Sr.No	Tests	Information
1	24 hrs Protein	
2	75 gm GCT	This test is recommended in pregnant women at 24-28 weeks of gestation not previously diagnosed with overt Diabetes. A diagnosis of Gestational Diabetes mellitus is made if any one of the following value is exceeded: fasting is > 92 mg/dL, 1 hour is >180 mg/dL and 2 hour is >153 mg/dL.
3	ADA	This assay is useful for evaluation of severe combined Immunodeficiency syndrome and hemolytic anemia of obscure cause. ADA is increased in cases of tuberculosis in approximaterly 20% of cases.
4	Absolute eosinophil count (AEC)	Absolute eosinophil count is increased in parasitic infections, allergic or atopic disease, drug allergies, immunologic reactions, skin disorders, pulmonary syndromes, rheumatologic diseases, myeloproliferative neoplasms and secondary to other malignancies.
5	AFB	
6	AFB culture	
7	AFB- Urine	
8	Alfa Feto protein (AFP)	AFP is used as a prenatal screening test for open neural tube defects and to identify pregnancies that may have an increased risk for NTD and certain malignancies such as Yolk sac tumor.
9	Alkaline Phosphate (ALP)	Increased ALP levels are found in patients with biliary obstructive disorders, tumors of liver and bone etc.
10	Ammonia	Ammonia results from the metabolism of amino acids. The commonest cause of elevated blood ammonia is severe liver disease, Reye syndrome, and urinary tract abnormalities.
11	Amylase	This is a marker of pancreatic disease. Increased levels are noted in acute pancreatitis, and obstruction of pancreatic duct by stone / carcinoma.
12	ANA	
13	Anti CCP antibody	

14	APTT	APTT measures intrinsic and common pathways of the coagulation cascade. Prolonged APTT may be caused by heparin and other anticoagulants, factor deficiencies or inhibitors such as lupus anticoagulants.
15	Ascitic fluid R/M	
16	ASO	
17	Australia Antigen(HBsAg)	This assay is useful for the diagnosis of acute, recent and chronic Hepatitis B Virus infection.
18	B J Protein	
19	Beta HCG	
20	Bilirubin	
21	Blood Group	
22	Brucella Test	
23	BSL (F/PP/Random)	In a patient with excessive thirst or urination, always feeling hungry, fatigue etc. are symptoms indicating diabetes. Fasting and post prandial (2 hrs.) blood glucose levels along with Glycosylated Hb may be done.
24	BT CT	
25	C PEPTIDE	
26	CA-99	
27	CA-125	
28	Calcium	Calcium imbalance may cause a spectrum of diseases. Low levels can cause bone pains, osteoporosis & osteopinea. It can be caused due to vitamin D deficiency, kidney and parathyroid gland disorders, alcoholism and certain drugs. High concentrations can cause bone and muscle weakness, kidney stones, confusion and depression. It may be found in hyperparathyroidism, certain medications, malignancy and sarcoidosis.
29	CBC/Hb/ Platelate Count	CBC provides information abou the haemoglobin, morphology & counts of red cells, white cells and platelets. Results are useful in the diagnosis of anemia, infections, leukemias, clotting disorders and many other medical conditions.
30	CD 4 Count	

31	CD 4 / CD 8	
32	CEA	
33	Chikangunya	
34	Cholestrol	
35	Cholinesterase	
36	Coomb's Test Direct/Indirect	
37	Cardiac profile	Troponin T rises 2-4 hours after the onset of myocardial necrosis and remains elevated upto 14 days. It may also be used to monitor patients with non-ischemic causes of cardiac injury. CPK-MB fraction is predominantly found in cardiac muscle.
38	Creatinine	Creatinine is a fairly reliable indicator of kidney function. Elevated levels are observed in patients typically with kidney diseases.
39	Creatinine (Urine)	
40	CRP	C Reactive Protein (CRP) is the most sensitive acute phase reactant for inflammation. Elevated levels are noted after severe trauma, bacterial and viral(COVID) infectionS, autoimmune disorderS, and neoplastic diseases.
41	CSF Routine (Prot,Sug,Count,Gram, AFB)	
42	Culture (Blood)	
43	Culture (Pus)	
44	Culture (Semen)	
45	Culture (Urine)	
46	Culture (Vitek)	
47	Cytology	
48	Dengue (IGG/IGM)	
49	Electrophoresis	
50	Fluid routine	
51	FNAC	
52	GlycoHb	This assay is a better indicator for diagnosing diabetes and evaluating long term control of blood glucose concentrations in diabetic patients. It reflects the mean glucose concentration over the previous period of 8 to 12 weeks.

