

CUROFYX LAB

PATHOLOGY & DIAGNOSTICS



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Patient Name : Mr. SANJEET KUMAR Patient ID : HR25025000181
Age/Sex : 45 Years / Male Serial No : 8
Referred by Dr. : Mohit(M.B.B.S) Register On : 06-April-2026
Sample From : SURAJ DIAGNOSTIC Printed On : 23-April-2026
Lab ID :



Investigation	Observed Value	Unit	Biological Ref Range
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BIOCHEMISTRY

IRON PROFILE

IRON	78	ug/dl	37.00 - 45.00
TOTAL IRON BINDING CAPACITY	256	ug/dl	250.00 - 425.00
UIBC	178	mg/dl	12.00 - 566.00
TRANSFERRING SATURATION	30.47		13-45

Comment : Useful for screening for chronic iron overload diseases, particularly hereditary hemochromatosis. Serum iron, total iron-binding capacity, and percent saturation are widely used for the diagnosis of iron deficiency. However, serum ferritin is a much more sensitive and reliable test for demonstration of iron deficiency. Ingested iron is absorbed primarily from the intestinal tract and is temporarily stored in the mucosal cells as Fe(III)-FERRITIN. Ferritin provides a soluble protein shell to encapsulate a complex of insoluble ferric hydroxide-ferric phosphate. On demand, iron is released into the blood by mechanisms that are not clearly understood, to be transported as Fe(III) transferrin. Transferrin is the primary plasma iron transport protein, which binds iron strongly at physiological pH. Transferrin is generally only 25% to 30% saturated with iron. The additional amount of iron that can be bound is the unsaturated iron-binding capacity (UIBC). The total iron binding capacity (TIBC) can be indirectly determined using the sum of the serum iron and UIBC. Knowing the molecular weight of the transferrin and that each molecule of transferrin can bind 2 atoms of iron, TIBC and transferrin concentration is interconvertible. Percent saturation is usually normal or increased in persons who are iron deficient, pregnant, or are taking oral iron supplements. Persons with chronic inflammatory processes, hemochromatosis, or malabsorptions generally display low transferrin. In hereditary hemochromatosis, serum iron is usually >150 ug/dl and percent saturation is >60%. In advanced iron overload states, the percent saturation often >90%.
Caution: Measurement of serum iron, iron-binding capacity, and percent saturation should not be used as a test for iron deficiency. It is often unreliable for this purpose.

** END OF REPORT **



Lab. Technician (DMLT AUS)
DMLT AUS
Lab. Technician

All results should be correlated clinically. If results are alarming or unexpected, contact the laboratory immediately.
Not valid for Medico-Legal. Results pertain to the specimen submitted.