DIAGNOSTIC REPORT

8601366999 9311426484





CLIENT CODE: CO00119167 CLIENT'S NAME AND ADDRESS : SRL PSC GORAKHPUR (HOME COLLECTION) AKSHAYBAR SINGH BHAWAN, CIVIL LINES, 7 PARK ROAD, GORAKHPUR GORAKHPUR 273001 UTTAR PRADESH INDIA

SRL, REFERENCE LAB, GP-26, MARUTI INDUSTRIAL ESTATE, UDYOG VIHAR, SECTOR-18,

GURGAON, 122015 HARYANA, INDIA

Tel: 9111591115, Fax: CIN - U74899PB1995PLC045956

Email: connect@srl.in

PATIENT NAME: AJAI SRIVASATAV PATIENT ID: AJAIM211053185

ACCESSION NO: 0185UE001597 AGE: 67 Years SEX: Male DATE OF BIRTH: 21/10/1953

DRAWN: 13/05/2021 10:45 RECEIVED: 13/05/2021 11:44 14/05/2021 19:12 REPORTED:

REFERRING DOCTOR: SELF CLIENT PATIENT ID:

Test Report Status Results Biological Reference Interval Units **Final**

NEPHELOMETRY

-REACTIVE PROTEIN, SERUM (QUANTITATIVE)

C-REACTIVE PROTEIN < 2.0 < 5.0 mg/L

METHOD: IMMUNOTURBIDIMETRIC ASSAY

Interpretation(s)

C-REACTIVE PROTEIN, SERUM (QUANTITATIVE)-

CRP is one of the proteins commonly referred to as acute phase reactants. CRP is distinguished by its rapid response to trauma or infection. Elevated levels of CRP may be seen in inflammatory disorders, tissue injury or necrosis and infections. Synthesis of CRP increases within 4-6 hours of onset of inflammation, reaching peak values within 1-2 days. CRP levels also fall quickly after resolution of inflammation since its half life is 6 hours.

Testing for CRP is indicated in the following clinical situations - monitoring recovery from surgery, myocardial infarction, transplantation, inflammatory bowel disease, rheumatic diseases and infectious diseases. Measuring and charting C-reactive protein values can also prove useful in determining disease progress or the effectiveness of treatments.

CRP levels in autoimmune diseases may show little or no increase unless infection is present. Levels may not increase in conditions like pregnancy, angina, seizures, asthma, common cold. The main limitation of CRP is in its non-specific response and should not be interpreted without a complete clinical history and evaluation.

End Of Report

Please visit www.srlworld.com for related Test Information for this accession

Dr Shakti Aggarwal, (Reg.No. MD,DMC-01354) Head - Clinical Chemistry

Dr. Anurag Bansal (Reg.No. DMC-23012) LAB DIRECTOR



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CONDITIONS OF LABORATORY TESTING & REPORTING

- 1. It is presumed that the test sample belongs to the patient named or identified in the test requisition form.
- 2. All Tests are performed and reported as per the turnaround time stated in the SRL Directory of services (DOS).
- 3. SRL confirms that all tests have been performed or assayed with highest quality standards, clinical safety & technical integrity.
- 4. A requested test might not be performed if:
- a. Specimen received is insufficient or inappropriate specimen quality is unsatisfactory
 - b. Incorrect specimen type
- c. Request for testing is withdrawn by the ordering doctor or patient
- d. There is a discrepancy between the label on the specimen container and the name on the test requisition form

- 5. The results of a laboratory test are dependent on the quality of the sample as well as the assay technology.
- 6. Result delays could be because of uncontrolled circumstances. e.g. assay run failure.
- 7. Tests parameters marked by asterisks are excluded from the "scope" of NABL accredited tests. (If laboratory is accredited).
- 8. Laboratory results should be correlated with clinical information to determine Final diagnosis.
- 9. Test results are not valid for Medico- legal purposes.
 10. In case of queries or unexpected test results please call at SRL customer care (Toll free: 1800-222-000). Post proper investigation repeat analysis may be carried out.

SRL Limited

Fortis Hospital, Sector 62, Phase VIII,

Mohali 160062

