



# Basic Information

About Common Health Challenges, Available Preventive  
Health Profiles & Disease-Related Tests



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8.30 am - 5:30 pm

Sunday Closed

# NDPC

North Delhi Pathology Clinic  
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Specimen: 8:30 AM to 1:00 PM | Report: 5:00 to 5:30 PM

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This booklet contains limited general information on various medical conditions and is not advice. The opinion given by the treating physician on all health issues and medical conditions shall be final.

# Preventive Health Profiles

## Ageing Gracefully

All of us are aware that it is crucial to lead a HEALTHY & HAPPY LIFESTYLE. We understand the importance of leading a regulated lifestyle for which CONTROL, DISCIPLINE & PATIENCE are a requirement.

Patients have complete confidence in their DOCTORS and have trust that the treatment prescribed will cure them. However, we should not forget that a doctor may treat the disease and save a life but may not return the happiness in life. Those of us, who have already suffered severe illnesses, well understand the value of the age-old saying, "Prevention is better than Cure."

Examples of common HEALTH CHALLENGES are **Diabetes, High Blood Pressure, Heart attack and Strokes, Obesity, Joint Pains, Arthritis, Thyroid Disorders, Osteoporosis, PCOD, Allergy, Food Intolerance, Celiac Disease, Vitamin D Deficiency, Vitamin B12 Deficiency, Iron Deficiency, Cancer, Dementia, Cataract** etc. The incidence of all of these disorders increases rapidly with ageing. Most of the conditions mentioned above can be avoided or delayed by making LIFESTYLE CHANGES and adding certain SUPPLEMENTS to the diet.

We at North Delhi Pathology Clinic have a few Preventive Health Profiles consisting of various Blood and Urine tests, which may help Physician DETECT most of 'silent' diseases EARLY and monitor the ageing process somewhat objectively.

## Available Preventive Profiles

- **Executive Profile** A Basic Health Profile
- **Diabetic Profile For 30+** For persons having Diabetes
- **High Blood Pressure Profile For 30+** For persons having High BP
- ✓ **Comprehensive Profile** For persons having Diabetes, High BP &/or are Overweight
- **Comprehensive Profile For 50+ for Men**
- **Comprehensive Profile For 50+ Women**
- **Comprehensive Profile For 65+**

## Please Note

Patients are expected to come to the laboratory in a Fasting state (10 to 12 hours after dinner). They will have to submit a Blood and a Urine sample. Test reports will be ready by the evening and can be sent by e-mail on request. Hard copy of the report can be collected between 5 pm and 5:30 pm. **Patients should consult their treating Physician for interpretation, further investigations and management.**

**Most Important:** Laboratory results must be interpreted by treating physicians only.  
Self-interpretation and self-medication by patients are strongly discouraged.

## Preventive Health Profiles (Contd.)

# 30+

### Executive Health Profile

Basic Annual Check up

This Profile consists of **Important tests** covering practically **all parts of your body including Iron and Thyroid Function Tests:**

<b>Diabetes</b>	12 SGPT	23 S. Triglyceride	35 Hemoglobin
01 Bl. Glucose Fasting	13 SGGTP	24 S. HDL Chol	36 PCV
<b>Kidney Function Tests</b>	14 S Alk Phos	25 S. Non HDL Chol	37 RDW
02 S. Urea	15 S. Proteins	26 S. LDL Chol	38 MCV
03 S. Creatinine	16 S. Globulin	27 S. VLDL Chol	39 MCHC
04 S. Uric Acid	17 S. Albumin	28 Total/HDL Chol	40 MCH
05 S. Sodium	18 A/ G Ratio	29 HDL/LDL Chol	41 ESR
06 S. Potassium	<b>Bones, Joints &amp; Muscles</b>	<b>30 CRP</b>	<b>42 S. Iron</b>
07 S. Chloride	<b>Liver Function Tests</b>	<b>Complete Blood Counts</b>	<b>Thyroid Function Tests</b>
08 S.Total Bilirubin	19 S. Calcium	31 TLC	<b>43 Free T3</b>
09 S. Direct Bilirubin	20 S. Phosphorus	32 DLC	<b>44 Free T4</b>
10 S.Indirect Bilirubin	21 S. LDH	33 TRBC Count	<b>45 TSH</b>
11 SGOT	<b>Lipid Profile/Heart</b>	34 Platelet Count	46 Urine Routine
	22 S. Cholesterol		

# 30+

### Diabetic Profile

For **Diabetics**

This Profile consists of **Important tests** covering practically **all parts of your body including Iron, Thyroid Function Tests, HbA1c and Microalbumin levels:**

<b>Diabetes</b>	13 SGOT	25 S. Triglyceride	<b>Absolute Values</b>
01 Bl. Glucose Fasting	14 SGPT	26 S. HDL Chol	38 PCV
<b>02 HbA1c</b>	15 SGGTP	27 S. Non HDL Chol	39 RDW
<b>03 Microalbumin</b>	16 S Alk Phos	28 S. LDL Chol	40 MCV
<b>Kidney Function Tests</b>	17 S. Proteins	29 S. VLDL Chol	41 MCHC
04 S. Urea	18 S. Globulin	30 Total/HDL Chol	42 MCH
05 S. Creatinine	19 S. Albumin	31 HDL/LDL Chol	43 ESR
06 S. Uric Acid	20 A/ G Ratio	<b>32 CRP</b>	<b>44 S. Iron</b>
07 S. Sodium	<b>Bones, Joints &amp; Muscles</b>	<b>Complete Blood Counts</b>	<b>Thyroid Function Tests</b>
08 S. Potassium	21 S. Calcium	33 TLC	<b>45 Free T3</b>
09 S. Chloride	22 S. Phosphorus	34 DLC	<b>46 Free T4</b>
<b>Liver Function Tests</b>	23 S. LDH	35 TRBC Count	<b>47 TSH</b>
10 S.Total Bilirubin	<b>Lipid Profile/Heart</b>	36 Platelet Count	48 Urine Routine
11 S. Direct Bilirubin	24 S. Cholesterol	37 Hemoglobin	
12 S.Indirect Bilirubin			





## Preventive Health Profiles (Contd.)

# 30+

### High Blood Pressure Profile

For High Blood Pressure Patients

This Profile consists of **Important tests** covering practically **all parts of your body, including Iron, Thyroid Function Tests & BP related Homocysteine level** :

<b>Diabetes</b>	12 SGPT	23 S. Triglyceride	35 Platelet Count
01 Bl. Glucose Fasting	13 SGGTP	24 S. HDL Chol	36 Hemoglobin
<b>Kidney Function Tests</b>	14 S Alk Phos	25 S. Non HDL Chol	37 PCV
02 S. Urea	15 S. Proteins	26 S. LDL Chol	38 RDW
03 S. Creatinine	16 S. Globulin	27 S. VLDL Chol	39 MCV
04 S. Uric Acid	17 S. Albumin	28 Total/HDL Chol	40 MCHC
05 S. Sodium	18 A/ G Ratio	29 HDL/LDL Chol	41 MCH
06 S. Potassium	<b>Bones, Joints &amp; Muscles</b>	<b>30 CRP</b>	42 ESR
07 S. Chloride	19 S. Calcium	<b>31 Homocysteine</b>	<b>43 S. Iron</b>
<b>Liver Function Tests</b>	20 S. Phosphorus	<b>Complete Blood Counts</b>	<b>Thyroid Function Tests</b>
08 S.Total Bilirubin	21 S. LDH	32 TLC	<b>44 Free T3</b>
09 S. Direct Bilirubin	<b>Lipid Profile/Heart</b>	33 DLC	<b>45 Free T4</b>
10 S.Indirect Bilirubin	22 S. Cholesterol	34 TRBC Count	<b>46 TSH</b>
11 SGOT		47 Urine Routine	



# 30+

### Comprehensive Profile

For Diabetics, High BP &/or Overweight persons

This Profile consists of **Important tests** covering practically **all parts of your body, including Iron, Thyroid Function Tests, Allergy Screening (IgE) & Special Tests: Homocysteine, HbA1c, Microalbumin, PTH, Vitamin D & Vitamin B12 levels.**

<b>Diabetes</b>	14 SGPT	27 S. HDL Chol	42 MCV
01 Bl. Glucose Fasting	15 SGGTP	28 S. Non HDL Chol	43 MCHC
<b>02 HbA1c</b>	16 S Alk Phos	29 S. LDL Chol	44 MCH
<b>03 Microalbumin</b>	17 S. Proteins	30 S. VLDL Chol	45 ESR
<b>Kidney Function Tests</b>	18 S. Globulin	31 Total/HDL Chol	<b>46 S. Iron</b>
04 S. Urea	19 S. Albumin	32 HDL/LDL Chol	<b>Thyroid Fn. Tests</b>
05 S. Creatinine	20 A/ G Ratio	<b>33 CRP</b>	<b>47 Free T3</b>
06 S. Uric Acid	<b>Bones, Joints &amp; Muscles</b>	<b>34 Homocysteine</b>	<b>48 Free T4</b>
07 S. Sodium	21 S. Calcium	<b>Hemogram/CBC</b>	<b>49 TSH</b>
08 S. Potassium	22 S. Phosphorus	35 TLC	<b>Vitamins</b>
09 S. Chloride	23 S. LDH	36 DLC	<b>50 Vitamin D</b>
<b>Liver Function Tests</b>	<b>24 PTH</b>	37 TRBC Count	<b>51 Vitamin B12</b>
10 S.Total Bilirubin	<b>Lipid Profile/Heart</b>	38 Platelet Count	<b>Allergy Screening</b>
11 S. Direct Bilirubin	25 S. Cholesterol	39 Hemoglobin	<b>52 IgE</b>
12 S.Indirect Bilirubin	26 S. Triglyceride	40 PCV	53 Urine Routine
13 SGOT		41 RDW	



