



Labsmart Software

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

Age / Sex : 27 YRS / M
 Referred by : Dr. Sachin Patil (MBBS)
 Reg. no. : 1008



1008

Registered on : 17/10/2024 05:36 PM
 Collected on : 17/10/2024
 Received on : 17/10/2024
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BIOCHEMISTRY

IRON STUDIES

TEST	VALUE	UNIT	REFERENCE
IRON	167	µg/dl	65 - 175
UIBC Method: Calculated	L 109.00	µg/dl	155 - 355
TOTAL IRON BINDING CAPACITY (TIBC)	276	µg/dl	240 - 450
TRANSFERRIN SATURATION Method: Calculated	H 60.51	%	20 - 55

Physiological basis

Plasma iron concentration is determined by absorption from the intestine; storage in the intestine, liver, spleen, bone marrow, rate of breakdown or loss of hemoglobin, and rate of synthesis of new hemoglobin.

Interpretation for Iron (Fe), serum or plasma

Increased	Decreased
Hemosiderosis (eg, multiple transfusions, excess iron administration), acute Fe poisoning (children), hemolytic anemia, pernicious anemia, aplastic or hypoplastic anemia, viral hepatitis, lead poisoning, thalassemia, hemochromatosis. Drugs: estrogens, ethanol, oral contraceptives.	Iron deficiency, nephrotic syndrome, chronic renal failure, many infections, active hematopoiesis, remission of pernicious anemia, hypothyroidism, malignancy (carcinoma), postoperative state, kwashiorkor.

TIBC correlates with serum transferrin, but the relationship is not linear over a wide range of transferrin values and is disrupted in diseases affecting transferrin-binding capacity or other iron-binding proteins.

Increased in: Iron deficiency anemia, late pregnancy, infancy, acute hepatitis. Drugs: oral contraceptives.

Decreased in: Hypoproteinemic states (eg, nephrotic syndrome, starvation, malnutrition, cancer), hemochromatosis, thalassemia, hyperthyroidism, chronic infections, chronic inflammatory disorders, chronic liver disease, and other chronic diseases.

Increased % transferrin saturation with iron is seen in iron overload (iron poisoning, hemolytic anemia, sideroblastic anemia, thalassemia, hemochromatosis, pyridoxine deficiency, aplastic anemia, RBC transfusions).

Decreased % transferrin saturation with iron is seen in iron deficiency (usually saturation < 16%). It can also be used to assess nutritional status.

~~~ 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.