krsnaa DIAGNOSTICS
LET'S DO GOOD...

Medical Laboratory Report

Patient Name	: Mrs Priya Jha	Patient UID No	:BMCM240200947434
Age and Gender	: 40 Years / Female	PRN No	:8788713252
Category	: IPD - MH BMC	Registered On	:21 Feb 2024
Referring Doctor	: DR.VIDYA	Sample UID No.	125455562
Sample Processed at	: MH DOMBIVALI SHAHSTRI NAGAR HOSPITAL		

HEMATOLOGY

Test Done	Observed Value	Units	Biological Reference Interval
COMPLETE BLOOD COUNT			
Haemoglobin Photometric	13.00	g/dl	11.0 - 16.0
Total Leucocyte Count Electrical impedence	6.00	x 10^3 /µL	4.0- 11.0
Total Erythrocyte Count Electrical impedence	3.90	x 10^6 /µL	3.5 - 5.5
Platelet count Electrical impedence	320.00	x 10^3 /µL	150 - 410
MPV Calculated	9.90	fl	
PCT Electrical Impedence	0.24	%	
PDW Electrical Impedence	17.00	%	
R.B.C. Indices			
P.C.V. Electrical impedence	38.00	%	35 - 48
M.C.V. Measured	86.00	fL	82 - 95.0
M.C.H. Measured	29.00	pg	25 - 33
M.C.H.C Calculated	33.00	gm/dl	31.5 - 34.5
R.D.W. CV Calculated	13.40	%	11.0 - 16.0
Differential W.B.C. Count			
Neutrophils Cytochemistry & impedence/PS	65.00	%	40 - 70
Lymphocytes Cytochemistry & impedence/PS	30.00	%	20 - 40
Eosinophils Cytochemistry & impedence/PS	2.00	%	0 - 6

DR. HETAL SHAH
(MD PATHOLOGIST)

~~~ END OF REPORT ~~~

Sample Collected On	: 21.02.2024 12:56	Sample Accepted On	:21.02.2024 12:56		E19173
Results Authenticated	: 21.02.2024 14:47	Results Reported	:21.02.2024 14:49	Printed On	: 21.02.2024 14:50

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Medical Laboratory Report

Patient Name	: Mrs Priya Jha	Patient UID No	:BMCM240200947434
Age and Gender	: 40 Years / Female	PRN No	:8788713252
Category	: IPD - MH BMC	Registered On	:21 Feb 2024
Referring Doctor	: DR.VIDYA	Sample UID No.	125455562
Sample Processed at	: MH DOMBIVALI SHAHSTRI NAGAR HOSPITAL		

HEMATOLOGY

Test Done	Observed Value	Units	Biological Reference Interval
COMPLETE BLOOD COUNT			
Differential W.B.C. Count			
Monocytes	3.0	%	0 - 8
Cytochemistry & impedence/PS			
Basophils	00	%	0 - 1
Cytochemistry & impedence/PS			
Absolute Count			
Absolute Neutrophil Count	3.90	x 10^3 /µL	1.5 - 8.0
Calculated			
Absolute Lymphocyte Count	1.80	x 10^3 /µL	
Calculated			
Absolute Eosinophil Count	0.12	x 10^3 /µL	0.04 - 0.44
Calculated			
Absolute Monocyte Count	0.18	x 10^3 /µL	
Calculated			
Absolute Basophil Count	00	x 10^3 /µL	
Calculated			
Peripheral Smear Findings			
Abnormalities of Erythrocytes	**Normocytic Normochromic**		
Abnormalities of Leucocytes	**Within normal limits**		
Platelets on smear	Adequate on smear.		

Test performed on fully automated 5 part differential cell counter.

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Medical Laboratory Report

Patient Name	: Mrs Priya Jha	Patient UID No	:BMCM240200947434
Age and Gender	: 40 Years / Female	PRN No	:8788713252
Category	: IPD - MH BMC	Registered On	:21 Feb 2024
Referring Doctor	: DR.VIDYA	Sample UID No.	124555556
Sample Processed at	: MH DOMBIVALI SHAHSTRI NAGAR HOSPITAL		

COAGULATION STUDIES

Test Done	Observed Value	Units	Biological Reference Interval
ESTIMATION OF PROTHROMBIN TIME			
Prothrombin Time Electro-mechanical Clot detect	13.84	secs.	+/- 3 secs of MNPT
MNPT Electro-mechanical Clot detect	13.34	secs.	
ISI value of PT reagent	1.01		
Prothrombin Ratio Calculated	1.04		
International Normalised Ratio (INR) Calculated	1.04		

The Prothrombin Time (PT) test is used to test the extrinsic coagulation pathway. The PT increases in deficiency of factors II, V, VII and X, Vitamin k deficiency as well as in DIC, liver disease etc. Routine PT monitoring is essential in patients on anti-coagulant therapy, in whom the INR should be maintained in between 2 and 3.5. If values increase > 3.5, stop anti-coagulant therapy immediately.Test performed on Humaclot Junior automated coagulometer.

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~~~ END OF REPORT ~~~

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Medical Laboratory Report

Patient Name	: Mrs Priya Jha	Patient UID No	:BMCM240200947434
Age and Gender	: 40 Years / Female	PRN No	:8788713252
Category	: IPD - MH BMC	Registered On	:21 Feb 2024
Referring Doctor	: DR.VIDYA	Sample UID No.	125545695

Sample Processed at : MH DOMBIVALI SHAHSTRI NAGAR HOSPITAL

BIOCHEMISTRY

Test Done	Observed Value	Units	Biological Reference Interval
Total Bilirubin - Serum	0.80	mg. / dL.	0.2 - 1.2

Serum
Diazonium Salt

Test Description:

- Bilirubin is a degradation product of hemoglobin and other hemecontaining compounds.
- There are four principle forms of bilirubin in the serum: unconjugated, mono-, di-glucuronide conjugated and delta-bilirubin.
- The unconjugated form, which is mostly insoluble in water, is transported to the liver by albumin.
- Once in the liver unconjugated bilirubin is made water soluble by conjugation with glucuronic acid, forming the mono- and di-glucuronide conjugated species.
- These conjugated species are mostly excreted with bile
- However, conjugated bilirubin can also react with albumin forming delta-bilirubin.
- Conjugated bilirubin is often called direct bilirubin.
- Unconjugated bilirubin, which is the difference between total and direct bilirubin, is often referred to as indirect bilirubin.

Test Interpretation:

- Neonatal bilirubin quantitative is used to monitor diseases causing jaundice in the newborn.
- Physiologic jaundice is seen at serum bilirubin concentrations from 7 to 10 mg/dl, and serum bilirubin concentrations greater than 17 mg/dl may be pathologic for an average full-term newborn infant.
- Additional causes of neonatal jaundice are hematoma/ hemorrhage, hypothyroidism, Crigler- Najjar syndrome, obstructive jaundice, galactosemia, sepsis, syphilis, toxoplasmosis, cytomegalovirus, rubella, glucose-6-phosphate dehydrogenase (G-6-PDH) deficiency pyruvate kinase deficiency and spherocytosis, bilirubin encephalopathy and erythroblastosisfetalis.

Test Limitation:

- For patients undergoing evaluations involving the administration of indocyanine green (ICG), it is recommended that samples are drawn after ICG has been eliminated.
- For diagnostic purpose, the test finding should always be assessed in conjunction with the patient's Medical history, clinical examinations and other findings.

Reflex Test:

- LFT
- Urine routine
- (HAV,HBV,HCV,HEV) Viral markers.

References:Alinity ci (Kit Insert).

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