

NAME : MR. PRASANTH
PIN : AND251P0000214
AGE/GENDER : 22 Year(s)/Male
REFERRED BY : Dr.ADVANCED GROHAIR & GLOSKIN
CLINIC - SALIGRAMAM
CLIENT NAME : ADVANCED GROHAIR & GLOSKIN
CLINIC - SALIGRAMAM



SAMPLE NO : 1P2500272
COLLECTED ON : 04/11/2025 08:47 PM
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HAEMATOLOGY

ADVANCED GROHAIR & GLOSKIN CLINIC PACKAGE - 1

Complete Hemogram

WBC PARAMETER (EDTA Whole Blood,Flow Cytometry)

| | | | |
|-----------------------|------|-----------------|------------|
| Total WBC Count (TC) | 6610 | cells/cu.m m | 4000-11000 |
|-----------------------|------|-----------------|------------|

DIFFERENTIAL COUNTS (EDTA Whole Blood,Flow Cytometry)

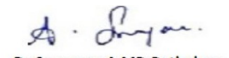
| | | | |
|-------------|------|---|-------|
| Band Forms | 00 | | |
| Neutrophils | 47.7 | % | 40-70 |
| Lymphocytes | 40.6 | % | 20-40 |
| Eosinophils | 4.2 | % | 1-6 |
| Monocytes | 7.0 | % | 2-10 |
| Basophils | 0.5 | % | 0-1 |
| IMG % | 0.9 | % | < 1.0 |

ABSOLUTE COUNT (EDTA Whole Blood,Flow Cytometry)

| | | | |
|---------------|------|----------------------|-----------|
| NEUTROPHILS # | 3.16 | 10 ³ / µl | 2.00-7.00 |
| LYMPHOCYTES # | 2.68 | 10 ³ / µl | 0.80-4.00 |
| MONOCYTES # | 0.46 | 10 ³ / µl | 0.12-1.20 |
| EOSINOPHILS # | 0.28 | 10 ³ / µl | 0.02-0.50 |
| BASOPHILS # | 0.03 | 10 ³ / µl | 0.00-0.10 |
| IMG # | 0.06 | 10 ³ / µl | |

RBC PARAMETERS

| | | | |
|--|------|------------|-----------|
| RBC Count (EDTA Whole Blood,Electrical impedance) | 5.62 | mill/cu.mm | 4.7-6.0 |
| RDW - CV (EDTA Whole Blood,Calculated) | 13.0 | % | 11.5-15.4 |
| RDW - SD (EDTA Whole Blood,Calculated) | 41.7 | fl | 40-55 |
| Haemoglobin (EDTA Whole Blood,Colorimetric Method) | 15.5 | gm/dL | 13-17 |


Dr Sarangan A MD Pathology
Consultant Pathology
Reg. No. : 84981

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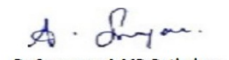


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| Packed Cell Volume (PCV) (EDTA Whole Blood,Calculated) | 48.6 | % | 42-52 |
| Mean Corpuscular Volume (MCV) (EDTA Whole Blood,Calculated) | 86.5 | fL | 83-101 |
| Mean Corpuscular Hb (MCH) (EDTA Whole Blood,Calculated) | 27.5 | pg | 27-32 |
| Mean Corpuscular Hb Conc. (MCHC) (EDTA Whole Blood,Calculated) | 31.9 | % | 30-35 |

PLATELET PARAMETERS

| | | | |
|--|------|----------------------|---|
| Platelet Count (EDTA Whole Blood,Electrical Impedence /Manual) | 243 | Thousand/c u.mm | 150-450 |
| MPV (EDTA Whole Blood,Calculated) | 9.1 | fL | 9.0-12.5 |
| PDW (EDTA Whole Blood,Calculated) | 16.5 | % | 9.4-16.0 |
| PCT (EDTA Whole Blood,Calculated) | 2.21 | mL/L | 1.08-2.82 |
| P - LCC (EDTA Whole Blood,Calculated) | 51 | 10 ³ / µl | 30-90 |
| P -LCR (EDTA Whole Blood,Calculated) | 20.9 | % | 15-45 |
| NRBC % (EDTA Whole Blood,Flow Cytometry) | 0.00 | /100WBC | Children : 0/100 WBC Adults : 0 /100 WBC |
| ESR - Erythrocyte Sedimentation Rate (2 Photometric Method) | | mm/hr | 0-15 |


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BIOCHEMISTRY

HbA1c-Glycated Haemoglobin, blood

| | | | |
|--|-----|---|--|
| HbA1c-Glycated Haemoglobin, blood (EDTA Whole Blood,HPLC) | 5.6 | % | Non-diabetic : <= 5.6 Pre-diabetic : 5.7 - 6.4 Diabetic : >= 6.5 |
|--|-----|---|--|

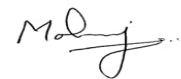
| | | | |
|---|-----|-------|--|
| Estimated average glucose (eAG) (EDTA Whole Blood,Calculated) | 114 | mg/dL | |
|---|-----|-------|--|

Comments:

HbA1c is an excellent index of long term diabetes control over preceding 2 - 3 months. Unlike blood sugar which tend to fluctuate from day to day and even hour to hour, the HbA1c test is a true index of the average blood glucose control during previous 2 - 3 months.