53	Gram Stain	
54	GTT	
55	HAV	
56	HCV	Hepatitis C Virus is the most common cause of Post transfusion hepatitis. HCV antibodies usually appear in the late convalescent stage >6 months after onset of infection. This assay is the screening test for resolved or chronic HCV.
57	HDL/LDL	
58	HEV	HEV causes an acute self limiting infection. Anti HEV IgG appears within a few days of infection and remains positive for several years. This assay is used for the diagnosis of past HEV infection.
59	HIV	HIV virus causes Acquired Immunodeficiency Syndrome (AIDS). EIA is a screening test for HIV infection with a sensitivity of >99.9%. As per NACO guidelines, all reactive samples are tested by three different methods prior to release of report. All reactive results must be confirmed with a Western Blot Test.
60	LDH	LDH is present in all cells of the body with highest concentrations in liver, heart, muscle, kidney, lung & erythrocytes. This assay is useful for investigating a variety of diseases involving these organs. It is also used to monitor changes in tumor burden after chemotherapy. As the LDH elevations in cancer are very erratic, it should not be used for the diagnosis of cancer.
61	LFT	This test panel assesses the functional activity of the liver. It is used for screening for liver damage, specially if someone has a condition or is taking a drug that may affect the liver.
62	LH, FSH, Prolactin	
63	Lipase	

64	Lipid Profile	Cardiovascular disease is the top cause of death leading to heart attacks and strokes, many in individuals who have no prior symptoms. Prevention of ischemic cardiovascular events is key. Risk factors including age, smoking status, hypertension, diabetes, cholesterol, and HDL cholesterol are used by physicians to identify individuals likely to have an ischemic event & to evaluate cardiovascular risk.
65	Magnessium	
66	Malarial Antigen test	
67	Malarial Parasite	
68	Microalbumin urea	
69	Montox Test	
70	Occuled blood	
71	Phosphorus	Phosphorus is a critical anion found mostly in bone and muscle. Multiple disorders specially affecting renal function can alter the phosphorus levels.
72	Procalcitonin	This assay is useful for diagnosis of bacteremia & septicemia in adults and children including neonates. It diagnoses renal involvement in urinary tract infections in children, bacterial infection in neutropenic patients & secondary infection post surgery. It helps in the differential diagnosis of bacterial versus viral meningitis and community acquired bacterial versus viral pneumonia. It is also used for monitoring therapeutic response to antibacterial therapy.
73	Protein Albumin	Total Protein is useful in evaluating patients for nutritional status, liver disease, protein losing renal and gastrointestinal diseases. High levels are seen in patients with Monoclonal gammopathies, Autoimmune hepatitis and inflammation. Albumin is synthsized in the liver and is thought to be a negative acute phase protein. It maintains osmotic pressure, microvascular integrity & inflammatory pathway. Decreased levels are seen in chronic debilitating diseases, liver disease, malnutrition etc. Increased albumin level is only seen during dehydration.

74	Prothombin Time (PTINR)	Prothrombin Time assesses the extrinsic and common coagulation pathway from Factor VIII through fibrin formation. Results are interpreted based on INR. A prolonged INR suggests a potential bleeding disorder or if on warfarin therapy, a potential for bleeding complications.
75	PSA	This assay is used for monitoring patients with a history of Prostate cancer and as an early indicator of recurrence and response to treatment. The test is commonly used for Prostate cancer screening.
76	PTH	
77	RA	Approximately 85% of patients with Rheumatoid arthritis have detectable RA. It may also be seen in other medical conditions like Sjogren's syndrome and SLE.
78	Retic Count	Reticulocyte counts are useful in assessing erythropoietic bone marrow activity in anemia and other hematological conditions. It is elevated with active erythropoiesis like regeneration and decreased in hypoplastic conditions or Vitamin B12 deficiency.
79	Rubell IGG/IGM	
80	Semen Analysis	This assay helps in determining male fertility status. Male infertility can be due to decrease in the number of viable sperms, abnormal sperm morphology and abnormalities of the seminal fluid.
81	SGOT	This enzyme is found in many organs including the liver. Though nonspecific, it is used to detect and monitor liver disease and other medical conditions. This is a more sensitive test in alcoholic liver disease than SGPT.
82	SGPT	This is an enzyme found mainly in liver tissue and to a lesser extent in heart, kidney and skeletal muscle. It's measurement is clinically useful in the diagnosis of liver and biliary disease.

