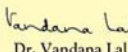


S47 - RADHA DIAGNOSTICS
G.T.ROAD, JHUNSI, AWAS VIKAS COLONY,
YOJNA-2, NR POLICE CHOWKI, ALLAHABAD,
UP


(Hony) Brig. Dr. Arvind Lal
M.B.B.S., D.C.P.
Padmaj Shri
FMR HONORARY PHYSICIAN TO THE PRESIDENT OF INDIA


Dr. Vandana Lal
M.D (PATH), IFCAP
Chief of Pathology
SHROMANI AWARD WINNER

Name	: Mr. NEERAJ OJHA	Collected	: 1/8/2017 8:21:00AM
Lab No.	: 242862201	Received	: 1/8/2017 8:37:03AM
Age: 27 Years	Gender: Male	Reported	: 1/8/2017 6:52:30PM
A/c Status : P	Ref By : Dr. V. K. PANDEY	Report Status	: Final

Test Name	Results	Units	Bio. Ref. Interval
COMPLETE BLOOD COUNT (CBC)			
Hemoglobin	12.00	g/dL	13.00 - 17.00
Packed Cell Volume (PCV)	37.70	%	40.00 - 50.00
RBC Count	5.79	mill/mm3	4.50 - 5.50
MCV	65.00	fL	80.00 - 100.00
MCH	20.70	pg	27.00 - 32.00
MCHC	31.90	g/dL	32.00 - 35.00
Red Cell Distribution Width (RDW)	15.90	%	11.50 - 14.50
Total Leukocyte Count (TLC)	4.20	thou/mm3	4.00 - 10.00
Differential Leucocyte Count (DLC)			
Segmented Neutrophils	39.60	%	40.00 - 80.00
Lymphocytes	50.30	%	20.00 - 40.00
Monocytes	8.10	%	2.00 - 10.00
Eosinophils	1.40	%	1.00 - 6.00
Basophils	0.60	%	<2.00
Absolute Leucocyte Count			
Neutrophils	1.66	thou/mm3	2.00 - 7.00
Lymphocytes	2.11	thou/mm3	1.00 - 3.00
Monocytes	0.34	thou/mm3	0.20 - 1.00
Eosinophils	0.06	thou/mm3	0.02 - 0.50
Basophils	0.03	thou/mm3	0.01 - 0.10
Platelet Count	245.0	thou/mm3	150.00 - 450.00

Advised: Hb HPLC to rule out Thalassemia Minor

Note

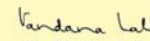
1. As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood

2. Test conducted on EDTA whole blood



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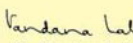
Test Name	Results	Units	Bio. Ref. Interval
MALARIA PARASITE / BLOOD PARASITE IDENTIFICATION (Microscopy)	No MP seen in smears examined.		

Note: A Single negative smear does not rule out malaria



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		Report Status	: Final

Test Name	Results	Units	Bio. Ref. Interval
ALT (SGPT), SERUM (IFCC)	127	U/L	<50

WIDAL TEST, SERUM (Slide Agglutination)

Salmonella typhi O (TO)	Non Reactive
Salmonella typhi H (TH)	Non Reactive
Salmonella paratyphi A, H (AH)	Non Reactive
Salmonella paratyphi B, H (BH)	Non Reactive

Note: 1. Titres 1:80 and above of "O" antigen & 1:160 and above of "H" antigen are significant
2. Rising titres are significant
3. The recommended Widal test is by Tube Agglutination Method

Comments

This test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli. The agglutinins usually appear at the end of the first week of infection and increase steadily till third / fourth week after which the decline starts. A positive Widal test may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases. Non specific febrile disease may cause this titre to increase (anamnestic reaction). The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages. The recommended test specially in the first week after infection is Blood Culture.

BILIRUBIN, TOTAL, SERUM (DPD)	1.90	mg/dL	0.30 - 1.20
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Dr. Rakhee Tiwari
MBBS, MD(PATH)
Chief of Lab

-----End of report -----

