine concentrations (and hence high e-GFR) has a possible contribution to the variability at higher e-GFR values.



Signature

DR. MOHID AFROZ HANEEF

MD BIOCHEMISTRY

Registration No TSMC/FMR/08712

----- End of Report -----



VIJAYA DIAGNOSTIC CENTRE

Opp Metro Pillar No. A1516, Indira Nagar, Dilsukhnagar, Hyderabad - 500089

TEST REPORT

Name : Dr T RAJESHAM
Age/Gender : 75 Years / Male
Registration ID : 260870015281
Ref. By : CGHS-HYDERABAD
Sample Type : Whole Blood - EDTA

BirthDate : 11-Sep-1950

Registered on : 03-May-2026 07:23
Collected on : 03-May-2026 07:44
Released on : 03-May-2026 11:17
Printed on : 04-May-2026 17:51
Regn Centre : LBNagar - 87

ERYTHROCYTE SEDIMENTATION RATE (ESR)

TEST NAME

ESR

Method: Automated - Modified Westergren

RESULT

14

UNIT

mm/hour

BIOLOGICAL REFERENCE INTERVAL

0 - 20

Interpretation / Comments :

- ESR is a nonspecific parameter, clinically useful in disorders associated with an increased production of acute phase reaction proteins, immunoglobulins and plasma fibrinogen.
- ESR is increased in acute and chronic infections, inflammatory disorders, neoplastic diseases, connective tissue disorders and pregnancy.
- ESR is decreased in polycythemic disorders, sickle cell disease, hereditary spherocytosis and hypofibrinogenemia.




DR. RAVIKUMAR T
MD PATHOLOGY
Registration No: TSMC/FMR/43253



VIJAYA DIAGNOSTIC CENTRE

Opp.Metro Pillar No. A1516, Indira Nagar, Dilsukhnagar, Hyderabad - 500089

TEST REPORT

Name : Dr T RAJESHAM
Age/Gender : 75 Years / Male
Registration ID : 260870015281
Ref. By : CGHS-HYDERABAD
Sample Type : Serum

BirthDate : 11-Sep-1950

Registered on : 03-May-2026 07:23
Collected on : 03-May-2026 07:44
Released on : 03-May-2026 11:25
Printed on : 04-May-2026 17:51
Regn Centre : LBNagar - 87

URIC ACID

TEST NAME

Uric Acid

Method: Uricase-Peroxidase

RESULT

8.7

UNIT

mg/dL

BIOLOGICAL REFERENCE INTERVAL

3.5 - 7.2

Interpretation / Comments :

- Useful for monitoring therapeutic management of gout and chemotherapeutic treatment of neoplasms.



DR. AFSHAN RAFI
MD BIOCHEMISTRY
Registration No.48809



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Opp Metro Pillar No. A1516, Indira Nagar, Dilsukhnagar, Hyderabad - 500089

TEST REPORT

Name: Dr T RAJESHAM
Age/Gender: 75 Years / Male
Registration ID: 260870027843
Ref. By: CGHS-HYDERABAD
Sample Type: Serum

Registered on: 07-Aug-2026 06:59
Collected on: 07-Aug-2026 07:06
Released on: 07-Aug-2026 11:22
Printed on: 07-Aug-2026 20:03
Regn Centre: LBNagar - 87

URIC ACID

TEST NAME	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Uric Acid Method: Uricase-Peroxidase	8.0	mg/dL	3.5 - 7.2

Interpretation / Limitations :

- Useful for monitoring therapeutic management of gout and chemotherapeutic treatment of neoplasms.



MC-8070


DR. AFSHAN RAFI
MD BIOCHEMISTRY
Registration No 48809

VIJAYA DIAGNOSTIC CENTRE

VIJAYA

TEST REPORT

Dr T RAJESHAM

5 Years Male

260870027843

CGHS HYDERABAD

Serum

Birth Date 11-Sep-1950

Registered on 07-Aug-2026 06:59

Collected on 07-Aug-2026 07:06

Released on 07-Aug-2026 11:22

Printed on 07-Aug-2026 20:03

Regn Centre LB Nagar - 87

SODIUM

TEST NAME

Sodium

RESULT

137

UNIT

mmol/L

BIOLOGICAL REFERENCE INTERVAL

136 - 146

Interpretation / Limitations :

- Useful in the diagnosis and treatment of dehydration and overhydration. Hypermnatremia (>150 mmol/L) suggests dehydration and Hyponatremia (<130 mmol/L) suggests overhydration.
- Levels of sodium when evaluated with other electrolytes aids in assessing Acid base imbalance, Water imbalance and Water intoxication



MC-8070


DR. AFSHAN RAFI
MD BIOCHEMISTRY
Registration No 48809



VIJAYA DIAGNOSTIC CENTRE

Opp Metro Pillar No. A1516 Indira Nagar Dilsukhnagar Hyderabad - 500089

TEST REPORT

Name : Dr T RAJESHAM
Age Gender : 75 Years / Male
Registration ID : 260870027843
Ref. By : CGHS-HYDERABAD
Sample Type : Whole Blood - EDTA

Registered on : 07-Aug-2026 06:59
Collected on : 07-Aug-2026 07:06
Released on : 07-Aug-2026 10:32
Printed on : 07-Aug-2026 20:03
Regn Centre : LBNagar - 87