Health Check 



## Preventive Health Profiles (Contd.)

# 50<sup>+</sup>

### Comprehensive Profile for 50<sup>+</sup>

A Profile consisting of Routine & Special tests for 50<sup>+</sup>

This profile is suggested for **persons over 50**. Besides other tests it consists of **Allergy Screening :IgE, Testosterone (men), Two Vitamins: D & B12 and relevant Cancer Markers: PSA- Total & Free & AFP (men) and CA-125 & AFP (women).**

<b>Diabetes</b>	15 SGGTP	30 Total/HDL Chol	<b>Hormones</b>
01 B1. Glucose Fasting	16 S Alk Phos	31 HDL/LDL Chol	45 Free T3
02 HbA1c	17 S. Proteins	32 CRP	46 Free T4
03 Microalbumin	18 S. Globulin	33 Homocysteine	47 TSH
<b>Kidney Function Tests</b>	19 S. Albumin	<b>Hemogram/Complete Blood Count</b>	48 PTH
04 S. Urea	20 A/ G Ratio	34 TLC	49 Testosterone (Men)
05 S. Creatinine	<b>Bones, Joints &amp; Muscles</b>	35 DLC	<b>Cancer Markers</b>
06 S. Uric Acid	21 S. Calcium	36 TRBC Count	50 CA 125 (women)
07 S. Sodium	22 S. Phosphorus	37 Platelet Count	50a PSA T & F (Men)
08 S. Potassium	23 S. LDH	38 Hemoglobin	51 AFP (Both)
09 S. Chloride	<b>Lipid Profile/Heart</b>	39 PCV	<b>Vitamins etc.</b>
<b>Liver Function Tests</b>	24 S. Cholesterol	40 RDW	52 Vitamin D
10 S.Total Bilirubin	25 S. Triglyceride	41 MCV	53 Vitamin B12
11 S. Direct Bilirubin	26 S. HDL Chol	42 MCHC	54 S. Iron
12 S.Indirect Bilirubin	27 S. Non HDL Chol	43 MCH	<b>Allergy Screening</b>
13 SGOT	28 S. LDL Chol	44 ESR	55 IgE
14 SGPT	29 S. VLDL Chol		56 Urine Routine

# 65<sup>+</sup>

### Comprehensive Profile for 65<sup>+</sup>

A Profile consisting of Routine & Special tests for 65<sup>+</sup>

This profile is suggested for **persons who are 65 +**. Besides all tests included in **Comprehensive 50+ profile, an additional NT ProBNP estimation (useful in screening for heart failure) is performed.**

<b>Diabetes</b>	16 S Alk Phos	32 CRP	<b>Hormones</b>
01 B1. Glucose Fasting	17 S. Proteins	33 Homocysteine	46 Free T3
02 HbA1c	18 S. Globulin	<b>Hemogram/Complete Blood Count</b>	47 Free T4
03 Microalbumin	19 S. Albumin	34 TLC	48 TSH
<b>Kidney Function Tests</b>	20 A/ G Ratio	35 DLC	49 PTH
04 S. Urea	<b>Bones, Joints &amp; Muscles</b>	36 TRBC Count	50 Testosterone (Men)
05 S. Creatinine	21 S. Calcium	37 Platelet Count	<b>Cancer Markers</b>
06 S. Uric Acid	22 S. Phosphorus	38 Hemoglobin	51 CA 125(Women)
07 S. Sodium	23 S. LDH	39 PCV	51a PSA T & F (Men)
08 S. Potassium	<b>Lipid Profile/Heart</b>	40 RDW	52 AFP (Both)
09 S. Chloride	24 S. Cholesterol	41 MCV	<b>Vitamins etc.</b>
<b>Liver Function Tests</b>	25 S. Triglyceride	42 MCHC	53 Vitamin D
10 S.Total Bilirubin	26 S. HDL Chol	43 MCH	54 Vitamin B12
11 S. Direct Bilirubin	27 S. Non HDL Chol	44 ESR	55 S. Iron
12 S.Indirect Bilirubin	28 S. LDL Chol	<b>Heart Failure</b>	<b>Allergy Screening</b>
13 SGOT	29 S. VLDL Chol	45 NT ProBNP	56 IgE
14 SGPT	30 Total/HDL Chol		57 Urine Routine
15 SGGTP	31 HDL/LDL Chol		

## Discipline wise List of Tests

### Clinical Biochemistry

5 Alpha DHT, Serum  
 ACE, Serum  
 ADA-MTB, Body Fluids  
 ADA-MTB, Serum  
 Albumin, Serum  
 Alk. Phosphatase, Serum  
 Alpha Feto Protein, Serum  
 AMH, Serum  
 Ammonia, Plasma  
 Amylase, Body Fluid  
 Amylase, Serum  
 ANA-ENA Profile, Serum  
 Androstenedione, Serum  
 ANA (Elisa), Serum  
 Anti ANCA, Serum  
 Anti Cardiolipin-IgG, Serum  
 Anti Cardiolipin-IgM, Serum  
 Anti CCP, Serum  
 Anti DGP IgG, Serum  
 Anti ds DNA, Serum  
 Anti Gliadin IgA, Serum

Anti Thyroglobulin, Serum  
 Anti TPO, Serum  
 Anti TTG-IgA, Serum  
 Apo A1, Serum  
 Apo B, Serum  
 Bilirubin-Direct, Serum  
 Bilirubin-Total, Serum  
 CA 125, Serum  
 CA 15.3, Serum  
 CA 19.9, Serum  
 Calcium Ionic, Serum  
 Calcium Total, Urine  
 Calcium Total, Serum  
 Carbamazepine, Serum  
 CEA, Serum  
 Ceruloplasmin, Serum  
 Chloride, Serum  
 Cholesterol, Serum  
 CK, Serum  
 CK MB Mass, Serum  
 Complement 3- C3, Serum  
 Complement 4- C4, Serum

Cortisol Level, Serum  
 Cortisol Level, Urine  
 C-Peptide, Serum  
 C Reactive Protein, Serum  
 Creatinine, Serum  
 Creatinine, Urine  
 Creatinine Clearance  
 DHEA-S, Serum  
 Electrophoresis-Protein, Serum  
 Endomysium IgA, Serum  
 Ferritin, Serum  
 Food Intolerance IgG, Blood  
 Free Beta HCG, Serum  
 Free T3, Serum  
 Free T4, Serum  
 FSH, Serum  
 Gamma G T, Serum  
 Glucose, Plasma, Body Fluid  
 GOT-AST, Serum  
 GPT-ALT, Serum  
 Growth Hormone, Serum  
 GTT, Blood & Urine



**Dimension EXL 200**  
 Integrated Chemistry System



**COBAS e411**  
 Immunoassay System



**AVL 9180**  
 Electrolyte Analyzer



**BTS 350**  
 Chemistry Analyzer



**HumaReader**  
 Elisa Reader

## Discipline wise List of Tests (contd.)

### Clinical Biochemistry

hs C Reactive Protein, Serum	Microalbumin, Urine	PSA-Free, Serum
Hemoglobin A1c, Blood	NT-Pro BNP, Serum	SHBG, Serum
HCG Beta, Serum	Oestradiol (E2), Serum	Sodium, Serum
HDL Cholesterol, Serum	Osmolality, Serum	Sodium, Urine
Homocysteine, Serum	Osmolality, Urine	Specific IgE Panel-Air, Serum
IgE, Serum	PAPP-A, Serum	Specific IgE Panel-Food, Serum
IL-6, Serum	Parathyroid Hormone, Serum	Testosterone-Free, Serum
Immunoglobulin-IgA, Serum	Phenobarbital, Serum	Testosterone-Total, Serum
Immunoglobulin-IgG, Serum	Phenytoin, Serum	TIBC, Serum
Immunoglobulin-IgM, Serum	Phosphorus, Serum	Total Protein, Serum, Body Fluid
Instant Glucose, Blood	Phosphorus, Urine	Triglyceride, Serum
Insulin, Serum	Porphobilinogen, Urine	hs Troponin I, Serum
Iron, Serum	Potassium, Serum	TSH, Serum
LDH, Body Fluid	Potassium, Urine	UE3 (Unconj Estriol), Serum
LDH, Serum	Procalcitonin, Serum	Urea, Serum
LH, Serum	Prog 17-OH, Serum	Urea, Urine
Lipase, Serum	Progesterone, Serum	Uric Acid, Serum
Lithium, Serum	Prolactin, Serum	Uric Acid, Urine
Lp (a), Serum	Protein, Urine	Valproic Acid, Serum
Magnesium, Serum	PSA-Total, Serum	Vitamin B12, Serum
		Vitamin D Total, Serum



Mini Vidas  
Immunoassay System



BioRad D-10  
HB Chromatography System



Nephstar  
Nephelometer



BioRad ID  
Centrifuge



Sysmex CA 50  
Coagulation System

## Discipline wise List of Tests (contd.)

### Hematology

AEC, Blood  
 APTT/ PTT/ PTTK, Plasma  
 Blood Group  
 Bone Marrow Examination  
 Clot Retraction Time, Blood  
 Coombs Test - Indirect  
 Coombs Test -Direct  
 D Dimer, Plasma  
 DLC, Blood  
 ESR-WG, Blood  
 FDP, Plasma  
 G6PD, Blood  
 Hemoglobin, Blood  
 HB Chromatography (HBA2)  
 Hemoglobin F, Blood  
 LAC, Plasma  
 Malaria Antigen PV PF  
 Malaria Parasite, Blood  
 MCH, Blood  
 MCHC, Blood  
 MCV, Blood  
 Microfilaria, Blood Smear  
 MPV, Blood  
 Osmotic Fragility, Blood  
 PCV/HCT, Blood  
 PDW, Blood  
 Peripheral Smears Exam  
 Platelet Count, Blood  
 IPF - Immature Platelet Fraction  
 Prothrombin Time, Plasma  
 RDW, Blood  
 Reticulocyte Count, Blood  
 Retic He, Blood  
 TLC, Blood  
 TRBC Ct, Blood  
 NRBC Ct, Blood

