



Labsmart Software Sample Letterhead

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<https://www.yourlabname.in/>**Mr. Saubhik Bhaumik**

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Referred by : Dr. Sachin Patil (MBBS)
Reg. no. : 1033



1033

Registered on : 07/11/2024 01:19 PM
Collected on : 07/11/2024
Received on : 07/11/2024
Reported on : 07/11/2024 01:19 PM

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**BIOCHEMISTRY**

TEST	VALUE	UNIT	REFERENCE
SERUM UREA	35	mg/dl	19 - 45

Urea is derived in the liver from amino acids and therefore from protein, whether originating from the diet or from tissues. The normal kidney can excrete large amounts of urea. If the rate of production exceeds the rate of clearance, plasma concentrations rise. The rate of production is accelerated by:

- a high-protein diet
- absorption of amino acids and peptides from digested blood after hemorrhage into the gastrointestinal lumen or soft tissues
- increased catabolism due to starvation, tissue damage, sepsis or steroid treatment.
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In catabolic states, glomerular function is often impaired due to circulatory factors and this contributes more to the uraemia than does increased production. Conversely, the plasma urea concentration may be lower than 1.0 mmol/L, the causes of which include the following:

Due to increased GFR or haemodilution	Due to decreased synthesis
Pregnancy	Use of amino acids for protein anabolism during growth, especially in children
Overenthusiastic intravenous infusion	Low protein intake, very severe liver disease
'Inappropriate' ADH secretion (SIADH)	Inborn errors of the urea cycle are rare and usually only occur in infants.

~~~ End of report ~~~

Mr. Sachin Sharma  
DMLT, Lab Incharge

Dr. A. K. Asthana  
MBBS, MD Pathologist

NOT VALID FOR MEDICO LEGAL PURPOSE

Work timings: Monday to Sunday, 8 am to 8 pm

Please correlate clinically. Although the test results are checked thoroughly, in case of any unexpected test results which could be due to machine error or typing error or any other reason please contact the lab immediately for a free evaluation.