

# DIAGNOSTIC REPORT



CLIENT CODE : C000119167

CLIENT'S NAME AND ADDRESS :  
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PATIENT NAME : AJAI SRIVASTAV

PATIENT ID : AJAIM1405549

ACCESSION NO : 0009UE067151

AGE : 67 Years

SEX : Male

DATE OF BIRTH :

DRAWN : 13/05/2021 00:00

RECEIVED : 14/05/2021 16:42

REPORTED : 14/05/2021 21:02

REFERRING DOCTOR : SELF

CLIENT PATIENT ID :

CLINICAL INFORMATION :

0185UE001597

Test Report Status	Results	Biological Reference Interval	Units
Final			

## COAGULATION

### QUANTITATIVE D-DIMER

D-DIMER

0.08

< 0.243

µg/mL

METHOD : IMMUNOLOGICAL UV ASSAY

#### Interpretation(s)

##### QUANTITATIVE D-DIMER-

The level of D-dimer (a degradation product from cross-linked fibrin) rises during the coagulation activation states. Increased levels of D-dimer have been reported in the following cases: deep vein thrombosis (DVT), embolisms, DIC, hemorrhages, surgery, cancers and cirrhosis of liver.

The D-dimer level generally rises in the first 2 to 3 days post operatively, and this is an evidence of the fibrinolytic activity directed against the enhanced levels of fibrin produced as a result of surgery. Thus, a high D-dimer level is expected immediately after surgery. If the elevated D-dimer level persists, or tends to rise further, then this is a warning sign of an impending or an ongoing thromboembolic episode.

In case of suspected venous thrombo-embolism (VTE), the triad of 'clinical evaluation, diagnostic imaging and D-dimer testing' forms the basis of diagnosis.

#### Reference for Paediatric range:

Monagle P. et al. Thromb Haemost 2006 95: 362-372.

Summerhayes R. et al. Thromb Haemost, 2007 5, Supp 2: P-M-105.

Summerhayes R. et al. Thromb Haemost, 2007 5, Supp 2: P-S-397.

**\*\*End Of Report\*\***

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