### Clinical Pathology

Aldehyde Test, Serum  
 Bence Jones Proteins, Urine  
 Bilirubin, Urine  
 Fructose, Semen  
 Ketone, Urine  
 Mantoux Test, I/D Test  
 Occult blood, Stool  
 Pregnancy Test, Urine  
 Routine, Urine  
 Routine, Stool  
 Semen Examination, Semen  
 Urobilinogen, Urine  
 Fecal Calprotectin, Stool

### Cytopathology

Cytology Routine, Body Fluid  
 FNAC, Aspirate  
 Pap Smear



**Sysmex XN 350**  
 Automated Hematology Analyzer



**Sysmex XN 1000**  
 Automated Hematology Analyzer



**Qwik Check Gold**  
 Sperm/ Semen Quality Analyzer



**VESMATIC 20**  
 Automated ESR Analyzer

## Discipline wise List of Tests (contd.)

### Infectious Serology

Amoebic Serology, Serum  
ANA (IIF), Serum  
Anti HAV-IgM, Serum  
Anti HBc-IgM, Serum  
Anti HBe, Serum  
Anti HBs, Serum  
Anti HCV-IgG, Serum  
Anti HEV-IgM, Serum  
ASO Titre, Serum  
Chikungunya, Serum  
CMV-IgG, Serum  
CMV-IgM, Serum  
COV-2-S IgG Abs Quant, Serum  
Cysticercosis, Serum  
Dengue NS1 Antigen, Serum  
Dengue Serology IgM, Serum  
Dengue Serology IgG, Serum  
H.Pylori-IgG, Serum  
HBeAg, Serum  
HBsAg, Serum  
HIV Screening, Serum

HSV-IgG, Serum  
HSV-IgM, Serum  
QuantiFERON TB Gold, Blood  
Rheumatoid Factor, Serum  
RPR, Serum  
Rubella-IgG, Serum  
Rubella-IgM, Serum  
T P H A, Serum  
Toxoplasma-IgG, Serum  
Toxoplasma-IgM, Serum  
Typhi-IgM/IgG, Serum  
Varicella zoster IgG, Serum  
Widal, Serum

### Molecular

Chikungunya PCR, Plasma  
HCV-RNA, Plasma  
HIV-1-RNA, Plasma  
HBV-DNA, Plasma  
HLA B27, Blood  
Xpert MTB/RIF, Site Specific Sample  
H1N1, Nasal Swab

### Microbiology

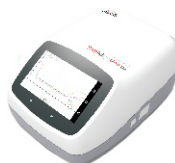
AFB Stain, Pus  
AFB Stain, Sputum  
Albert Stain, Throat Swab  
C & S, Stool  
C & S, Pus  
C & S, Aspirate  
C & S, Body Fluids  
C & S, Blood-Rapid, Blood  
C & S, Conjunctival Swab  
C & S, Throat Swab  
C & S, Urine  
Fungus KOH Prep., Nails etc  
Fungus KOH Prep., Skin etc  
Meth. Blue Stain for Fungus, Fluid / Aspirate etc.  
Gram Stain, Pus  
Gram Stain, Sputum  
Mycobacterium C & S, Pus  
Mycobacterium C & S, Sputum



**VITEK 2 Compact**  
Automated ID/AST Instrument



**GeneXpert**  
State of Art CBNAAT System



**TrueLab UNO Dx**  
CBNAAT System



**BacT ALERT**  
Microbial Growth Detection System



**Cobas u 411**  
Automated Urine Analyzer



# Available Disease Related Tests

## Allergies:



Overreaction of Immune system against harmless substance - Inhalation or Food allergen

- ☐ Hemogram
- ☐ AEC
- ☐ IgE
- ☐ Specific IgE Panels:
  - ☐ - Inhalation (20 items)
  - ☐ - Food (40 items)

## Amenorrhoea:

Absence of a woman's menstrual period during her reproductive age

- ☐ Complete Blood Counts
- ☐ Prolactin
- ☐ LH
- ☐ FSH
- ☐ Estradiol
- ☐ TSH
- ☐ Testosterone - Total
- ☐ Testosterone - Free
- ☐ DHEA-S

## Anemia Panel:



Low hemoglobin levels, resulting in pallor & weakness.

- ☐ Complete Blood Counts
- ☐ ESR
- ☐ Reticulocyte Count
- ☐ PBS
- ☐ Iron & TIBC
- ☐ Ferritin
- ☐ TSH
- ☐ Vitamin B12
- ☐ Folic Acid
- ☐ HB Chromatography
- ☐ Stool Occult Blood

## Arthritis/Joint Pain:



Disease/ Deficiencies causing painful inflammation and stiffness of the joints

- ☐ Hemogram (CBC with ESR)
- ☐ Blood Glucose
- ☐ Uric Acid
- ☐ Rheumatoid Factor
- ☐ Anti CCP
- ☐ CRP
- ☐ ASO
- ☐ Calcium
- ☐ Phosphorus
- ☐ Alk. Phosphatase
- ☐ Vitamin D
- ☐ PTH
- ☐ ANA-IIF
- ☐ ANA/ENA Profile 17 Antigens
- ☐ HLA B27

## Cancer Markers:



A definite diagnosis of Cancer can be made by Microscopic examination of Biopsy- slide, Fine Needle Aspiration Cytology or smear examination of discharge (Pap Smear). However, following Cancer markers may be helpful in diagnosing and monitoring a few Cancers- the disease caused by the uncontrolled division of abnormal cells.

- ☐ CA-125 (Ovary/Endomet)
- ☐ CA-19.9 (Liver, Gall Bladder, Pancreas, Gastrointestinal)
- ☐ CA-15.3 (Breast)
- ☐ PSA Total & Free (Prostate)
- ☐ hCG (Embryo/Testis)
- ☐ AFP (HC & GC)
- ☐ CEA (Breast, GI)
- ☐ M-Band (Myeloma)

## Celiac Disease Screening:



Screening for a disease which presents especially in children as bloating, diarrhea, constipation & pain in the abdomen, leading to failure to thrive, irritability and behavioral issues

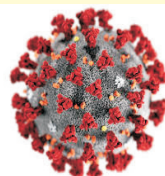
- ☐ Anti tTG IgA
- ☐ IgA
- ☐ Anti DGP IgG
- ☐ Endomysial Abs IgA

## Coagulation Screening:

Tests for the factors associated with a bleeding problem.

- ☐ CBC with Platelet Count
- ☐ Immat. Platelet Fraction-IPF
- ☐ Prothrombin Time
- ☐ APTT
- ☐ D Dimer

## COVID Related:



## Monitoring:

- ☐ Hemogram
- ☐ CRP
- ☐ D Dimer
- ☐ IL-6
- ☐ S. Ferritin
- ☐ LDH

## Follow up:

☐ **COVID Abs-Quantitative**  
Quantitative Detection of Antibodies to SARS-CoV-2 spike protein

## Diabetes Evaluation:

Detection, evaluation and monitoring of Diabetes- a disease in which the body cannot control the level of sugar

- ☐ Diabetic Profile
- ☐ HOMA Score
- ☐ Insulin Fasting & PP
- ☐ C-Peptide

## Available Disease Related Tests (contd.)

### DIC:



Condition in which blood clots form throughout the body blocking small blood vessels

- ☐ Complete Blood Counts
- ☐ Prothrombin Time
- ☐ APTT
- ☐ FDP
- ☐ D Dimer

### Fever Related-Basic:



Abnormally high body temperature

- ☐ Complete Blood Counts
- ☐ CRP
- ☐ Malaria Antigen
- ☐ Typhi IgM
- ☐ Typhi IgG
- ☐ SGPT
- ☐ Urine Routine
- ☐ NS1 Antigen for Dengue
- ☐ Blood Culture (optional)

### Fever Related-Detailed:

Persistent High Fever

- ☐ CBC with ESR
- ☐ CRP
- ☐ Typhi IgM & IgG
- ☐ Widal
- ☐ Malaria Antigen
- ☐ SGPT
- ☐ Urine Routine
- ☐ Urine C & S
- ☐ Blood C & S
- ☐ Chikungunya PCR
- ☐ Dengue NS1
- ☐ Dengue Serology IgM / IgG
- ☐ Procalcitonin
- ☐ Flu : H1N1
- ☐ IL-6

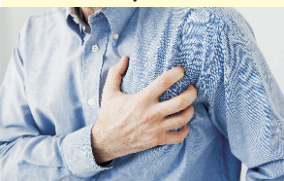
### Food Intolerance:



To evaluate Food Intolerance (IgG antibodies) against various food items which may lead to Irritable Bowel Syndrome-Bloating of abdomen, tiredness for no apparent reason or headache

- ☒ Cereals (8 items)
- ☒ Nuts & Beans (7 items)
- ☒ Vegetables (10 items)
- ☒ Fruits (6 items)
- ☒ Milk & Poultry (3 items)
- ☒ Fish & Meat (8 items)
- ☒ Pulses (4 items)

### Heart Attack/Failure:



Sudden occurrence of coronary thrombosis which damages heart muscles and can sometimes be fatal

- ☐ HS Troponin-I
- ☐ NT Pro BNP
- ☐ CPK & CPK-MB (mass)
- ☐ SGOT
- ☐ LDH
- ☐ CRP

