

Patient NAME :  
 DOB/Age/Gender :  
 Patient ID / UHID :  
 Referred BY :  
 Sample Collected :

Report STATUS :  
 Barcode NO :  
 Sample Type :  
 Report Date :

Test Description	Value(s)	Unit(s)	Reference Range
------------------	----------	---------	-----------------

### #Pseudocholinesterase

Pseudocholinesterase, Serum <i>Colorimetric</i>	<b>805.00</b>	U/L	5320 - 12920
--	---------------	-----	--------------

Kindly correlate clinically.

#### Interpretation:

Remark	CHOLINESTERASE in U/L
Children, Men, Women (aged 40 years or more)	5320 - 12920
Women aged 16-39 years, not pregnant, not taking hormonal contraceptives	4260 - 11250
Women aged 18-41 years, pregnant or taking contraceptives	3650 - 9120

#### Comments:

Cholinesterase (pseudocholinesterase or cholinesterase II) is found in the liver, pancreas, heart, serum and in the white matter of the brain. This enzyme must not be confused with acetylcholinesterase from erythrocytes, which is also referred to as cholinesterase I.

The biological function of cholinesterase is unknown. Serum cholinesterase serves as an indicator of possible insecticide poisoning. It is measured as an index of liver function. In preoperative screening, cholinesterase is used to detect patients with atypical forms of the enzyme and hence avoid prolonged apnea caused by slow elimination of muscle relaxants.

Depressed cholinesterase levels are found in cases of intoxication with organophosphorus compounds and in hepatitis, cirrhosis, myocardial infarction, acute infections and atypical phenotypes of the enzyme.

#### Decreased levels

- Organophosphate poisoning
- Liver diseases like Acute hepatitis, Cirrhosis & Metastatic carcinoma to liver
- Malnutrition

NOTE- \*\*This test is processed at Redcliffe's partnered lab

\*\*\* End Of Report \*\*\*



Dr. Poulami Sarkar  
 MBBS, MD (Biochemistry)  
 Consultant Biochemist  
 NMC Certificate No. 24-005955

# Terms and Conditions of Reporting

1. The presented findings in the Reports are intended solely for informational and interpretational purposes by the referring physician or other qualified medical professionals possessing a comprehensive understanding of reporting units, reference ranges, and technological limitations. The laboratory shall not be held liable for any interpretation or misinterpretation of the results, nor for any consequential or incidental damages arising from such interpretation.
2. It is to be presumed that the tests performed pertain to the specimen/sample attributed to the Customer's name or identification. It is presumed that the verification particulars have been cleared out by the customer or his/her representation at the point of generation of said specimen / sample. It is hereby clarified that the reports furnished are restricted solely to the given specimen only.
3. It is to be noted that variations in results may occur between different laboratories and over time, even for the same parameter for the same Customer. The assays are performed and conducted in accordance with standard procedures, and the reported outcomes are contingent on the specific individual assay methods and equipment(s) used, as well as the quality of the received specimen.
4. This report shall not be deemed valid or admissible for any medico-legal purposes.
5. The Customers assume full responsibility for apprising the Company of any factors that may impact the test finding. These factors, among others, includes dietary intake, alcohol, or medication / drug(s) consumption, or fasting. This list of factors is only representative and not exhaustive.

---

## DISCLAIMER

This is a sample report provided for demonstration purposes only and does not represent an actual patient report. Test results, reference ranges, methodologies, instrumentation, and report formats may vary depending on the laboratory performing the test. The format and representation shown are indicative of reports generated by the National Reference Laboratory of Redcliffe Labs, Noida. This sample report should not be used for medical interpretation, diagnosis, or treatment decisions.