

TEST REPORT

Patient: MR. TRIJUGEE NARAYAN SHUKLA

Age / Gender : 68 Y / Male

Ref. By : DR. A. GUPTA, MBBS

Associate : SRN DIAGNOSTICS INDORE

Reg. No. : 2108119998

Reg. Date : 27-Aug-2021

Report Date : 27-Aug-2021

Laboratory

COMPLETE BLOOD COUNT (CBC)

Parameter	Observed Value	Unit	Biological Reference Interval
Hemoglobin	10.0	g/dL	13.0 - 17.0
RBC Count	3.66	million/cmm	4.6 - 6.2
Hematrocrit	30.1	%	40 - 54
MCV	82.3	fL	80 - 96
MCH	27.3	Pg	27 - 33
MCHC	33.2	%	32 - 36
RDW- CV	13.7	%	11 - 16
RDW-SD	48.2	fL	35 - 56
PLATELET COUNT	116	10³/μL	150 - 410
MPV	10.4	fL	6.5 - 12.0
PDW	26.3		25.0 - 65.0
PCT	1.21	%	0.108 - 0.282
TOTAL COUNT (WBC), EDTA bl	lood 4.61	10³/μL	4.0 - 10.0
DIFFERENTIAL WBC COUNT (N	Manual By Microscopy)		
Neutrophils (%)	75	%	38 - 70
Lymphocytes (%)	20	%	20 - 45
Monocytes (%)	03	%	2 - 8
Eosinophils (%)	02	%	1 - 4
Basophils (%)	00	%	0 - 1
Neutrophils (Abs)	3.64	$10^3/\mu$ L	
Lymphocytes (Abs)	0.78	10³/μL	
Monocytes (Abs)	0.16	10³/μL	
Eosinophils (Abs)	0.00	10³/μL	
Basophils (Abs)	0.03	/cmm	

Interpretation : The test is done on fully automated 5 PART cell counter of 'Mindray BC 5300'Specimen : WB-EDTA

------ End of Report -----



Dr. Ramu Thakur MD (PATHOLOGIST)

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DENGUE PROFILE AG.NS1 & AB.IGG&IgM

Parameter	Observed Value	Unit	Biological Reference Interval
NS 1 ANTIGEN, Serum	Negative		Negative
DENGUE - G	Negative		Negative
DENGUE - M	Negative		Negative
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PROTHROMBIN TIME

Specimen: Citrate plsma

Parameter	Observed Value	Unit	Biological Reference Interval
Prothrombin Time Test	22.14	Seconds	12 - 16
FULLY AUTOMATED COGULA	ATION ANALYSER STA Compact Ma	ax®	
CONTROL (MNPT)	14	Seconds	
INR	1.77		

INR is a ratio of patient's PT to mean of PT for the laboratory raised to the power of the International Sensitivity Index. For patients on anticoagulant therapy for treatment or prophylaxis of venous thrombosis or pulmonary or systemic embolus, Suggested INR range is 2.0-3.0. For High risk patients with mechanical heart valves, Suggested INR range is 2.5-3.5.PT is a very sensitive parameter. If it does not correlate with clinical history, repeat sample is advisable with new fresh sample.

------ End of Report ------



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