### Hemolysis:

To ascertain cause of destruction of red blood cells

- ☐ Complete Blood Counts
- ☐ Reticulocyte count
- ☐ Immature Platelet Fraction
- ☐ Bilirubin-Total
- ☐ Bilirubin-Direct
- ☐ HB Chromatography
- ☐ Coomb's Test
- ☐ LDH
- ☐ G6PD
- ☐ Plasma/Urinary HB
- ☐ Osmotic Fragility

### Hepatitis: Screening



To ascertain the cause of Viral Hepatitis (inflammation of the liver)

- ☐ Liver Function Tests
- ☐ Anti HAV IgM
- ☐ HbsAg
- ☐ Anti HCV-IgG
- ☐ Anti HEV-IgM

### Hepatitis: 'B' Work up

Evaluation of Blood Borne Hepatitis B which may be of serious nature

- ☐ Liver Function Tests
- ☐ Complete Blood Counts
- ☐ HbsAg
- ☐ Anti HBs
- ☐ Anti HBc-IgM
- ☐ HbeAg
- ☐ Anti Hbe
- ☐ HBV (Viral load)

### Hepatitis: Enteric

Evaluation of Water Borne Hepatitis which are endemic and may be of serious nature

- ☐ Liver Function Tests
- ☐ Anti HAV-IgM
- ☐ Anti HEV-IgM

### Hepatitis: Blood Borne

Evaluation of Blood Borne Hepatitis B and Hepatitis C which are of serious nature

- ☐ Liver Function Tests
- ☐ Complete Blood Counts
- ☐ HbsAg
- ☐ Anti HBc-IgM
- ☐ Anti HCV-IgG
- ☐ HBV (Viral Load)
- ☐ HCV (Viral Load)

### Hepatitis: Immune Status

To ascertain immunization status of Hepatitis A and B

- ☐ Anti HAV-IgM
- ☐ Anti Hbs (Quantitative)



## Available Disease Related Tests (contd.)

### Hirsutism:



Abnormal growth of hair on a woman's face and body

- ☐ Prolactin
- ☐ LH
- ☐ FSH
- ☐ HOMA Score
- ☐ Insulin Fasting
- ☐ Insulin PP
- ☐ Testosterone- Total
- ☐ Testosterone- Free
- ☐ DHEA-S
- ☐ 17-OHP

### HOMA Score : Insulin Resistance

Common Condition when cells of the body do not respond properly to insulin hormone

- ☐ Glucose Fasting
- ☐ Insulin Fasting
- ☐ HOMA Score

### Infertility Females:



To ascertain the cause of difficulty / inability to conceive in Women

- ☐ Executive Profile
- ☐ Prolactin
- ☐ LH
- ☐ FSH
- ☐ AMH
- ☐ Progesterone
- ☐ Estradiol
- ☐ Testosterone- Total
- ☐ Testosterone- Free
- ☐ 5 alpha DHT
- ☐ Xpert MTB/RIF

### Infertility Males:



To ascertain the cause in males who face the inability to cause pregnancy in a fertile female

- ☐ Executive Profile
- ☐ Prolactin
- ☐ LH
- ☐ FSH
- ☐ Testosterone - Total
- ☐ Testosterone - Free
- ☐ Estradiol
- ☐ Semen Routine
- ☐ Semen Fructose

### Kidney Function Tests:



Basic evaluation of Kidney function Tests

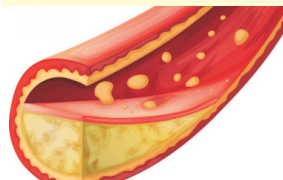
- ☐ Urea
- ☐ Creatinine
- ☐ Uric Acid
- ☐ Calcium
- ☐ Phosphorus
- ☐ Alk. Phosphatase
- ☐ Sodium | Potassium | Chloride
- ☐ Total Protein
- ☐ Albumin
- ☐ Albumin Globulin Ratio

### Kidney Function Tests (Detailed):

Detailed evaluation of Kidney function Tests

- ☐ Kidney Function Tests
- ☐ eGFR (Calculated)
- ☐ Alb/ Creat Ratio, Urine
- ☐ PTH
- ☐ Vitamin D
- ☐ Creatinine Clearance

### Lipid Profile – Basic:



To evaluate presence of various lipids in the blood

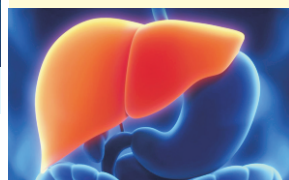
- ☐ S.Cholesterol
- ☐ S.Triglyceride
- ☐ S.HDL Cholesterol
- ☐ S.LDL Cholesterol
- ☒ S.Non HDL Cholesterol
- ☒ S.VLDL Cholesterol
- ☒ Total/HDL Cholesterol Ratio
- ☒ HDL/LDL Cholesterol Ratio

### Lipid Profile – Extended:

To evaluate in detail the pattern of lipids in the blood

- ☐ Lipid Profile
- ☐ Apo A1 & Apo B
- ☐ Lp(a)

### Liver Function Tests:



Tests that give information about functioning of liver

- ☐ Bilirubin Total & Direct
- ☐ SGOT
- ☐ SGPT
- ☐ GGT
- ☐ Alk Phosphatase
- ☐ Total Protein
- ☐ Albumin

### Liver Function Tests (Detailed):

Tests that give detailed information about functioning of liver

- ☐ Liver Function Tests
- ☐ Hepatitis Screening Panel
- ☐ Prothrombin Time
- ☐ Amoebic Serology
- ☐ ANA

# Available Disease Related Tests (contd.)

## Pregnancy-Normal:



Normal pregnancy

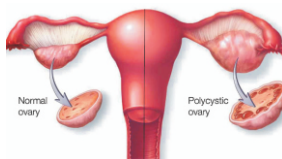
- ☐ Complete Blood Counts
- ☐ Glucose
- ☐ Blood Group
- ☐ Urine Routine
- ☐ TSH
- ☐ RPR
- ☐ HbsAg
- ☐ HIV
- ☐ HB Chromatography
- ☐ TORCH Profile- IgG & IgM
- ☐ Dual Marker
- ☐ Triple Marker

## Pregnancy-Bad Obstetric History :

Evaluation of women who have had previous miscarriages

- ☐ Executive Profile
- ☐ Blood Group
- ☐ RPR
- ☐ HbsAg
- ☐ HIV
- ☐ Anti-TPO & TG
- ☐ HB Chromatography
- ☐ Progesterone
- ☐ Estradiol
- ☐ Lupus Anti Coagulant
- ☐ TORCH Profile - IgG & IgM
- ☐ Anticardiolipin - IgG & IgM
- ☐ Dual Marker
- ☐ Triple Marker
- ☐ Thyroid Profile
- ☐ ANA

## PCOD / PCOS:



Hormonal imbalance in women of reproductive age

- ☐ Prolactin
- ☐ LH
- ☐ FSH
- ☐ AMH
- ☐ Insulin/ HOMA Score
- ☐ Testosterone Total & Free
- ☐ DHEA-S
- ☐ 17-OHP
- ☐ Androstenedione
- ☐ SHBG
- ☐ Lipid Profile

## STD / VD Related:



Had unprotected sex?  
**Get Tested**

Infections that may pass from one person to another through sexual contact.

- ☐ HBsAg | HCV | HIV
- ☐ RPR/ TPHA
- ☐ HSV- IgG & IgM
- ☐ Smear for Gonococci
- ☐ HIV-RT PCR (Viral Load)

## Thyroid Function Tests:



Evaluation of Thyroid functions

- ☐ Free T3
- ☐ Free T4
- ☐ TSH

## Thyroid Function Tests (Detailed):

Detailed evaluation of Thyroid functions

- ☐ Free T3
- ☐ Free T4
- ☐ TSH
- ☐ Thyroid Antibodies
- ☐ -Anti TG
- ☐ -Anti TPO

## Tuberculosis Related:



Tests for evaluation and confirmation of Tuberculosis- an infectious bacterial disease- especially in the lungs

- ☐ Complete Blood counts
- ☐ ESR
- ☐ AFB Staining
- ☐ Mantoux Test
- ☐ ADA
- ☐ FNAC
- ☐ Rapid TB Culture
- ☐ Xpert MTB/RIF

## Thalassemia Related:

An inherited blood disorder characterized by abnormal hemoglobin production.

- ☐ CBC (inc. Hb, MCV, RDW-SD)
- ☐ Hb Chromatography
- ☐ Iron Studies
- ☐ Ferritin



**Dad!!  
Have you  
ever tested Yourself  
& Mom for Thalassemia Status  
to ensure I am OK ?**

## Life Style Suggestions

### Suggestions especially for Diabetes & High Blood Pressure related issues

The prevalence of **obesity** is rising to epidemic proportions at an alarming rate in developed and developing countries worldwide. Non-communicable diseases such as **diabetes** now account for a large number of deaths each year worldwide. The **twin epidemics of obesity and diabetes** already represent the biggest public health challenge of the 21st century. Being overweight or obese seriously increases an individual's risk of developing other health problems such as **diabetes, coronary heart disease, strokes and some forms of cancer**. Of these, Diabetes is the most preventable consequence of obesity.

### Suggested Weight - Kgs

Height	Weight
5'	54
5' 1"	56
5' 2"	57
5' 3"	59
5' 4"	61
5' 5"	63
5' 6"	65
5' 7"	67
5' 8"	69
5' 9"	71
5' 10"	73
5' 11"	75
6'	77

Acceptable  $\pm$  10%

### Healthy Diet & Life Style



Although obesity can affect anyone, the main risk factors are high-fat, high-energy dense diets & physical inactivity. We should promote the importance of eating a low-fat, low-energy-dense diet & participating in physical activity to reduce the risks of becoming overweight or obese. It is estimated that at least half of all adult-onset diabetes patients would become normal if they control their weight.

