

**Master. ANSH AGRAWAL**

Malkapur

Mob : 7038006417

20 Year / Male

VID: 56677 PPID : 27559

REFERENCE :

Dr. Amol Phirke

Sample Collected At:

Meditrust Diagnostics

Malkapur

REGISTERED ON :

07/01/25 01:43 PM

REPORTED ON :

07/01/25 01:43 PM

**HAEMATOLOGY**

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE
<u>COMPLETE BLOOD COUNT</u>			
Haemoglobin	14.06	gm/dL	13.5-17.5
Total WBC Count	5690	cells/cumm	4000-10000
Platelet count	212700	/cumm	150000-450000
R.B.C. Count	4.94	mili/cumm	4.35-5.65
PCV (Packed Cell Volume)	42.1	%	38.3-48.6
MCV (Mean Corpuscular Volume)	85	fL	78-100
MCH (Mean Corpuscular Hemoglobin)	28	pg	27-31
MCHC (Mean Corpuscular Hb Conc)	33	gm/dL	32-36
RDW	12.6	%	11-16
Mentzer Index	17		
<u>DIFFERENTIAL COUNT</u>			
Neutrophils	72	%	40-80
Lymphocytes	19	%	20-40
Monocytes	07	%	2-10
Eosinophils	02	%	0-5
Basophils	0	%	0-2
Absolute Neutrophils Count	4097	/cumm	2000-7000
Absolute Lymphocytes Count	1081	/cumm	1000-4000
Absolute Monocytes Count	398	/cumm	0-1000
Absolute Eosinophils Count	114	/cumm	0-500
N/L Ratio	3.8	-	<3.0
Immature Granulocytes	0.58	%	0-1
MPV (Mean Platelet Volume)	7.2	fL	6-9.5
PCT (Plateletcrit)	0.25	%	0.19-0.39
P-LCR (Platelet to large cell ratio)	32.9	%	19.7-42.4
<u>PERIPHERAL SMEAR EXAMINATION</u>			
RBC Morphology	Normocytic Normochromic		
WBC	Reactive lymphocytes seen		
Platelets	Adequate		
Instrument	Fully Automated Hematology Analyzer Nihon Kohden		
Please correlate with clinical conditions.			
<u>MALARIAL PARASITE (MP)</u>			
IMPRESSION	Not detected in present smear examined		

Dr Bharati Taori

MBBS, MD (Pathology)

Consultant Pathologist

Dr Girish Taori

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Consultant Pathologist


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DIAGNOSTICS

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**HAEMATOLOGY**TESTRESULTUNITBIOLOGICAL REF RANGE*Please correlate with clinical conditions.*

--- End Of Report ---

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**BIOCHEMISTRY****TEST****RESULT****UNIT****BIOLOGICAL REF RANGE****BLOOD SUGAR - RANDOM**

90

mg/dL

80-140

Method: GOD-POD

Please correlate with clinical conditions.

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BIOCHEMISTRY

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE
C - REACTIVE PROTEIN (CRP)	6	mg/L	<10

Method: Immuno Turbidimetry

Clinical Information :

1. C-reactive protein (CRP) is a biomarker of inflammation. Plasma CRP concentrations increase rapidly and dramatically (100-fold or more) in response to tissue injury or inflammation.
2. High-sensitivity CRP (hs-CRP) is more precise than standard CRP when measuring baseline (i.e. normal) concentrations and enables a measure of chronic inflammation. It is recommended for cardiovascular risk assessment. Atherosclerosis is an inflammatory disease and hs-CRP has been endorsed by multiple guidelines as a biomarker of atherosclerotic cardiovascular disease risk.
3. Increase in CRP values are non-Specific and should not be interpreted without a complete history.

Please correlate with clinical conditions.

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**SEROLOGY REPORT**

<u>TEST</u>	<u>RESULT</u>	<u>UNIT</u>	<u>BIOLOGICAL REF RANGE</u>
<u>Dengue Profile By Rapid</u>			
Dengue NS1	Negative		
Dengue IgM	Negative		
Dengue IgG	Negative		
Method	Immunochromatography		

Note:-

The rapid test is a screening test, it will be confirmed by the ELISA method.

Interpretation of results-

1. Detection of NS1 antigen indicates early infection with Dengue virus. NS1 antigen is found from the first day of illness and up to the 9th day after the onset of fever.
2. Detection of IgM antibodies suggestive of primary dengue infection.
3. Detection of IgG antibodies suggestive of secondary Dengue infection.
4. Detection of IgM and IgG antibodies is indicative of late primary and early secondary dengue infection.
5. In case of negative results if clinical symptoms persist, please retest after 3-5 days.

Limitations-

1. A Negative test for NS1 can occur if the quantity is below the limit of detection of the assay.
2. IgM antibodies may not be detectable in early infection.
3. NS1 antigen-positive results of the rapid screening need to be confirmed by ELISA.

Please correlate with clinical conditions.

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SEROLOGY REPORT

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE
WIDAL - SLIDE AGGLUTINATION			
Salmonella typhi "O"	1:80		
Salmonella typhi "H"	1:160		
Salmonella Paratyphi "AH"	-		
Salmonella Paratyphi "BH"	-		
IMPRESSION	Negative		

Interpretation:

1. WIDAL TEST is done to make the presumptive diagnosis of typhoid fever.
2. The test is based on the reaction between the antibodies in infected persons blood and specific antigens of S.typhi(Somatic-"O" & Flagellar "H") which produces agglutination visible to naked eyes.
3. Confirmation of the disease is made by the Blood culture during the first week of fever.
4. Cultures can also be performed by using stool, urine or bone marrow specimen.

Please correlate with clinical conditions.

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CLINICAL PATHOLOGY

TEST	RESULT	UNIT	BIOLOGICAL REF RANGE
URINE ANALYSIS REPORT			
Physical Examination			
Quantity	10 ml		
Appearance	Clear		
Colour	Pale Yellow		
Specific gravity	1.030		
Chemical Examination			
PH	Acidic		
Protein	Absent		
Sugar	Absent		
Ketone	Absent		
Bile Pigments	Absent		
Bile Salts	Absent		
Urobilinogen	Not significant		
Blood	Absent		
Nitrate	Negative		
Microscopic Examination			
PUS Cells	4-5	/hpf	0-4
RBC	Absent	/hpf	Absent
Epithelial Cells	4-5	/hpf	0-4
Casts	Absent		
Crystals	Absent		

Please correlate with clinical conditions.

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