

REPORT

Name	: Mrs. KARDULA MANDAL	Sample ID	: 24879891
Age/Gender	: 69 Years/Female	Reg. No	: 0692310100147
Referred by	: Dr. B BOROOAH CENCER HOSPITAL	SPP Code	: SPL-AS-090
Referring Customer	: N J.B Diagnostics Centre	Collected On	: 10-Oct-2023 01:00 PM
Primary Sample	: Whole Blood	Received On	: 10-Oct-2023 04:08 PM
Sample Tested In	: Serum	Reported On	: 11-Oct-2023 07:25 PM
Client Address	:	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
CA125 - Cancer Marker	83.5	U/mL	< 35.0	CLIA

Interpretation:

The CA-125 blood test measures the level of the protein CA-125 in the blood. CA-125 is a protein that is found more in ovarian cancer cells than in other cells. This blood test is often used to monitor women who have been diagnosed with ovarian cancer. The test is useful if the CA-125 level was high when the cancer was first diagnosed. In these cases, measuring the CA-125 over time is a good tool to determine if ovarian cancer treatment is working. The CA-125 test may also be done if a woman has symptoms or findings on ultrasound that suggest ovarian cancer. In general, this test is not used to screen healthy women for ovarian cancer when a diagnosis has not yet been made. In a woman who has ovarian cancer, a rise in CA-125 usually means that the disease has progressed or come back (recurred). A decrease in CA-125 usually means the disease is responding to current treatment. In a woman who has not been diagnosed with ovarian cancer, a rise in CA-125 may mean a number of things. While it may mean that she has ovarian cancer, it can also indicate other types of cancer, as well as several other diseases, such as endometriosis, which are not cancer. In healthy women, an elevated CA-125 usually does not mean ovarian cancer is present. Most healthy women with an elevated CA-125 do not have ovarian cancer, or any other cancer. Any woman with an abnormal CA-125 test needs further tests. Sometimes surgery is needed to confirm the cause.

Result rechecked and verified for abnormal cases

*** End Of Report ***



DR. Utpal Baishya
DR.UTPAL BAISHYA
D.C.P. CCEBDM

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CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
Liver Function Test (LFT)				
Bilirubin(Total)	19.5	mg/dL	0.2-1.2	Diazo
Bilirubin (Direct)	12.6	mg/dL	0.0 - 0.2	Diazo
Bilirubin (Indirect)	6.9	mg/dL	0.2-1.0	Calculated
Aspartate Aminotransferase (AST/SGOT)	73.8	U/L	5-48	IFCC with out (P-5-P)
Alanine Aminotransferase (ALT/SGPT)	94.6	U/L	0-55	IFCC with out (P-5-P)
Alkaline Phosphatase(ALP)	215.1	U/L	40-150	Kinetic PNPP-AMP
Gamma Glutamyl Transpeptidase (GGTP)	35.4	U/L	5-55	IFCC
Protein - Total	6.8	g/dL	6.4-8.2	Biuret
Albumin	3.2	g/dL	3.4-5.0	Bromocresol purple (BCP)
Globulin	3.6	g/dL	2.0-4.2	Calculated
A:G Ratio	0.89	%	0.8-2.0	Calculated

- **Alanine Aminotransferase(ALT)** is an enzyme found in liver and kidneys cells. ALT helps create energy for liver cells. Damaged liver cells release ALT into the bloodstream, which can elevate ALT levels in the blood.
- **Aspartate Aminotransferase (AST)** is an enzyme in the liver and muscles that helps metabolizes amino acids. Similarly to ALT, elevated AST levels may be a sign of liver damage or liver disease.
- **Alkaline phosphate (ALP)** is an enzyme present in the blood. ALP contributes to numerous vital bodily functions, such as supplying nutrients to the liver, promoting bone growth, and metabolizing fat in the intestines.
- **Gamma-glutamyl Transpeptidase (GGTP)** is an enzyme that occurs primarily in the liver, but it is also present in the kidneys, pancreas, gallbladder, and spleen. Higher than normal concentrations of GGTP in the blood may indicate alcohol-related liver damage. Elevated GGTP levels can also increase the risk of developing certain types of cancer.
- **Bilirubin** is a waste product that forms when the liver breaks down red blood cells. Bilirubin exits the body as bile in stool. High levels of bilirubin can cause jaundice - a condition in which the skin and whites of the eyes turn yellow- and may indicate liver damage.
- **Albumin** is a protein that the liver produces. The liver releases albumin into the bloodstream, where it helps fight infections and transport vitamins, hormones, and enzymes throughout the body. Liver damage can cause abnormally low albumin levels.



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Referring Customer	: N J.B Diagnostics Centre	Collected On	: 10-Oct-2023 01:00 PM
Primary Sample	: Whole Blood	Received On	: 11-Oct-2023 01:15 PM
Sample Tested In	: Serum	Reported On	: 11-Oct-2023 07:59 PM
Client Address	:	Report Status	: Final Report

CLINICAL BIOCHEMISTRY

Test Name	Results	Units	Ref. Range	Method
CA19.9 - Pancreatic Cancer Marker	0.8	U/mL	< 37.0	CLIA

Interpretation

- This test is not recommended to screen Pancreatic cancer in the general population.
- False negative / positive results are observed in patients receiving mouse monoclonal antibodies for diagnosis or therapy.
- This assay, regardless of level, should not be interpreted as absolute evidence for the presence or absence of malignant disease. The assay value should be used in conjunction with findings from clinical evaluation and other diagnostic procedures.
- Persistently elevated CA 19.9 levels are usually indicative of progressive malignant disease and poor therapeutic response.

Clinical Use

- An aid in the management of Pancreatic cancer patients
- Monitor the course of disease and predict recurrence in patients with Pancreatic carcinoma.

Carcino Embryonic Antigen (CEA)	18.9	ng/mL	Non Smokers:<3.00 Smokers:<5.00	CLIA
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Interpretation:

- The carcinoembryonic antigen (CEA) test measures the level of CEA in the blood. CEA is a protein normally found in the tissue of a developing baby in the womb. The blood level of this protein disappears or becomes very low after birth. In adults, an abnormal level of CEA may be a sign of cancer.
- A high CEA level in a person recently treated for certain cancers may mean the cancer has returned.

A higher than normal level may be due to the following cancers:

Breast cancer
Cancers of the reproductive and urinary tracts
Colon cancer

An increased CEA level may also be due to:

Liver and gallbladder problems, such as scarring of the liver (cirrhosis), or gallbladder inflammation (cholecystitis)
Heavy smoking
Inflammatory bowel diseases (such as ulcerative colitis or diverticulitis)
Lung infection

Correlate Clinically.

Result rechecked and verified for abnormal cases

Laboratory is NABL Accredited

*** End Of Report ***



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MD BIOCHEMISTRY