## Benefits of Weight Loss

Disease	Benefits
<b>Diabetes</b>	Weight loss of more than 5 kg decreases the risk of developing diabetes by 50%. Weight loss of 5-10% improves glucose control, sometimes allowing reduction or even medication withdrawal. Weight loss leads to a reduction in diabetes-related mortality.
<b>High BP and Lipid Profile</b>	Every 1 kg fall in weight leads to a falling in BP of 1-2 mm Hg. Weight loss leads to a fall in LDL cholesterol and Triglycerides (Bad lipids) and an increase in HDL Cholesterol (Good lipids).

## Basic Information on Common Health Challenges

### Thyroid Disorders



Thyroid diseases are **more common than diabetes or heart disease**. The incidence of hypothyroidism in women is higher than in men, and it hits hardest during pregnancy, mid-life, and older age. **Symptoms of Hypothyroidism are usually vague and go unnoticed for years together**. Thyroid diseases can affect every system and cell in the body, leaving it **vulnerable to heart disease, osteoporosis, and other illnesses**. The American Thyroid Association recommends that everyone over 35 years, especially women, be screened for thyroid disorders.

### Available Thyroid Function Tests

**Thyroid screening:** Serum TSH, Free T4 & Free T3

**Detailed Thyroid profile:** Serum TSH, Free T4, Free T3 Thyroid Abs: Anti TPO & Anti TG

### Symptoms

#### Hypothyroidism



Weight Gain	Lethargy
Dry Skin	Puffy Face
Infertility	Joint Pains
Depression	Cold Intolerance
Slow Heartbeat	Forgetfulness
Coarse &	Brittle Nails
Dry Hair	Heavy Periods
Muscle Aches	Constipation

#### Hyperthyroidism

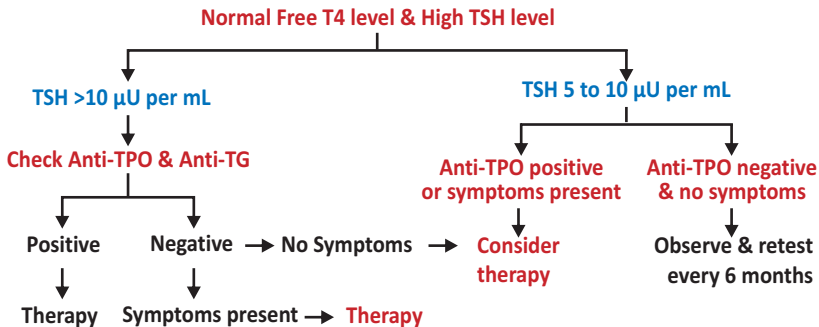


Weight Loss	Rapid Pulse
Sweating	Nervousness
Moist Palms	Tremors in Hands
Hair Loss	Irritability
Bulging Eyes	Infertility
Weakness	Enlarged Thyroid
Scanty Periods	Frequent Bowel Movements

### Subclinical Hypothyroidism

A significant number of patients who are screened for thyroid disease have marginally increased serum TSH (thyroid-stimulating hormone) levels, but their Free Thyroxine (T4) levels are within normal limits. This condition is, termed "**subclinical hypothyroidism**", which is an early stage of Hypothyroidism and is common in women and older persons. This condition's symptoms, which is usually fatigue and constipation, are usually ignored, thinking that they are because of ageing. **Thyroid Antibodies (Anti TPO & TG) test should be performed on all such cases.**

### Algorithm for the Management of Subclinical Hypothyroidism



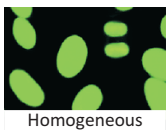
## Basic Information on Common Health Challenges

### Joint Pain & Connective Tissue Disorders

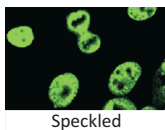
- A Cost Effective Confirmation of CTD and Autoimmune Disorders



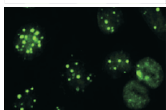
Common ANA-IIF Patterns



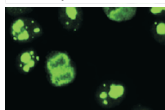
Homogeneous



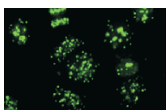
Speckled



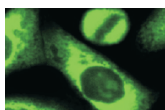
Nuclear Dots



Nucleolar



Centromeres



Cytoplasmic

Arthritis (Joint Pains) presents as swelling, pain, stiffness and decreased range of motion in joints. Symptoms may be mild to severe and may stay for years. Severe arthritis can result in chronic pain, inability to do even daily activities. There are more than 100 types of arthritis and related conditions. It is most common among women and old age. Arthritis can cause permanent joint changes such as knobby finger joints. Some types of arthritis also affect the heart, eyes, lungs, kidneys and skin as well.

#### Available Joint Pain Related Tests

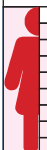

- ✓ **Screening Tests:** CBC | ESR | Bl. Glucose | Uric Acid | Rheumatoid Factor | Anti CCP
- ✓ **Further Tests:** Calcium | Phosph | Alk. Phosphatase | CRP | ASO | PTH | Vit D
- ✓ **Other Special Tests:** ANA-Elisa or ANA-IIF | ANA/ENA Profile | HLA B27

#### ANA-IIF & ANA/ENA Profile in brief

**Serum ANA by IIF Technique:** Gold Standard or diagnosis of Autoimmune disorders.

**Serum ANA-ENA Panel:** A panel for detection (Negative,+,++,+++) of autoantibodies of IgG class to 17 different antigens.

Autoimmune Disease & Relevant Antigens	
Systemic lupus erythematosus (SLE)	dsDNA, Histones, Ku, PCNA, Ro-52, Nucleosomes, Ribosomal Protein, Sm, SS-A native, SS-B
Lupus erythematosus neonatal	SS-A native, SS-B
SLE- Drug Induced	Histones
Sjogren's syndrome	SS-A native (60 kDa), SS-B, Ro- 52 recombinant
Systemic Sclerosis (SSc)	AMA-M2, Ku, Ro-52 recombinant, Scl-70
SSc - Diffuse & Limited forms	Scl-70, Centromere B
Dermatomyositis Adult / Juvenile	Mi-2
Idiopathic inflammatory myopathy	Ro-52 recombinant
Myositis (Polymyositis, Dermatomyositis, Idiopathic )	Ku, Jo-1, Mi-2
Polymyositis/ SSc overlap syndrome	PM-Scl100
Mixed connective tissue disease	RNP/Sm
Primary biliary cirrhosis & Other chronic liver diseases	AMA-M2, Centromere B
RA	Histones

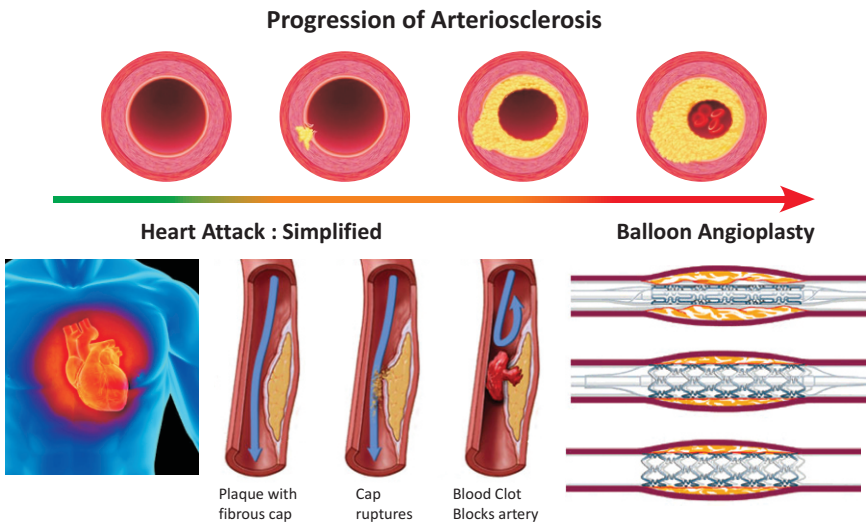
Risk of Common Autoimmune Diseases			
	Women	Risk	Men
	1 in 12	Over all risk	1 in 20
	1 in 28	Rheumatoid Arthritis	1 in 59
	1 in 42	Polymyalgia Rheumatica	1 in 59
	1 in 100	Giant cell Arteritis	1 in 200
	1 in 111	Lupus	1 in 500
	1 in 125	Sjogrens syndrome	1 in 2500
	1 in 200	Psoriatic Arthritis	1 in 167
	1 in 1000	Ankylosing Spondylitis	1 in 167
	Women	Risk	Men
	1 in 12	Over all risk	1 in 20
	1 in 28	Rheumatoid Arthritis	1 in 59
	1 in 42	Polymyalgia Rheumatica	1 in 59
	1 in 100	Giant cell Arteritis	1 in 200
	1 in 111	Lupus	1 in 500
	1 in 125	Sjogrens syndrome	1 in 2500
	1 in 200	Psoriatic Arthritis	1 in 167
	1 in 1000	Ankylosing Spondylitis	1 in 167

ANA / ENA Profile - Specimen Report						
Antigen	Intensity	Class	0	(+)	++	+++
Mi-2	0	0				
Ku	2	0	<div></div>			
RNP/Sm	1	0	<div></div>			
Sm	0	0				
SS-A native	1	0	<div></div>			
Ro-52 recombinant	1	0	<div></div>			
SS-B	2	0	<div></div>			
Scl-70	2	0	<div></div>			
PM-Scl100	1	0	<div></div>			
Jo-1	0	0				
Centromere B	1	0	<div></div>			
PCNA	0	0				
dsDNA	0	0				
Nucleosomes	93	+++				<div></div>
Histones	21	+		<div></div>		
Ribosomal Protein	4	0	<div></div>			
AMA-M2	1	0	<div></div>			
Control	94	+++				<div></div>
Label	-1					
INTERPRETATION OF RESULTS BASED ON SIGNAL INTENSITY						
Signal visual evaluation	Signal Intensity		Results			
No signal	0-5		0	Negative		
Very weak band	6-10		(+)	Borderline **		
Medium to strong band	11-25 or 26-50		+, ++	Positive		
Very strong band	> 50		+++	Strong Positive		
** Results in the borderline range from 6 to 10 should be evaluated as increased but NEGATIVE						

Basic Information on Common Health Challenges

Heart Attack

Heart Attack or Coronary artery disease is the leading cause of death in India and developed countries. The deposition of Fat, Cholesterol and other substances in arteries is known as Arteriosclerosis. If such accumulations are large, they are called plaque, and they can damage artery walls and block blood flow. Such a block may severely restrict blood flow in the heart muscle and may lead to symptoms such as chest pain and, ultimately, Heart Attack, which can be fatal. The above-mentioned disease process, which may lead to death, is probably due to unhealthy cholesterol & lipid levels. LDL- Cholesterol acts as a villain & HDL Cholesterol acts as a hero in the process.



