



KAILASH HEALTHCARE

KAILASH HOSPITAL & HEART INSTITUTE

(A UNIT OF KAILASH HEALTHCARE LTD.)

325 Beds Super Speciality (NABH & NABL ACCREDITED)

H-33, SECTOR - 27, NOIDA - 201301

Phones : 0120 - 2 44 44 44, 2 46 66 66 & 2466+Extn Fax : 0120 - 2 53 33 33

**O-0013****LAB REPORT**

UHID : 2416236	No.: LAB/18N/23843	Date: 23/May/2018
Name : Ms. SHIVANGI DWIVEDI	Request Number : 12561825	Status:
Sex : F Age : 18 YEARS 2 MONTHS	Registered : 23/May/2018	06:33:00AM
Referred By : Dr.D.K. SHARMA	Sample Collected : 23/May/2018	06:36:00AM
Collected At : Lab	Reported : 23/May/2018	09:39:00AM

Investigation	Result	Unit	Biological Ref Interval
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COMPLETE BLOOD COUNT (CBC)_N

(EDTA Whole Blood)

COMPLETE BLOOD COUNT

HAEMOGLOBIN	: <u>11.7</u>	g/dl	12.0 - 15.0
SLS Hemoglobin Method			
PACKED CELL VOLUME (PCV)	: 37.4	%	36 - 46
RBC pulse height detection method			
R.B.C. Count	: 4.50	x10 ¹² /l	3.8 - 4.8
Hydro Dynamic Focusing (DC Detection)			
MCV	: 83.1	fL	83 -101
Electrical Impedence			
MCH	: <u>26.0</u>	pg	27 - 32
[Calculated]			
MCHC	: <u>31.3</u>	g/dl	31.5 - 34.5
[Calculated]			
RDW	: <u>20.4</u>	%	11.60 - 14.0
RBC Histogram - electrical impedance			
nRBC	: 0.0	%	
TOTAL LEUCOCYTE COUNT	: 8.10	x10 ⁹ /l	4.0 - 10.0
Hydro Dynamic Focusing (DC Detection)			
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHILS	: 44.9	%	40 - 80
LYMPHOCYTES	: 39.8	%	20 - 40
MONOCYTES	: 5.8	%	02 - 10
EOSINOPHILS	: <u>8.9</u>	%	01 - 06
BASOPHILS	: 0.6	%	00 - 01
ABSOLUTE LEUCOCYTE COUNT			
NEUTROPHILS	: 3.64	x10 ⁹ /l	2 - 7
LYMPHOCYTE	: <u>3.22</u>	x10 ⁹ /l	1.0 - 3.0
MONOCYTE	: 0.47	x10 ⁹ /l	0.2 - 1.0
EOSINOPHILS	: <u>0.72</u>	x10 ⁹ /l	0.02 - 0.5
Flow Cytometry/Hydrodynamic Focusing			
BASOPHIL	: 0.05	x10 ⁹ /l	0.02 -0.1
PLATELET COUNT	: 217	x10 ⁹ /l	150 - 410
Hydro Dynamic Focusing (DC Detection)			

TSH (THYROID STIMULATING HORMONE)

(SERUM)

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HEALTH CARE PAR EXCELLENCE

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**O-0013****LAB REPORT**

UHID	:	2416236	No.:	LAB/18N/23843	Date:	23/May/2018
Name	:	Ms. SHIVANGI DWIVEDI	Request Number	:	12561825	Status:
Sex : F	Age :	18 YEARS 2 MONTHS	Registered	:	23/May/2018	06:33:00AM
Referred By	:	Dr.D.K. SHARMA	Sample Collected	:	23/May/2018	06:36:00AM
Collected At	:	Lab	Reported	:	23/May/2018	10:01:00AM

Investigation	Result	Unit	Biological Ref Interval
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THYROID STIMULATING HORMONE (TSH)	:3.09	uIU/ml	
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Electrochemilluminescence

Normal term Infant:1.3-19.0 uIU/ml

10 Week :0.6-10.0 uIU/ml

14 Months :0.4-7.0 uIU/ml

2-16 Years :0.2-6.0 uIU/m

Adult Male :0.27-5.5 uIU/ml

Adult Female :0.27-5.5 uIU/ml

Pregnant Female

1st Trimester :0.24-2.99 uIU/ml

2nd Trimester :0.46-2.95 uIU/ml

3rd Trimester :0.43-2.78 uIU/ml

Increased levels are seen in Primary hypothyroidism, TSH dependent hyperthyroidism, sub-clinical Hypothyroidism and Thyroid Hormone Resistance. Decreased levels are seen in Hyperthyroidism, Grave's disease.

SERUM FERRITIN

(SERUM)

SERUM FERRITIN	: <u>13.1</u>	ng/mL	18 - 160
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Electrochemilluminescence

Comments :

Suggested Reference Ranges in ng/mL

Group :	Ref. Range	Units
Children (New borns)	25.0 - 200.0	ng/mL
Children (1 month)	200.0 - 600.0	ng/mL
Children (2-5 months)	50.0 - 200.0	ng/mL
Children (6 months-15 yrs)	7.0 - 142.0	ng/mL
Adult males (18-30 yrs.)	18.7 - 323.0	ng/mL
Adult males (31-60 yrs.)	16.4 - 293.9	ng/mL
Adult Female	15.0 - 200.0	ng/mL
Premenopausal	6.9 - 282.5	ng/mL
Postmenopausal	14.0 - 233.1	ng/mL

Ferritin levels below 10 ng/ mL have been reported as indicative of iron deficiency anemia. There are patients with iron deficiency anaemia who have elevated or normal

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Referred By	:	Dr.D.K. SHARMA	Sample Collected	:	23/May/2018	06:36:00AM	
Collected At	:	Lab	Reported	:	23/May/2018	12:04:00PM	

Investigation	Result	Unit	Biological Ref Interval
ferritin levels because of other causes, eg., Hapatocellular disease of iron therapy.			

IGE LEVEL

(SERUM)

SERUM IgE LEVELS	:	621.3	Iu/mL	< 100
Electrochemiluminescence				

Interpretation:

IgE plays an important role in immunological protection against parasitic infections and in allergy. The IgE concentration is age - dependent. Elevated levels can be found in patients with allergic diseases such as hay fever, atopic bronchitis and dermatitis. Normal IgE value do not, however, mean that an allergic clinical differentiation between atopic and nonatopic diseases is only in combination with other clinical findings. Elevated serum IgE concentrations can also occur in non-allergic diseases, e.g bronchopulmonary aspergillosis, Wiskott-Aldrich syndrome, hyper-IgE syndrome, IgE myeloma, and parasitic infections.

Dr. Ritu Vohra M.D.

Dr. Archana Aggarwal

Dr. Saloni Sehgal, M.D.

Group Director

M.D.

Microbiologist

Lab Medicine

Pathologist

Head Of Department

NOTE : - * If the result of the test is alarming or unexpected ,the patient is advised to contact the Laboratory immediately.

* The lab report is not the diagnosis , it represents only an opinion. Kindly contact your doctor for interpretation,

diagnosis and treatment. Not valid for medico legal purposes.

* Report is electronically validated.

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

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