

### Client

### Gurugram

Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhyog Vihar Ph-IV, Gurugram - 122015

# Processed By Pathkind Diagnostics Pvt. Ltd.

Plot No. 55-56, Udhyog Vihar Ph-IV, Gurugram - 122015

ng/dl

Name : Mr. BC61 Billing Date 07/07/202312:16:10 : 35 Yrs Sample Collected on Age 10/07/2023 10:01:31 Sample Received on 10/07/2023 11:02:13 Sex : Male Report Released on P. ID No. : P1000100012537 20/07/2023 17:36:23 : 10002304593 Barcode No. 10002304593-01 Accession No

Referring Doctor: Self

Referred By Ref no.

## Report Status - Final

Test Name	Result	Biological Ref. Interval	Unit
	BIOCHEMISTRY	<u>′</u>	

# Aldosterone Sample: Serum Method: CLIA

Upright: 7.0 - 30.0 55.00 Supine: 3.0 - 16.0

## **Aldosterone**

### Comment

Aldosterone is the major mineralocorticoid produced by Adrenal cortex. The test is used for Investigation of Primary Aldosteronism (eg, Adrenal Adenoma/Carcinoma and Adrenal Cortical Hyperplasia) and Secondary Aldosteronism (Renovascular disease, salt depletion, potassium loading, Cardiac failure with ascites, Pregnancy, Bartter syndrome). Primary Aldosteronism (PA) is a common curable form of arterial hypertension characterized by low levels of plasma renin and high plasma levels of aldosterone.

## Categories of hypertensive patients who should be screened because of increased prior probability of Primary Aldosteronism

- 1. Drug-resistant hypertension
- 2. Systo-diastolic hypertension (BP >150/100 mm Hg confirmed in repeated measures)
- 3. Spontaneous or diuretic-induced hypokalemia
- 4. Incidentally discovered adrenal mass (incidentaloma)
- 5. Obstructive sleep apnea
- 6. Family history of PA and/or early onset hypertension or cerebrovascular accident at a young age
- 7. Unexplained atrial fibrillation
- 8. Evidence of hypertension-mediated organ damage (LVH, diastolic dysfunction, microalbuminuria,

Chronic Kidney Disease) in excess of what expected based on blood pressure values

Decreased levels with Hypertension	Decreased levels without Hypertension
• 11 beta hydroxylase deficiency	Addison's disease
• 17 alpha hydroxylase deficiency	Hyporeninemic hypoaldosteronism
Turner syndrome	Isolated Aldosterone deficiency
Diabetes Mellitus	

\*\* End of Report \*\*

Dr. Aarti Khanna Nagpal

DNB (Pathology) Senior Consultant

जांच सही तो इलाज सही