This process of Arteriosclerosis is enhanced by other risk factors, including high blood pressure, smoking, obesity, diabetes, and a sedentary lifestyle. When more than one of these risk factors is present, the risk is compounded. The effects of cholesterol on the heart may involve more than just the arteries. There is some evidence that unhealthy levels may affect the heart muscles and increase heart failure risk.

High Blood Pressure Management

Modification	Recommendation	BP Reduction
Weight reduction	Try to maintain body weight as per table.	5-20 mm Hg/ 10-kg weight loss
Diet modification	Consume a diet with low fat & high fibre contents (fruits, vegetables etc)	8-14 mm Hg
Salt Reduction	Reduce salt intake	2-8 mm Hg
Physical activity	Regular physical activity such as brisk walking (at least 30 minutes per day, most days of the week)	4-9 mm Hg
Alcohol Intake	Avoid alcohol or reduce consumption drastically	2-4 mm Hg



Basic Information on Common Health Challenges

Heart Failure and Heart Attack

NT Pro BNP and HS Trop I : Laboratory tests for Early Diagnosis

Heart failure and heart attack are both forms of heart disease. Most heart attacks happen suddenly when one of the arteries leading to the heart becomes blocked and cuts off the blood flow. Without oxygen, the heart muscles start to die. Heart failure, on the other hand, usually develops gradually.

NT ProBNP for Heart Failure

With 23 million cases worldwide, Heart failure (HF) has been singled out as a major emerging epidemic. Since early symptoms are usually vague and diagnosing heart failure (HF) in OPD is difficult, it is dangerous to ignore the symptoms.

Presentation of Heart Failure			
Shortness of Breath	Swelling over feet & legs	Chronic lack of energy	Difficulty in sleeping due to breathlessness
Swollen abdomen and loss of appetite	Cough with frothy sputum	Increase urination at night	Sudden weight gain

● **NT-proBNP is a useful and accurate blood test for ruling out the diagnosis of heart failure. It excludes or confirms ACUTE HEART FAILURE.**

● This cost-effective and specific test helps in EARLY initiation of appropriate treatment in emergency situations. This improves patient outcome. Using NT-proBNP helps clinicians to optimize the management of patients. This may result in a significant decrease in-hospital stay and reduced re-hospitalization.

Interpretation

International guidelines recommend a single low cut-off of 125 pg/mL to rule out HF for patients presenting with non-acute symptoms. However, a study published in the Indian Journal of Endocrinology and Metabolism recommends an arbitrary value of 300 pg/mL for the management of Heart failure.

HS Trop I for Heart Attack

Every year, 16 million people worldwide die of cardiovascular diseases, specifically heart attacks or stroke. Chest pain is among the top 10 reasons to visit Physicians or Emergencies. The expected prevalence of acute myocardial infarction (MI) is 10 to 20%.

Presentation of Heart Attack	
Typical Presentation and distribution of pain	

● **Trop I (HS cTrop I) levels start rising within 2 to 3 hours of the onset of chest pain & remains elevated for almost ten days.**

● **HS cTrop I (high sensitive Cardiac Troponin I or HS cTrop I)** is a useful blood test for confirming and optimising the management of Acute Coronary Syndromes. This helps in improving patients outcome.

● In addition to clinical assessment and an electrocardiogram (ECG), Trop I (HS Trop I) is now a mandatory investigation to make a definitive diagnosis of acute MI.

● Serial measurement of Trop I (HS cTrop I) differentiates acute from chronic cardiac myocyte damage.

Interpretation:

**Less than 19 ng/L : NEGATIVE**

**More than 100 ng/L : POSITIVE**

Individuals with values between 19 and 100 ng/L should be retested after 3 hours.

## Basic Information on Common Health Challenges

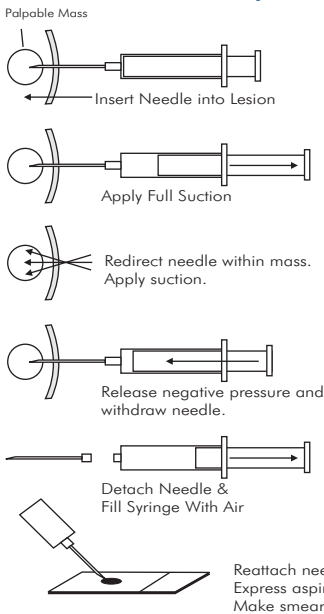
### FNAC For Superficial Palpable Lumps

An inexpensive rapid test for diagnosis of superficial palpable masses

Fine Needle Aspiration Cytology (FNAC) is a simple, quick and inexpensive method used to sample superficial suspicious masses such as palpable lymph nodes, thyroid nodules, breast, or any other lump in the body. It can rule out cancer which in many cases is a major worry which alleviates patient anxiety.

**Results:** The aspirate is examined under a microscope, and a diagnosis is made based on the type of cells that are seen. In some cases, the opinion may be inconclusive and actual diagnosis may require further testing, usually involving a surgical biopsy.

#### FNAC Technique



#### Benefits and Limitations:

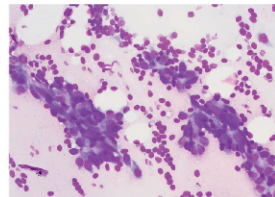
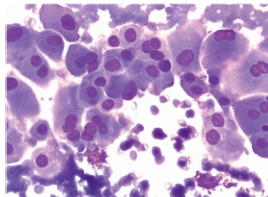
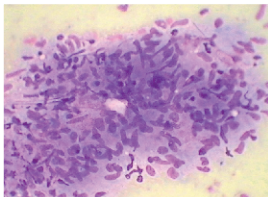
FNAC is a rapid, effective test for determining the status of the suspect tissue. Compared to surgical biopsy, FNAC is an OPD procedure that causes minimal trauma, infection or scarring with minimal recovery time. Once the test is completed, the patient can continue normal activities. Smear prepared from the aspirate obtained through the procedure is stained, examined under a microscope, and an opinion is given.



#### FNA for Confirmation of MTB-Tuberculosis:

In cases with Granulomatous lymphadenitis or purulent aspirates, Xpert MTB (CBNAAT) testing has an important role in confirming Extra Pulmonary Tuberculosis (EPTB).

**Combining FNA with Xpert MTB (CBNAAT)** has the advantage of detecting FNA missed cases, and significant numbers of cytomorphological TB NEGATIVE aspirates can be confirmed or diagnosed by Xpert MTB (CBNAAT).





Basic Information on Common Health Challenges

Cancer Markers



Cancer markers are not diagnostic in themselves. A definitive diagnosis of cancer can be made by looking at biopsy specimens (e.g., of tissue) under a microscope or Fine Needle Aspiration Cytology (FNAC) and smear examination of discharge (Pap smear). However, cancer markers provide information that can be used in monitoring treatment, helping in diagnosis, staging & determining prognosis & recurrences.

Cancer Warning Signals\*

- Change in bowel habits (Colon) or bladder function (Bladder, Prostate)
- Sores that do not heal (Oral Cancer)
- White patches inside the mouth or white spots on the tongue (Precancerous Leukoplakia)
- Unusual bleeding or discharge (Lung, Kidney, Colon, Rectal, Cervical or the endometrial)
- Thickening or lump in the breast or other parts of the body
- Recent change in a wart or mole or any new skin change (Skin-Melanoma)
- Nagging cough or hoarseness (Lung, Larynx or Thyroid Gland)

Cancer Markers Available

Cancer Markers	Cancers Detected**	Indicated In
AFP	Liver, germ cell cancer of ovaries or testes	Men & Women
CA 19.9	Pancreatic, sometimes bowel and bile duct	Men & Women
hCG	Testicular & trophoblastic	Men & Women
PSA/Free PSA	Prostate	Men
CA 15.3	Breast & others including lung, ovarian	Women
CA 125	Ovarian	Women
CEA	Bowel, lung, breast, thyroid, liver, cervix & bladder etc.	Men & Women

\*\*Cancer Markers may be elevated in a few benign diseases other than cancers also.

Celiac Disease - Gluten-sensitive Enteropathy

Celiac disease (gluten-sensitive enteropathy), sometimes called sprue or celiac, is an immune reaction to eating gluten, a protein found in wheat, barley and rye. If you have celiac disease, eating gluten triggers an immune response. Over a period of time, this reaction damages the small intestine's lining and prevents absorption of some nutrients, which in children may affect growth and development. There's no cure for celiac disease — but for most people, following a strict gluten-free diet can help manage symptoms and promote intestinal healing.



