



# Kamal Diagnostic Center

Patient Name:

Registered on:

Age / Sex:

Collected on:

Referred By:

Received on:

Reg. no. / UHID:

Reported on:

Investigations:

## HAEMATOLOGY COMPLETE BLOOD COUNT (CBC)

TEST	VALUE	UNIT	REFERENCE
Hemoglobin		g/dl	12 - 15
Total Leukocyte Count		cumm	4,000 - 11,000
Differential Leucocyte Count			
Neutrophils		%	40 - 80
Lymphocyte		%	20 - 40
Eosinophils		%	1 - 6
Monocytes		%	2 - 10
Basophils		%	< 2
Platelet Count		lakhs/cumm	1.5 - 4.5
Total RBC Count		million/cumm	3.9 - 4.8
Hematocrit Value, Hct		%	36 - 46
Mean Corpuscular Volume, MCV		fL	83 - 101
Mean Cell Haemoglobin, MCH		Pg	27 - 32
Mean Cell Haemoglobin CON, MCHC		%	31.5 - 34.5
Mean Platelet Volume, MPV		fL	6.5 - 12
R.D.W. - SD		fL	39 - 46
R.D.W. - CV		%	11.6 - 14
P-LCR		%	19.7 - 42.4
P.D.W.		fL	9.6 - 15.2

TEST	VALUE	UNIT	REFERENCE
Blood Group & Rh.			
ABO			
Rh (ANTI -D)			