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# ThankQ Diagnostics

Accurate | Reliable | Affordable

**Mr ADITYA PANDEY**

Age : 22 Years

Sex : Male

UHID : UHID 9409



**Sample Collected At:**

Ref. By : **Dr. CHAUHAN**  
**CLINIC WAJIDPUR,**  
**SEC-135**



13015L44033

Registered : 27 Sep 2025 11:55 AM

Collected : 27 Sep 2025 12:01 PM

Reported : 27 Sep 2025 12:56 PM

## Haematology

Test	Result	Ref. Value	Unit
<b>CBC with Absolute Count</b>			
<b>HEMOGLOBIN</b>			
Hemoglobin (Hb) <small>Photometry</small>	15.32	13.00 - 17.00	g/dL
Hemoglobin % <small>Photometry</small>	90.12	0 - 100 Based on 17=100%	%
<b>RBC COUNT</b>			
Total RBC Count <small>Electrical Impedance</small>	4.85	4.04 - 5.68	millions/cumm
<b>BLOOD INDICES</b>			
Packed Cell Volume (PCV) <small>Derived Parameter</small>	42.70	40.7 - 50.3	%
Mean Corpuscular Volume(MCV) <small>Electrical Impedance</small>	88.04	82.50 - 98.00	fL
Mean Corpuscular Hemoglobin (MCH) <small>Derived Parameter</small>	31.59	27.00 - 33.00	pg
Mean Corpuscular Hemoglobin Concentration (MCHC) <small>Derived Parameter</small>	<b>35.88</b>	<b>High</b> 32 - 35.50	g/dL
Red Cell Distribution Width(RDW-CV) <small>Electrical Impedance</small>	12.90	11.60 - 14.00	%
Red Cell Distribution Width(RDW-SD) <small>Derived Parameter</small>	39.30	39.00 - 46.00	fL
<b>WBC COUNT</b>			
Total WBC Count <small>Electrical Impedance</small>	<b>3080</b>	<b>Low</b> 4000 - 10500	/cumm
<b>DIFFERENTIAL WBC COUNT</b>			
Neutrophils <small>Optical/Impedance</small>	<b>38.98</b>	<b>Low</b> 40 - 80	%

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Test	Result		Ref. Value	Unit
Lymphocytes <small>Optical/Impedance</small>	<b>44.12</b>	<b>High</b>	20 - 40	%
Eosinophils <small>Optical/Impedance</small>	<b>0.62</b>	<b>Low</b>	1 - 6	%
Monocytes <small>Optical/Impedance</small>	<b>15.55</b>	<b>High</b>	1 - 8	%
Basophils <small>Optical/Impedance</small>	0.73		0 - 1	%
<b>ABSOLUTE WBC COUNT</b>				
Absolute Neutrophil Count <small>Optical/Impedance</small>	<b>1.20</b>	<b>Low</b>	2.00 - 7.50	thou/mm3
Absolute Lymphocyte Count <small>Optical/Impedance</small>	1.36		1.00 - 4.00	thou/mm3
Absolute Eosinophil Count <small>Optical/Impedance</small>	0.02		0.02 - 0.50	thou/mm3
Absolute Monocyte Count <small>Optical/Impedance</small>	0.48		0.20 - 1.00	thou/mm3
Absolute Basophil Count <small>Optical/Impedance</small>	0.02		0.02 - 0.20	thou/mm3
<b>PLATELET COUNT</b>				
Platelet Count <small>Electrical Impedance &amp; Light Microscopy</small>	1.79		1.50 - 4.50	lakhs/cumm
Mean Platelet Volume (MPV) <small>Optical/Impedance</small>	<b>8.61</b>	<b>Low</b>	8.9 - 10.8	fL

- **Performed on:** DxH 500; 5-Part Differential Cell Counter (BECKMAN COULTER)
- Please correlate clinically

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## Serology

Test	Result	Ref. Value	Unit
WIDAL TEST (Slide agglutination) Method: Slide Agglutination	NEGATIVE		