Signs & Symptoms

1. Diarrhea
2. Bloating & Gas
3. Fatigue
4. Weight Loss
5. Constipation
6. Depression
7. Itchy Rash
8. Iron-Def. Anemia

Laboratory Tests

Screening:

1. tTG IgA Abs, Serum
2. IgA, Serum
3. DGP IgG Abs, Serum
4. Endomysial Abs, Serum

Further Confirmation:

1. Biopsy
2. Genetic Tests: HLA DQ2 & DQ8



Tests for General Assessment

1. Complete blood count (CBC) with ESR
2. C-Reactive protein (CRP)
3. Comprehensive metabolic panel (CMP)
4. Vitamin D, Vitamin B12 and Folate
5. Iron, TIBC, Transferrin & Ferritin

## Basic Information on Common Health Challenges

### Intolerance & Allergy

- Available In Vitro Blood Tests for detection of Intolerance & Allergy

#### Intolerance vs Allergy

**Allergy:** A true food or inhalation allergy causes an immune system reaction that affects numerous organs in the body. It can cause a range of symptoms. In some cases, an allergic food reaction can be severe or life-threatening.

**Intolerance:** In contrast, food intolerance symptoms are generally less serious and often limited to digestive problems.

#### Test for Food Intolerance:

A blood test that can detect Food Specific IgG antibodies against many food items may lead to various conditions such as digestive problems, irritable bowel syndrome, eczema and arthritis.

#### Symptoms of Food Intolerance

Symptoms of Food Intolerance include digestive issues such as bloating of the abdomen after eating certain types of foods, tiredness or headache for no apparent reason.

**Bloating of Abdomen | Flatulence | Stomach Cramps & Pain | Constipation | Headache | Lethargy | Diarrhoea | Eczema | Arthritis | Back Pain**



#### List of Food Items tested for Intolerance

Cereals	Nuts & Beans	Vegetables	Fruits	Fish & Meat
<b>Milk &amp; Poultry</b>	<b>Pulses</b>			
<b>Interpretation and Suggestions:</b>				
Result		Suggestion		
Strong Positive		Do not take that food item for 3 months.		
Moderate Positive		Reduce these foods to once every 4 days.		
Weak Positive		Observe the effect of eating these foods.		
Negative		Acceptable		

## Basic Information on Common Health Challenges

### Allergy: Food & Air

- In Vitro Specific IgE Estimation for detection of Food and Air Allergens

Allergy causes an immune system reaction that affects numerous organs in the body. An allergic reaction can be caused by **Inhalation** (through Air) or **Food Allergens**. Symptoms of allergic reactions usually occur quickly and, in some cases, can be severe or life-threatening.

#### Food Allergy

**Symptoms:** Burning & Itching in Lips, Tongue & Throat | Diarrhoea | Vomiting | Pain in Abdomen | Erythema or Urticaria.



#### Food Allergens Tested

- |                |             |              |               |               |
|----------------|-------------|--------------|---------------|---------------|
| 1. Egg white   | 9. Rice     | 17. Tomato   | 25. Eggplant  | 33. Coffee    |
| 2. Egg yolk    | 10. Soybean | 18. Potato   | 26. Arhar Dal | 34. Chocolate |
| 3. Cow's milk  | 11. Peanut  | 19. Spinach  | 27. Mung      | 35. Ginger    |
| 4. Milk powder | 12. Orange  | 20. Garlic   | 28. Yam       | 36. Spice mix |
| 5. Yogurt      | 13. Coconut | 21. Onion    | 29. Beef      | 37. Codfish   |
| 6. Wheat flour | 14. Apple   | 22. Chickpea | 30. Chicken   | 38. Crab      |
| 7. Gluten      | 15. Grape   | 23. Mushroom | 31. Lamb      | 39. Prawn     |
| 8. Oat flour   | 16. Pea     | 24. Cucumber | 32. Mustard   | 40. Rohu      |

#### Air-Inhalation Allergy

**Symptoms:** Red watery Eyes | Sneezing | Congestion | Runny Nose | Sore Throat | Cough | Buzzing Sounds



#### Inhalation Allergens Tested

- |                   |                     |                 |                      |                |
|-------------------|---------------------|-----------------|----------------------|----------------|
| 1. Timothy grass  | 5. False ragweed    | 9. Der. farinae | 13. Pigeon feathers  | 17. Cotton     |
| 2. Cultivated rye | 6. Carnation flower | 10. Cockroach   | 14. Chicken feathers | 18. Straw dust |
| 3. Corn           | 7. Sunflower        | 11. Cat         | 15. Aspergillus spp  | 19. Jute       |
| 4. Eucalyptus     | 8. Mite mix 1       | 12. Dog         | 16. Trichophyton spp | 20. Sheep wool |



## Basic Information on Common Health Challenges

### Antibiotic Resistance

**SUPERBUG** - A Global Threat : Bacteria resistant to most of the antibiotics



Antibiotic resistance is one of the biggest threats to global health, food security, and development today. Antibiotic resistance can affect anyone, of any age, in any country.

A growing number of infections such as PNEUMONIA, TUBERCULOSIS, GONORRHEA and SALMONELLOSIS (Typhoid) are becoming harder to treat as the antibiotics used to treat them become less effective. Antibiotic resistance leads to longer hospital stays, higher medical costs, and increased mortality.

Both the stakeholders - Patients & Doctors can solve this problem by taking the following measures; otherwise, we will positively end up in the pre-antibiotic era.

#### Antibiotics: Dos and Don'ts !!



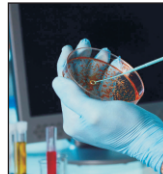
**WASH HANDS**  
Maintain  
Hygiene



Antibiotics **DO NOT WORK** on  
Cold & Flu



Start Antibiotics  
on **DOCTORS**  
**ADVICE** only



If possible start  
Antibiotics after  
**CULTURE TESTING**



Take  
**FULL COURSE**  
of Antibiotics!!

#### Expectations from PATIENTS

- ONLY A FEW infections require antibiotics.
- START antibiotics ONLY when prescribed by your PHYSICIAN. NEVER start a course on your own.
- TRUST YOUR PHYSICIAN !!! They will prescribe only when you need them.
- STRICTLY adhere to your PHYSICIAN's prescription and complete the course of antibiotics.
- NEVER SHARE or use leftover antibiotics.
- PREVENT infections by regularly washing hands, preparing food hygienically, avoiding close contact with sick people, practising safer sex, and keeping vaccinations up to date.

#### Expectations from treating DOCTOR

- EDUCATE patients about the importance of building immunity and maintaining hygiene in preventing infections (vaccination, hand washing, healthy diet, physical activity, safe sex etc.)
- PRESCRIBE antibiotics only according to current guidelines. AVOID empiric course of antibiotics treatment.
- CULTURE & SENSITIVITY testing should be ordered wherever appropriate (to avoid empiric therapy) before starting an antibiotic course.
- EXPLAIN to the patient in detail on how to take antibiotics, including the importance of completing the course and dangers of potential misuse of antibiotics.

## Basic Information on Common Health Challenges

### Molecular Diagnostics

-Cartridge Based Nucleic Acid Amplification Test:

A Rapid cost effective RT-PCR for common infectious diseases & HLA B27

#### Available CB-NAAT - RT PCR tests

##### **M.tuberculosis**

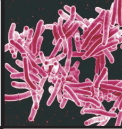
with Rifampicin Resistance

**Specimen:** Site Specific

**Pulmonary:** Sputum & Bronchial Aspirate etc.

**Extra-pulmonary:** Pus, Fluids, FNA, Biopsy etc.

**Reporting:** Same day

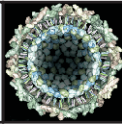


##### **Chikungunya**

**Viral Load**

**Specimen:** Plasma

**Reporting:** Same day

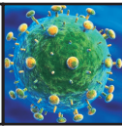


##### **HIV**

**Viral Load**

**Specimen:** Plasma

**Reporting:** Same day

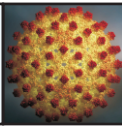


##### **Hepatitis B**

**Viral Load**

**Specimen:** Plasma

**Reporting:** Same day

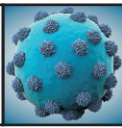


##### **Hepatitis C**

**Viral Load**

**Specimen:** Plasma

**Reporting:** Same day

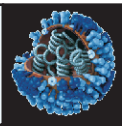


##### **H1N1**

**Qualitative**

**Specimen:** Nasal Swab

**Reporting:** Same day

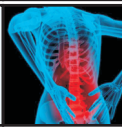


##### **HLA B27**

Qualitative test for  
Ankylosing Spondylitis

**Specimen:** Blood

**Reporting:** Same day



✓ Molecular diagnostics (RT-PCR) is now available for more than a decade. It has given us the confidence of delivering sensitive, specific test results, especially for infectious diseases that affect masses. This technology has provided a quantum leap in patient care delivery by expediting diagnosis and improving treatment efficacy.

✓ Unfortunately, until recently, molecular diagnostics have not met the Medical profession's expectations as laboratories ignored the most important clinical correlation issues, contamination, reagents stability, and even standardization. Further molecular diagnostics remained the domain of chain labs that could manage to keep the prices low by batch testing but at the cost of increased TAT.

✓ Recently introduced **CB-NAAT (Cartridge Based Nucleic Acid Amplification Test)** Testing is considered GAME CHANGER in the field. The sophisticated design of hardware and highly sensitive, specific, efficient, linear range, clinical validation, reproducibility, and precision results from CB-NAAT systems comparable to the best of the reference RT PCR equipment. These systems ensure that all processes and protocols of RT-PCR testing - starting from sample preparation to the final reporting of the result are completed in few hours.