False high or low HbA1c values can be due to the presence of Hb variants

REPORT SHEET


Mr.N.MOHAN RAJ
BIOCHEMIST

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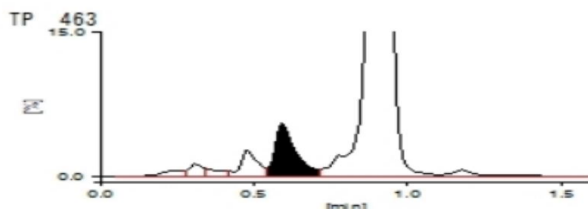
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Chromatogram Report

G8 V5.29 2025-11-04 23:49:23
ID 411P2500272
Sample No. 11040149 SL 0001 - 01
Patient ID
Name
Comment

| GALIB | | | |
|----------------------|------|------|--------|
| Y = 1.1234X + 0.8273 | | | |
| Name | % | Time | Area |
| A1A | 0.5 | 0.23 | 5.36 |
| A1B | 0.6 | 0.31 | 6.08 |
| F | 0.5 | 0.39 | 4.91 |
| LA1C+ | 1.7 | 0.48 | 17.31 |
| SA1C | 5.6 | 0.59 | 42.02 |
| A0 | 93.0 | 0.90 | 937.00 |
| H-V0 | | | |
| H-V1 | | | |
| H-V2 | | | |

Total Area 1012.68
HbA1c 5.6 % IFCC 38 mmol/mol
HbA1 6.7 % HbF 0.5 %



04-11-2025 23:49:24 ADMIN

1 / 1



ANDERSON DIAGNOSTICS AND LABS
NO38 (159) GREAMS ROAD THOUSAND LIGHTS WEST
CHENNAI-600006

Mr. N. Mohan Raj
Mr. N. MOHAN RAJ
BIOCHEMIST

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| IMMUNOASSAY | | | |
| Thyroid Profile | | | |
| T3 Total (SERUM) | 116 | ng/dL | 80-200 |
| T4 Total (SERUM,ECLIA) | 7.67 | ug/dl | 4.6-12.0 |
| Free T3 (SERUM,ECLIA) | 3.70 | Pg/mL | 2.7-4.3 |
| Free T4 (SERUM,ECLIA) | 1.54 | ng/dL | 1.0-1.7 |
| TSH (SERUM,ECLIA) | 2.03 | μIU/mL | 0.27-5.35 |

REPORT SHEET

T. Vijay

Ms.T VIJAYALAKSHMI MSc
BIO CHEMIST

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SEROLOGY

| | | | |
|-------------------------------------|--------------|--|--|
| HCV(Immunochromatography) (Serum) | Non Reactive | | |
|-------------------------------------|--------------|--|--|

Description:

1. It is a rapid third generation assay for the detection of antibodies specific to HCV.
2. It is a screening assay and should not be used as sole criteria for diagnosis of HCV infection.
3. Absence of antibodies to HCV does not indicate that an individual is absolutely free of HCV infection.
4. As with all diagnostic testing a definite clinical diagnosis should not be based on the result of a single test.
5. The result should be confirmed by tests such as ELISA/RNA PCR before taking clinical decisions.

REPORT SHEET



Dr. Mullai, Phd.,
Consultant Microbiologist

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| HBsAg (Immunochromatography) (Serum) | Non Reactive | | |

Note: All positive results should be confirmed with Hepatitis B Neutralization assay / Hepatitis B viral markers / clinical evaluation.


HIV 1 & 2 Immunochromatography (Serum, Immunochromatography)

HIV 1 & 2 (Immunochromatography) Non Reactive

Note :

- 1.This test is a screening test.
- 2.All Reactive samples must be tested according to NACO guidelines.
- 3.Absence of antibodies to HIV 1/2 does not indicate the individual is absolutely free of HIV infection.
- 4.If clinically infection is indicated and still the test is negative, it is recommended to test HIV RNA Test.

-- End of Report --


Dr. Mullai, Phd.,
Consultant Microbiologist