

Patient Name	: MR. OKORO JEREMIAH	Patient ID	: 88594
Age / Gender	: 31 years / Male	Registration Date	: Aug 27, 2024, 10:37 a.m.
Referred By	: SELF	Collection Date	: Aug 27, 2024, 10:58 a.m.
Source	: DIRECT	Print Date	: Sep 05, 2024, 05:08 p.m.

## ESR - ERYTHROCYTE SEDIMENTATION RATE

Test Description	Value(s)			Reference Range
Erythrocyte Sedimentation Rate	Low	Normal	High	0-20 mm/Hr
		4		

**METHOD** : Westergreen Technique

**NOTE** : The result of this non-specific test which is elevated in a wide range of infectious, inflammatory, degenerative and malignant conditions is more useful when used along with clinical findings and results from other laboratory tests, including C-reactive protein.

ESR is often higher than normal in people with an autoimmune disorder.

A single elevated ESR, without any symptoms of a specific disease, will usually not give enough information to make a medical decision.

Furthermore, a normal result does not rule out inflammation or disease.

Moderately elevated ESR occurs with inflammation but also with anemia, infection (TB, HIV), arthritis, pregnancy, and aging.

**Interpretation:**

A very high ESR usually has an obvious cause, such as a severe infection, marked by an increase in globulins (myeloma), polymyalgia rheumatic temporal arthritis.

Women tend to have a higher ESR and menstruation and pregnancy can cause temporary elevations.

In pediatric settings, the ESR test is used for the diagnosis and monitoring of children with rheumatoid arthritis or Kawasaki disease.

Drugs such as dextran, methyldopa, oral contraceptives, penicillamine procainamide, theophylline, and vitamin A can increase ESR, while aspirin, cortisone, and quinine may decrease it. Decreased ESR is also seen in polycythemia (and other conditions with haemoconcentration), sickle cell disease, and hemorrhagic fevers

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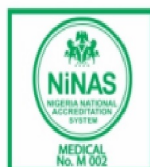


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Verified By: \_\_\_\_\_



**CHIAMAKA NWAIKE**  
Med. Lab. Scientist



Plot 603, 3rd Avenue, 'S' Close, by 32 Road Junction, Festac Town, Lagos.  
Tel: 02018880182, 08095461695, 08100916223 | [www.el-lab.org](http://www.el-lab.org) | [info2@el-lab.org](mailto:info2@el-lab.org)  
@ellabdiagnosticcenter | ellabdiagnosticcenter  
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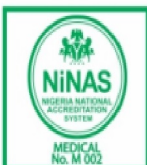


Technician Asst

**Verified By:**



**CHIAMAKA NWAIKE**  
Med. Lab. Scientist



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## SPUTUM GENE XPRT

### Investigations

### Result(s)

Test Principle

Semi - Nested Real Time PCR

Equipment

GeneXpert (Cepheid)

Specimen

SPUTUM

### RESULT

Mycobacterium Tuberculosis

NOT DETECTED

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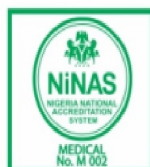
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CHIAMAKA NWAIFE



Emmanuel Onyeje  
Med. Lab. Scientist



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**Result Interpretation:**

- If result is TB negative: This indicates no tuberculosis (TB). However, if the clinical picture is strongly suggestive of TB, a repeat test can be suggested by your referring doctor.
- If result is TB positive, and Rifampicin resistance negative: This indicates tuberculosis that can be treated with commonly used drugs. Please seek assistance from the referring doctor for treatment of tuberculosis, which is a highly curable disease.
- If result is Rifampicin resistance positive and you have previously taken TB treatment: This indicates drug resistance - TB that is difficult to treat with commonly used drugs. Please seek assistance from the referring doctor for treatment of multidrug resistant tuberculosis (MDR TB) which requires specialized management, including additional drug-susceptibility testing.
- If result is Rifampicin resistance positive and you have NOT previously taken TB treatment: This may indicate drug resistance, but requires confirmation. Please seek a second test from an accredited laboratory to confirm the presence of multidrug resistant tuberculosis (MDR TB) which requires specialized management.

**\*\*END OF REPORT\*\***

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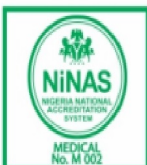
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**CHIAMAKA NWAIFE**



**Emmanuel Onyeje**  
Med. Lab. Scientist



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## SPUTUM AFB x1 Only

### Investigations

### Result(s)

#### Macroscopy

#### AFB Sputum X1

(Method : Ziehl-Neelson Stain)

No AFB Seen.

### Interpretation:

No AFB in 100 Oil Immersion fields = No AFB Seen .  
 1 -10 AFB in 100 Oil Immersion fields = (1+).  
 11 - 100 AFB in 100 Oil Immersion fields = (2+)  
 1 - 10 AFB per Oil Immersion field = (3+)  
 More than 10 AFB per Oil Immersion field = (4+)

**\*\*END OF REPORT\*\***

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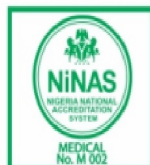
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Med. Lab. Scientist



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## MANTOUX TUBERCULIN TEST

Investigations	Result(s)
MANTOUX/TUBERCULLIN SKIN TEST	
Date & Time of Injection	27/08/2024 11:00am
Date & Time of Reading	29/08/2024 11:00am
RESULT READ	0-1mm

### REFERENCE RANGES/ INTERPRETATION

#### MANTOUX TUBERCULIN SKIN TEST (TST).

- \* Reliable administration and reading of this screening tool for tuberculosis (TB) require the standardization of procedures.
- \* Tuberculin test (even if positive) cannot tell if the infection is active (contagious) or inactive (latent TB). Further tests such as chest X-rays or/and sputum culture (AFB) may be done.
- \* False-positive results may be obtained due to previous BCG vaccination, allergic reaction or hypersensitivity, an infection caused by other mycobacteria, and the "booster effect".
- \* False-negative results may be obtained due to cutaneous anergy, very recent TB, overwhelming active TB, severe malnutrition, Hodgkin's disease, sarcoidosis, infancy (<6months old), some viral illnesses (e.g measles, chickenpox), and recent live-virus vaccinations (e.g, MMR, polio, chickenpox - in which a 6 weeks wait period following vaccination is advised).

#### INTERPRETATIONS (KEY)

#### CLASSIFICATION OF THE TUBERCULIN SKIN TEST REACTION INDURATION - (POSITIVE RESULT).

Induration	Category
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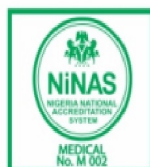
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Induration > 5mm is considered positive in	<ol style="list-style-type: none"> <li>1. HIV positive patients</li> <li>2. Patients with recent contacts in TB case-patients</li> <li>3. Persons with fibrotic changes on chest radiograph consistent with prior TB Patients with organ transplant and other immunosuppressed patients</li> </ol>
Induration > 10mm is considered positive in:	<ol style="list-style-type: none"> <li>1. Mycobacteriology lab personnel</li> <li>2. Persons with the following clinical conditions that place them at high risk such as silicosis, DM, CRF, hematologic disorders, etc.</li> <li>3. Children &lt; 4 years of age, or infants, children, and adolescents exposed to adults a high-risk</li> <li>4. Recent immigrants from high-prevalence countries</li> </ol>
Induration of > 15mm is considered positive in:	Persons with no known risk factors for TB.
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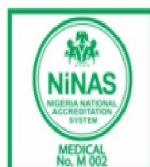


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