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Mr. Saubhik Bhaumik

Age / Sex : 27 YRS / M

Referred by : Dr. Sachin Patil (MBBS)

Reg. no. : 1057

1057

Registered on : 11/11/2024 04:36 PM

Collected on : 11/11/2024
Received on : 11/11/2024

Reported on : 11/11/2024 04:36 PM



BIOCHEMISTRY

TEST	VALUE	UNIT	REFERENCE
25 HYDROXY (OH) VITAMIN D	45	ng/mL	30 - 100

Physiological Basis:

The vitamin D system functions to maintain serum calcium levels. Vitamin D is a fat-soluble steroid hormone. Two molecular forms exist: D3 (cholecalciferol), synthesized in the epidermis, and D2 (ergocalciferol), derived from plant sources. To become active, both need to be further metabolized. Two sequential hydroxylations occur: in the liver to 25(OH)D and then, in the kidney, to 1,25[OH] 2 D. Besides consequences for bone health, vitamin D deficiency reportedly is associated with a number of conditions such as cardiovascular disease, autoimmunity and cancer; however, evidence-based cause-and-effect relationships have not been established.

Interpretation

Increased in: Heavy milk drinkers (up to 64 ng/mL), vitamin D intoxication, sun exposure.

Decreased in: Dietary deficiency, malabsorption, rickets, osteomalacia, biliary and portal cirrhosis, nephrotic syndrome, renal failure, inadequate sun exposure, advanced age (> 70), primary hyperparathyroidism.

Drugs: Phenytoin, phenobarbital.

Comments:

Serum or plasma total 25(OH)D is an integrated marker of vitamin D status, incorporating endogenous synthesis from solar exposure, dietary intake, fortified products and/or supplements. There is no universal or strong evidence-based consensus on the appropriate level of 25(OH)D level. However, according to a 2011 US Institute of Medicine Report, a 25(OH)D level of 20–30 ng/mL is all that is needed for bone and general health, and nearly everyone (97.5%) in the general population is in that range. A 25(OH)D level above 30 ng/mL has not been consistently associated with increased health benefits, and, in fact, risks have been identified for outcomes at levels above 50 ng/mL. Routine screening for vitamin D deficiency is not necessary. Patients with the following conditions should be considered for testing: osteoporosis, osteomalacia, malabsorption, liver disease, pancreatic insufficiency, chronic kidney disease, COPD, bariatric surgery, cancer, bedridden or home-bound, obesity, taking anticonvulsants or long-term glucocorticoids, atraumatic fractures, elderly (> 70 years old), and chronic inflammatory conditions.

~~~ End of report ~~~

Mr. Sachin Sharma DMLT, Lab Incharge

Page 1 of 1

**Dr. A. K. Asthana** MBBS, MD Pathologist

#### NOT VALID FOR MEDICO LEGAL PURPOSE

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