83	Sodium,Potassium & Ionic Calcium	Sodium is critical in maintaining water and osmotic equilibrium in extracellular fluids. Disturbances in acid base and water balance are typically reflected in sodium concentrations. Potassium is an essential element involved in critical cell functions. Potassium levels are influenced by electrolyte intake, excretion and other means of elimination, exercise, hydration and medications. Ionized calcium provides a more physiologically accurate assessment of calcium especially in the presence of high protein concentrations, hyperparathyroidism and hypoparathyroidism.
84	Sputum R/M	
85	Stone Analysis	
86	Stool Analysis	This test is used to detect parasitic infections and the physical charcteristics of stool aid in the diagnosis of gastrointestinal infections.
87	T3, T4, TSH	Total thyroid hormone levels include the free as well as the bound form and hence may not reflect the active unbound form of the hormone which is directly related to thyroid dysfunction. Factors affecting the thyroid binding globulin will alter various parameters and may not be a true indicator of primary thyroid disease.
88	TB GOLD	
89	TBPCR	
90	Testosteron	This assay is useful for evaluation of men with signs and symptoms of possible Hypogonadism like loss of libido, erectile dysfunction, gynecomastia & infertility. It is also useful in evaluation of boys with delayed or precocious puberty. The assay can be used to monitor anti- androgen therapy as in prostate cancer, precocious puberty & male to female transgender disorders. It helps to evaluate infants with ambiguous genitalia or virilization. The assay can serve as an adjunct in the diagnosis of androgen secreting tumors.
91	Toxoplasmas	
92	Triglyceride	Increased triglyceride levels are indicative of metabolic abnormality and along with elevated cholesterol are considered a risk factor for atherosclerotic disease. High levels may be seen in Biliary obstruction, Diabetes, Nephrotic syndrome, Renal failure, Metabolic endocrinopathies and may be medication induced.

93	Urea	Urea is the end product of protein metabolism. It reflects on the functioning of the kidney in the body.
94	Uric acid	Uric Acid is the end product of protein metabolism. High levels are seen with Gout, inherited metabolic disorders of purine metabolism, excessive purine dietary intake and increased cell turnover. Only 10-15% patients with hyperuricemia have Gout.
95	Urine Fungus	
96	Urine Hemoglobin/ Myoglobin	
97	Urine R/M	Urine analysis is one of the most useful laboratory tests as it identifies a wide range of medical conditions including renal damage, urinary tract infections, diabetes, hypertension and drug toxicity.
98	Urine Pregnancy Test	
99	Urine 24 hr.	
100	Urine TBPCR	
101	Vitamin B12	Vitamin B12 is necessary for hematopoiesis and normal neuronal function. B12 deficiency may be due to lack of intrinsic factor secretion by gastric mucosa (gastrectomy, gastric atrophy) or intestinal malabsorption (ileal resection, small intestinal diseases) leading to Macrocytic anemia. This assay is useful for investigating Macrocytic anemia and as a workup of deficiencies seen in Megaloblastic anemia.
102	Vitamin D	The clinical syndrome of Vitamin D deficiency can be a result of deficient production in the skin, lack of dietary intake, accelerated losses, impaired vitamin D activation or resistance to the biologic effects of vitamin D. In addition intestinal malabsorption of dietary fat leads to Vitamin D deficiency which is further exacerbated in the presence of terminal ileal disease. Intestinal calcium absorption is also controlled by vitamin D.
103	Weil Flix	
104	Western Blot (HIV)	
105	Widal	Widal test is used to diagnose Typhoid and Paratyphoid fevers. A 4 fold rise in titer is diagnostic of infection.
106	SR. LITHIUM	