✓ Realizing the importance of molecular diagnostics, North Delhi Pathology Clinic has opted for CB-NAAT Systems. These RT-PCR equipment have adequately addressed prevailing limitations. They have proven to be reliable, sensitive, cost-effective and fast, with a low turn around time.





## Basic Information on Common Health Challenges

### Comprehensive Complete Blood Counts-CBC

Parameters available in Sysmex XN Series using Fluorescent Flowcytometry

We at NDPC use Sysmex XN Series haematology Analyser that uses state of the art Fluorescent Flow Cytometry Technology to provide many Platelet, WBC and RBC parameters (related to all stages of transformation from immature to mature). This helps physicians to make critical clinical decisions and monitoring therapy.

Sysmex XN series is not only capable of providing precise and accurate results of all routine parameters, but it is also capable of generating advanced new parameters such as Immature Platelet Fraction (IPF), Fluorescent Platelet Count (PLT-F), Immature Granulocytes (IG), Nucleated RBCs (NRBC), Reticulocyte count including RET-He.



Cells	Parameters	Information Given	Useful in
Platelets	Platelet Count-F (Fluorescent)	Platelet count by fluorescent flowcytometry	Dengue, ITP, Autoimmune thrombocytopenic Purpura etc.
	Immature Platelet Fraction (IPF)	% of immature platelets (indicates bone marrow platelet production)	Differentiating Consumptive processes (Dengue, ITP) & Bone Marrow Suppression (Aplasia, MDS)
WBCs	Immature Granulocyte % (IG%)	IG% indicates severity of the early immune response (patients with suppressed immune system).	Rapid discrimination of bacterial from viral infections, particularly in children. Early recognition of bacterial infection and sepsis in adults ICU patients
Red Blood Cell	Nucleated RBCs (NRBC/100 WBC)	Reflection of extreme increases in erythropoietic activity	Assessment of Acute hemolytic episodes, Thalassemia syndromes, Hematological malignancies, Bone marrow metastases of solid tumors. Extramedullary hematopoiesis, Hematopoietic stress (sepsis, massive hemorrhages)
	Reticulocyte Hemoglobin (RET-He)	Direct measurement of red cell hemoglobin content for rapid evaluation of changing iron status	Precise monitoring of treatment of Iron deficiency anemia. Evaluation of iron status in persons suffering from Kidney disease (on dialysis) and other chronic diseases (chronic infection or malignancy)
	Reticulocyte Count	Current iron availability for erythropoiesis.	Evaluate type of anemia and response to iron therapy.

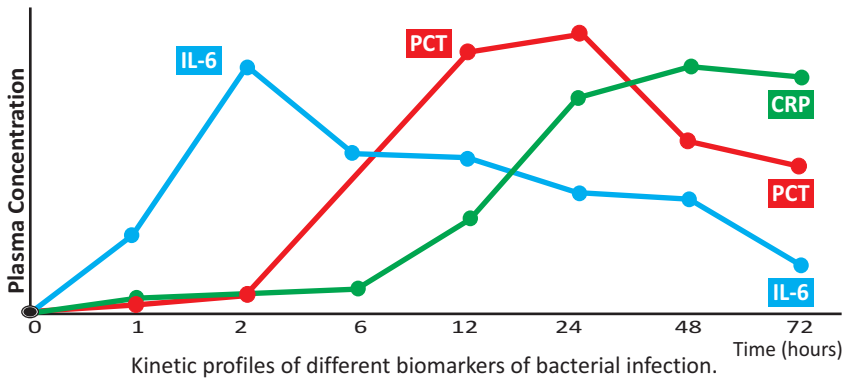


### Automated Semen Analysis

QwikCheck Gold Automatic Sperm Quality Analyzer is a state-of-the-art sperm quality analyzer capable of performing a complete quantitative evaluation of semen elements, including all basic and advanced analysis of parameters including Motility, Morphology and Vitality. This high-performance system incorporates electro-optics and computer algorithms to provide a precise and accurate automatic semen analysis.

## Basic Information on Common Health Challenges

### Inflammation / Sepsis Related Biomarkers



#### C-Reactive Protein (CRP)

C-Reactive Protein is a sensitive marker of inflammatory processes. An increase of CRP occurs in various infectious states, rheumatoid arthritis, myocardium infarct, malignant tumour, etc. More recently, the application of ultrasensitive or hs CRP assays to studies of adult cardiovascular disease has revealed important prognostic relationships between the modest increase of CRP and the occurrence, progression, and thrombo-occlusive complications atherosclerosis.

**Importance:** For Diagnosis and Monitoring of treatment of inflammatory disorders.

#### Procalcitonin (PCT)

Procalcitonin (PCT) is an early & specific test that becomes positive within 3-6 hours of infection & results of which are available in less than an hour. It is a useful test in differentiating between bacterial from viral infections and is of great help in starting & monitoring antibiotic therapy. Its level rises with increasing severity of the infection & returns to normal very early as the infection resolves. Due to better specificity, PCT has an advantage over established common markers for inflammation, i.e. CRP, ESR & TLC.

**Importance:** A specific marker for bacterial infection and sepsis.

#### Interleukin-6 (IL-6)

In vitro quantitative IL-6 estimation is used to manage critically ill patients as an early indicator for acute inflammation. Its production is rapidly induced in acute inflammatory reactions associated with injury, trauma, stress, infection, neoplasia, etc. It helps predict later complications or indicate missed injuries. Sequential measurement of IL-6 in patients admitted to ICU is useful in evaluating the severity of sepsis, septic shock, neonatal sepsis & to predict the outcome of these patients.

**Importance:** Another test for Diagnosis and Monitoring of treatment of inflammatory disorders.

#### D Dimer

Quantitative determination of fibrin degradation products (FDP) is performed to rule out deep vein thrombosis (DVT), Pulmonary embolism disease, & evaluation of acute MI, unstable angina & disseminated intravascular coagulation (DIC). Elevated D-dimer levels are also observed in conditions where activation of coagulation & fibrinolysis occurs (surgery, trauma, infection, inflammation, pregnancy & cancer). Elevated Plasma D Dimer level is also observed in nearly 40% of pregnant women with pre-eclampsia.

**Importance:** A specific marker for DVT, Pulmonary embolism disease, & evaluation of acute MI.

## Basic Information on Common Health Challenges

### Miscellaneous Concerns

#### Vitamin D Deficiency

##### Importance of VITAMIN D



Deficiency of Vitamin D is known to cause muscle weakness, Pains, Rickets, Osteoporosis and Osteomalacia. However, recent studies have established that its deficiency may also be associated with diseases of the Brain (Schizophrenia, Depression), Immune System (Type II diabetes, Multiple sclerosis, Rheumatoid arthritis, weakened response to fight tuberculosis, influenza and other diseases), Lungs (Asthma), Circulatory system (High blood pressure, Coronary heart disease, Paralytic Strokes) and Cancer (possibly associated with a variety of cancers, including colon, prostate and ovarian).

**Probable Cause:** Less exposure to SUNLIGHT due to life style changes & pollution

#### Vitamin B<sup>12</sup> Deficiency

##### Importance of VITAMIN B12



Data from recent studies suggest that a large number of adults have low Vitamin B12 levels. Symptoms of deficiency are Tingling in the Fingers and Toes, Pain in the legs, Chronic Fatigue, Forgetfulness, Confusion, Psychosis, Hallucinations, Tremors, Depression, Urinary Incontinence, Weight Loss and Shortness of Breath. These symptoms can also be confused with the normal ageing process and symptoms of other neurological diseases. Vitamin B-12 is mostly available only in animal foods: meat, fish, poultry, eggs, and dairy products. It is missed as most of us are not tested for it.

**Probable Cause:** Deficiency of Vitamin B12 in Indian diet which is primarily vegetarian.

#### Fecal Calprotectin

##### Irritable Bowel Syndrome

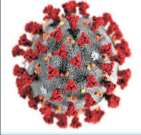


Fecal Calprotectin is a Stool Test for **Diagnosis & Monitoring of Inflammatory Bowel Disease**. Calprotectin is a calcium-binding protein found within neutrophils that influx into the bowel during inflammation. Calprotectin levels may be elevated in patients suffering from **INFLAMMATORY bowel diseases (IBD)** but not in non-inflammatory bowel diseases, e.g. **IRRITABLE bowel syndrome (IBS)**. This test is thus useful to differentiate between IBD & IBS & monitor IBD therapy & detect relapse.

**Important:** For differentiating between IBD & IBS and to monitor IBD therapy.

#### COVID Antibody Quantitative Test (Anti SARS-COV-2 S-Protein)

##### COVID Antibodies



This immunoassay is for the quantitative determination of antibodies (including IgG) to the SARS-CoV-2 spike (S) protein. Upon infection, exposure or vaccination, the host mounts an immune response against the virus, including the production of specific IgG and IgM antibodies against SARS-COV-2. These antibodies appear nearly simultaneously with strong neutralizing capacity directed against the RBD. **POSITIVE** Result indicates exposure, infection or vaccination leading to the body developing immune response. **NEGATIVE** Result DOES NOT entirely rule out the possibility of an infection with SARS-COV-2.

**Importance:** Becomes Positive 4-6 weeks after COVID 19 infection, vaccination or exposure.

Important :

All laboratory reports should be interpreted by PHYSICIAN/ TREATING PHYSICIAN, only who can integrate the pertinent information, such as age, circadian variation, ethnicity, health history, signs and symptoms and reports of other procedures (laboratory, imaging, endoscopy etc.) to determine health status. Significant Inter-Laboratory variation is observed because of differences in methodology & mode of standardisation. Such variation is more substantial and frequent in immunological tests, which use antibodies that may have different characteristics. We strongly DISCOURAGE SELF INTERPRETATION of LABORATORY report & self-medication.