



LABORATORY REPORT

NAME : MR.BC0859 REFERRED BY : SELF VISIT NO : VAMP26147891  
AGE : 40Y 0M 0D ZERO TARIFF CLIENT CODE COLLECTED ON : 21-04-2026 10:00  
GENDER : Male LAB MR# : AAMP01479170 RECEIVED ON : 21-04-2026 19:51  
OP / IP / DG # : APPROVED ON : 22-04-2026 13:55  
REPORT STATUS : Final Report



Test Name	Result	Biological Ref. Interval	Unit
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Anemia Macrocytic Panel

BIOCHEMISTRY

Vitamin B12 (Serum)  
Vitamin B12 358.00 197-771 pg/mL  
ECLIA

**Interpretation:**  
Vitamin B12 also referred to as cobalamin is a water soluble vitamin. The uptake in the gastro intestinal track depends on intrinsic factor, which is synthesised by gastric parietal cells. Vit B12 deficiency results in megaloblastic anaemia, peripheral neuropathy, dementia and depression  
**Deficiency state can be due to** - Lack of intrinsic factor due to autoimmune atrophic gastritis, mal-absorption due to gastrostomy, Inflammatory bowel disease, dietary deficiency (strict vegans).  
**Increased levels can be due to** - VIT B12 supplement intake, polycythaemia Vera.

Folate (Folic Acid) (Serum)  
Folate (Folic Acid) 10.20 3.1 - 17.5 ng/mL  
ECLIA

**Interpretation:**  
Comments Folate plays an important role in the synthesis of purine & pyrimidines in the body and is important for the maturation of erythrocytes. It is widely available from plants and to a lesser extent organ meats, but more than half the folate content of food is lost during cooking. Folate deficiency is commonly prevalent in alcoholic liver disease, pregnancy and the elderly. It may result from poor intestinal absorption, nutrition deficiency, excessive demand as in pregnancy or in malignancy and in response to certain drugs like Methotrexate & anticonvulsants.  
**Decreased Levels**  
Megaloblastic anemia, Infantile hyperthyroidism, Alcoholism, Malnutrition, Scurvy, Liver disease, B12 deficiency, dietary amino acid excess, adult Celiac disease, Tropical Sprue, Crohn's disease, Hemolytic anemias, Carcinomas, Myelofibrosis, vitamin B6 deficiency, pregnancy, Whipple's disease, extensive intestinal resection and severe exfoliative dermatitis

*Sanjeeta*  
Dr. Sanjeeta  
MBBS,MD (Biochemistry)  
Consultant Biochemist

Disclaimer:  
1. All results released pertain to the specimen as received by the lab for testing and under the assumption that the patient indicated or identified on the bill/test requisition form is the owner of the specimen.





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2. Clinical details and consent forms, especially in Genetic testing, histopathology, as well as wherever applicable, are mandatory to be accompanied with the test requisition form. The non-availability of such information may lead to delay in reporting as well as misinterpretation of test results. The lab will not be responsible for any such delays or misinterpretations thereof.
3. Test results are dependent on the quality of the sample received by the lab. In case the samples are preprocessed elsewhere (e.g., paraffin blocks), results may be compromised.
4. Tests are performed as per the schedule given in the test listing and in any unforeseen circumstances, report delivery may be affected.
5. Test results may show inter-laboratory as well as intra-laboratory variations as per the acceptable norms.
6. Genetic reports as well as reports of other tests should be correlated with clinical details and other available test reports by a qualified medical practitioner. Genetic counselling is advised in genetic test reports by a qualified genetic counsellor, medical practitioner or both.
7. Samples will be discarded post processing after a specified period as per the laboratory's retention policy. Kindly get in touch with the lab for more information.
8. If accidental damage, loss, or destruction of the specimen is not attributable to any direct or negligent act or omission on the part of Ampath Labs or its employees, Ampath shall in no event be liable. Ampath lab's liability for a lack of services, or other mistakes and omissions, shall be restricted to the amount of the patient's payment for the pertinent laboratory services.