Salmonella typhi O (TO)	Reactive up to 1:80	
Salmonella typhi H (TH)	Reactive up to 1:40	
Salmonella paratyphi A, H (AH)	No reactive	
Salmonella paratyphi B, H (BH)	No reactive	
Widal Impression	NEGATIVE	NEGATIVE

### Note:

1. Titres  $\geq 1:80$  of "O" antigen &  $\geq 1:160$  of "H" antigen for Salmonella typhi and titres  $\geq 1:80$  of "H" antigen for Salmonella paratyphi A & B are significant.
2. Reactive results indicates ongoing or recent infection by Salmonella spp. and the diagnosis should be confirmed by gold standard test such as Blood culture prior to start of antibiotics.
3. The reactivity will vary with stage of the disease with appearance in 1st week to increase in titres till end of 4th week post which it starts decreasing.
4. Antibiotic treatment during 1st week before the appearance of antibodies tend to suppress the immune response in the form of no or decreasing antibody levels.
5. False positive results/anamnestic response may be seen in patients with past enteric infection during unrelated fevers like Malaria, Influenzae in the form of transient rise in H antibody in Widal test.
6. False negative results may be due to processing of sample collected early in the course of disease (1st week) and immunosuppression.

**Clinical uses:** 1. To diagnose infection due to Salmonella spp. (Enteric fever). 2. To monitor the progression of disease.



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Test	Result	Ref. Value	Unit
Dengue Fever Antigen NS1 Method: ICT and Immunofluorescence assay (IFA)	NEGATIVE(0.92 )	NEGATIVE	

### Dengue NS1 by Fluorescent Immunoassay(FIA) :

**Dengue NS1Ag Result: 0.92 (NEGATIVE)**

#### Bio. Reference Range:

Negative- <1COI

Equivocal- =1COI

Positive- >1COI

**Adv: Dengue IgM by Elisa and clinical correlation**

#### Interpretation :

RESULT IN INDEX	REMARKS
Negative (<0.90)	No detectable Dengue NS1 antigen. The Result does not rule out Dengue infection. An additional sample should be tested for IgG & IgM serology in 7-14 days.
Equivocal (0.90 - 1.10)	Repeat sample after 1 week
Positive (>1.10)	Presence of detectable dengue NS1 antigen. Dengue IgG & IgM serology assay should be performed on follow up samples after 5-7 days of onset of fever, to confirm dengue infection.

#### Note :

Recommended test is NS1 Antigen by ELISA in the first 5 days of fever. After 7-10 days of fever, the recommended test is Dengue fever antibodies IgG & IgM by ELISA

#### Comments :

Dengue viruses belong to the family Flaviviridae and have 4 subtypes (1-4). Dengue virus is transmitted by the mosquito Aedes aegypti and Aedes albopictus, widely distributed in Tropical and Subtropical areas of the world. Dengue is considered to be the most important arthropod borne viral disease due to the human morbidity and mortality it causes. The



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disease may be subclinical, self limiting, febrile or may progress to a severe form of Dengue hemorrhagic fever or Dengue shock syndrome



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Test	Result	Ref. Value	Unit
Erythrocyte Sedimentation Rate (ESR) <small>Method: Westergren tube method</small>	03	00 - 10	mm/hr

**COMMENT:** An erythrocyte sedimentation rate (ESR) is a type of blood test that measures how quickly erythrocytes (red blood cells) settle at the bottom of a test tube that contains a blood sample. Normally, red blood cells settle relatively slowly. A faster-than-normal rate may indicate inflammation in the body.

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Test	Result	Ref. Value	Unit
Malaria Parasite (Microscopic) <small>Method: ICT and Light microscopy</small>	NOT SEEN IN THE SMEAR EXAMINED.	NOT SEEN	

**Note:** A normal test is negative, meaning that you don't have any Plasmodium parasites in your blood. A positive result means that you have the parasites in your blood and that you may have malaria.

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