ERYTHROCYTE SEDIMENTATION RATE (ESR)

TEST NAME

ESR

Method : Automated - Modified Westergren

RESULT

15

UNIT

mm/hour

BIOLOGICAL REFERENCE INTERVAL

0 - 20

Interpretation / Limitations:

- ESR is a nonspecific parameter, clinically useful in prognosis of disorders associated with an increased production of acute phase reaction proteins, immunoglobulins and plasma fibrinogen
- ESR is increased in acute and chronic infections, inflammatory disorders, neoplastic diseases, connective tissue disorders and pregnancy
- ESR is decreased in polycythemic disorders, sickle cell disease, hereditary spherocytosis and hypofibrinogenemia

----- End of Report -----



MC-6070


DR. RAVIKUMAR T
MD PATHOLOGY
Registration No TSMC/FMR/43253



VIJAYA DIAGNOSTIC CENTRE

Opp Metro Pillar No. A1516, Indira Nagar, Ghatlakhnagar, Hyderabad - 500028

TEST REPORT

Name : Dr T RAJESHAM

Age/Gender : 75 Years / Male

Registration ID : 260870007655

Ref. By : Dr CGHS ON PAYMENT

Sample Type : Whole Blood - EDTA

BirthDate : 11-Sep-1950

Ref. No : whole life

Registered on : 02-Mar-2026 08:43

Collected on : 02-Mar-2026 08:46

Released on : 02-Mar-2026 14:57

Printed on : 02-Mar-2026 17:27

Regn Centre : LBNagar - 87

HAEMOGRAM

TEST NAME	RESULT	UNIT	BIOLOGICAL REFERENCE INTERVAL
Haemoglobin <i>Method: Photometric Measurement</i>	13.3	gm/dL	13.0 - 17.0
Total RBC Count <i>Method: Coulter Principle</i>	4.4	millions/cumm	4.5 - 5.5
Packed Cell Volume / Hematocrit <i>Method: Automated Calculated</i>	40.9	%	40.0 - 50.0
MCV <i>Method: Derived From RBC Histogram</i>	92.2	fL	83.0 - 101.0
MCH <i>Method: Calculated</i>	30.0	pg	27.0 - 32.0
MCHC <i>Method: Calculated</i>	32.6	gm/dL	31.5 - 34.5
RDW (CV) <i>Method: Derived From RBC Histogram</i>	13.9	%	11.6 - 14.0
Total Leucocytes (WBC) Count <i>Method: Coulter Principle</i>	8200	Cells/cumm	4000 - 10000
Differential count			
Neutrophils <i>Method: VCS Technology / Microscopy</i>	77	%	40 - 80
Lymphocytes <i>Method: VCS Technology / Microscopy</i>	15	%	20 - 40
Eosinophils <i>Method: VCS Technology / Microscopy</i>	2	%	1 - 6
Monocytes <i>Method: VCS Technology / Microscopy</i>	6	%	2 - 10
Basophils <i>Method: VCS Technology and Microscopy</i>	0	%	0-2
Absolute Leucocyte Count			
Absolute Neutrophil Count <i>Method: Calculated</i>	6314	Cells/cumm	2000 - 7000
Absolute Lymphocyte Count <i>Method: Calculated</i>	1230	Cells/cumm	1000 - 3000
Absolute Eosinophil Count <i>Method: Calculated</i>	164	Cells/cumm	20 - 500



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Registration ID : 260870007655
Ref By : Dr CGHS ON PAYMENT
Sample Type : Serum

BirthDate : 11-Sep-1950

Ref. No : whole life

Registered on : 02-Mar-2026 08:4
Collected on : 02-Mar-2026 08:46
Released on : 02-Mar-2026 12:37
Printed on : 02-Mar-2026 17:29
Regn Centre : LBNagar - 87

SODIUM

TEST NAME

Sodium

Method: Indirect ISE

RESULT

136

UNIT

mmol/L

BIOLOGICAL REFERENCE INTERVAL

136 - 146

Interpretation / Comments :

- Useful in the diagnosis and treatment of dehydration and overhydration. Hyponatremia (<130 mmol/L) suggests overhydration.
- Levels of sodium when evaluated with electrolytes aid in assessing acid base imbalance, water imbalance and water intoxication.



MC-8432

DR. MOHD AF.

HANEEF

MD BIOCHEMIST

Registration No TSMC/FMP/04



TEST REPORT

Name : Dr T RAJESHAM
Age/Gender : 75 Years / Male
Registration ID : 260870007655
Ref. By : Dr CGHS ON PAYMENT
Sample Type : Serum

BirthDate : 11-Sep-1950
Ref. No : whole life

Registered on : 02-Mar-2026 08:41
Collected on : 02-Mar-2026 08:46
Released on : 02-Mar-2026 17:37
Printed on : 02-Mar-2026 17:37
Regn Centre : LBNagar - 87

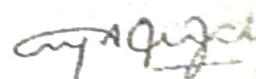
URIC ACID

TEST NAME	RESULT	UNIT	BIOLOGICAL REFERENCE INTL
Uric Acid Medical Uricase-Peroxidase	7.5	mg/dL	3.5 - 7.2

Interpretation / Comments :

- Useful for monitoring therapeutic management of gout and chemotherapeutic treatment of neoplasms.




DR. MOHD AFRO
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Registration No TSMC/FMR/...