

#### **DEPARTMENT OF CLINICAL BIOCHEMISTRY**

Name **UDAY KUMAR** Age / Sex 27 / M Contact 8919995189 INAPHYD95052 **Collection Centre Referral Doctor** ram singh

Order PTGOC2200135150 Sample Drawn At 2022-11-16 10:25:44 Sample Accepted At 2022-11-16 14:44:13 Sample Reported At 2022-11-16 18:50:28 **Report Status Provisional** 



## C-Reactive Protein (CRP), Blood

SampleType: Serum

INVESTIGATION	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL	
C-Reactive Protein (CRP)	29.55	ma/l	0 - 5	

Method: IMMUNOTURBIDIMETRY

Note: \* If the test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action. \* Critical Abnormal



#### **DEPARTMENT OF HAEMATOLOGY**

Name **UDAY KUMAR** Age / Sex 27 / M Contact 8919995189 INAPHYD95052 **Collection Centre Referral Doctor** ram singh

Order Sample Drawn At Sample Accepted At Sample Reported At **Report Status** 

PTGOC2200135150 2022-11-16 10:25:44 2022-11-16 14:30:40 2022-11-16 17:41:16

**Provisional** 



# **Complete Blood Picture (CBP)**

SampleType: Whole Blood EDTA

INVESTIGATION	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
HEMOGLOBIN	16.8	gm/dL	13 - 17
Method: SLS Hemoglobin Detection			
HEMATOCRIT	52.1	%	40 - 50
Method: RBC Pulse Height Detection	_		
RBC COUNT	5.89	Millions/ cumm	4.5 - 5.5
Method: HD focussed DC Detection  RED CELL INDICES			
Method: Calculated from RBC HB and HCT	:		
MCV	88.5	fL	83 - 101
MCH	28.5	pg	27 - 32
MCHC	32.2	gm/dL	31.5 - 34.5
	13.1	_	7.5 - 15.5
RDW-CV		%	
TOTAL LEUCOCYTE COUNT  Method: Flow cytometry WNR channel	6430.0	/cumm	4000 - 10000
DIFFERENTIAL LEUCOCYTE COUNT	:		
Method: Flow cytometry Calculated	·		
Neutrophils	68.9	%	40 - 80
Lymphocytes	10.0	%	20 - 40
Monocytes	20.8	%	2 - 10
Eosinophils	0.0	%	1 - 6
Basophils	0.3	%	0 - 1
ABSOLUTE LEUCOCYTE COUNT	:		
Method: Flow cytometry WDF channel			
Absolute Neutrophil Count	4430.0	/cumm	2000 - 7000
Absolute Lymphocyte Count	640.0	/cumm	1000 - 3000
Absolute Monocyte Count	1340.0	/cumm	200 - 1000
Absolute Eosinophil Count	0.0	/cumm	200 - 500
Absolute Basophil Count	20.0	/cumm	20 - 100
PLATELET COUNT	1.82	Lakhs/cumm	1.5-4.0
Method: HD focussed DC Detection			
Mean Platelet Volume	10.4	fL	7 - 11
Method: Calculated from PCT and Platelet count			
PERIPHERAL SMEAR			
RBCs	Normocytic Normochromic.		

Abnormal

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#### DEPARTMENT OF HAEMATOLOGY

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## **Complete Blood Picture (CBP)**

SampleType: Whole Blood EDTA

INVESTIGATION RESULT UNITS **BIOLOGICAL REFERENCE INTERVAL** 

**WBCs** Monocytosis

Adequate in number & Normal in morphology. **Platelets** 

No Parasite Found. Hemoparasites MONOCYTOSIS Impression

As per the recommendations of International Council for Standardization in Hematology (ICSH), the Differential Leucocyte counts are additionally being reported as Absolute numbers of each cell in per unit volume of blood.

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Abnormal

**\** 040 6700 6700

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#### DEPARTMENT OF CLINICAL MICROBIOLOGY AND INFECTIOUS DISEASE SEROLOGY

Name **UDAY KUMAR** Age / Sex 27 / M Contact 8919995189 INAPHYD95052 **Collection Centre Referral Doctor** ram singh

Order Sample Drawn At Sample Accepted At Sample Reported At **Report Status** 

PTGOC2200135150 2022-11-16 10:25:44 2022-11-16 14:44:13 2022-11-16 16:22:45

**Provisional** 



Widal Test

SampleType: Serum

	* **		
INVESTIGATION	RESULT	UNITS	BIOLOGICAL REFERENCE INTERVAL
Salmonella Typhi O Antigen Method: ANTIGEN ANTIBODY REACTION	1:40	Titre	0 - 1.6
Salmonella Typhi H Antigen Method: ANTIGEN ANTIBODY REACTION	1:40	Titre	0 - 1.6
Salmonella Para Typhi AH Antigen Method: ANTIGEN ANTIBODY REACTION	1:20	Titre	0 - 1.6
Salmonella Para Typhi BH Antigen Method: ANTIGEN ANTIBODY REACTION	1:20	Titre	0 - 1.6

Widal test is used to diagnose typhoid and paratyphoid fevers. A 4 fold rise in titre is diagnostic of infection.

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

M Nageshwar Rao Lab Manager

Dr G Srinivas **Director - Lab Services** 

**Ch Srinivas** Lab Manager

Dr Hemalatha **Consultant Microbiologist** 

Note: \* If the test results are alarming or unexpected, client is advised to contact the laboratory immediately for possible remedial action.

# **Conditions of Reporting**

- 1. Laboratory reports will aid in diagnosis of clinical conditions in conjunction with clinical signs, symptoms and related investigations. They are best interpreted by qualified medical professionals who understand reporting units, reference ranges and limitations of technologies and their correlation with other clinical findings.
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- 3. It is presumed that the test(s) performed are, on the specimen(s)/sample(s) belonging to the patient named or identified and the verification of the particulars have been carried out by the patient or his/her representative at the point of generation of the side specimen(s) or sample(s).
- 4. The results of tests may vary from lab to lab and also from time to time for the same parameters for the same patient. Assays are performed with reasonable care and in accordance with standard procedures. The reported results are dependent on individual assay methods, equipment used, method specificity, sensitivity, drug interaction and the quality of the specimen(s)/samples(s) received.
- 5. Should the results indicate unexpected abnormality, the same should be reconfirmed after appropriate clinical correlation.
- 6. Histopathology specimen(s)/sample(s) will be preserved for one month from the date of testing and slides/ reports will be preserved for five years. Other clinical specimen(s)/sample(s) will be discarded after seven days from the date of testing, unless otherwise specified by the client. Such preservation shall be subject to sample integrity.
- 7. Preliminary Report, if any indicates that the results are primary and they are yet to be reported for one or more of the tests, or else, as in case with many microbiology test, a "final" culture, identification or drug susceptibility result might be pending. When all results are available the "Preliminary report" will be replaced by "Final Report". Client Shall rely only on the final report.
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- 9. Partial reproduction of this report is not permitted.
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- 14. Partial reproduction of this report is not permitted.