



 Patient Name
 : Mr. KARTHIK .
 Age / Gender
 : 30 Y / M

 UHID/MR No.
 : CKON.000024473
 OP Visit No
 : CKONOPV3462

No Reports Available





: Mr.KARTHIK

Age/Gender

: 30 Y 3 M 23 D/M

UHID/MR No Visit ID : CKON.0000024473 : CKONOPV346322

Ref Doctor

: Dr.SELF

Collected

: 30/Apr/2020 11:07AM : 30/Apr/2020 12:45PM

Received Reported

: 30/Apr/2020 01:31PM

Status

: Final Report

DEPARTMENT OF HAEMATOLOGY

HEMOGRAM (CBP+ ESR)

PERIPHERAL SMEAR, WHOLE BLOOD-EDTA

RBCs ARE NORMOCYTIC NORMOCHROMIC.

TLC , DLC WITHIN NORMAL LIMIT. NO IMMATURE CELLS ARE SEEN.

PLATELETS ARE ADEQUATE.

NO HEMOPARASITES SEEN



Apollo Health and Lifestyle Limited (CIN-U85110TG2000PLC115819)

Address: The Apollo Medical Centre,2-20/6/A, Kothaguda X Roads, Kondapur, Hyderabad, Telangana, India - 500032







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DEPARTMENT OF HAEMATOLOGY

HEMOGRAM (CBP+ ESR)

Test Name	Result	Unit	Bio. Ref. Range	Method
HEMOGRAM , WHOLE BLOOD-EDTA				
HAEMOGLOBIN	14.1	g/dL	13-17	Spectrophotometer
PCV	41.40	%	40-50	Electronic pulse & Calculation
RBC COUNT	4.51	Million/cu.mm	4.5-5.5	Electrical Impedence
MCV	92	fL	83-101	Calculated
MCH	31.4	pg	27-32	Calculated
MCHC	34.2	g/dL	31.5-34.5	Calculated
R.D.W	13	%	11.6-14	Calculated
TOTAL LEUCOCYTE COUNT (TLC)	4,200	cells/cu.mm	4000-10000	Electrical Impedance
DIFFERENTIAL LEUCOCYTIC COUNT (DLC)				
NEUTROPHILS	58	%	40-80	Electrical Impedance
LYMPHOCYTES	37	%	20-40	Electrical Impedance
EOSINOPHILS	02	%	1-6	Electrical Impedance
MONOCYTES	03	%	2-10	Electrical Impedance
BASOPHILS	00	%	<1-2	Electrical Impedance
ABSOLUTE LEUCOCYTE COUNT				
NEUTROPHILS	2436	Cells/cu.mm	2000-7000	Electrical Impedance
LYMPHOCYTES	1554	Cells/cu.mm	1000-3000	Electrical Impedance
EOSINOPHILS	84	Cells/cu.mm	20-500	Electrical Impedance
MONOCYTES	126	Cells/cu.mm	200-1000	Electrical Impedance
PLATELET COUNT	153000	cells/cu.mm	150000-410000	Electrical impedence
ERYTHROCYTE SEDIMENTATION RATE (ESR)	15	mm at the end of 1 hour	0-15	Modified Westergrer
PERIPHERAL SMEAR				

RBC: Normocytic Normochromic.

WBC: TLC and DLC Within normal limits.

PLATELETS: Adequate on the smear.

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DEPARTMENT OF HAEMATOLOGY						
HEMOGRAM (CBP+ ESR)						
Result	Unit	Bio. Ref. Range	Method			







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DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method

MALARIA VIVAX ANTIGEN , WHOLE BLOOD- EDTA	NEGATIVE	NEGATIVE	ICT	
MALARIA FALCIPARUM ANTIGEN , WHOLE BLOOD-EDTA	NEGATIVE	NEGATIVE	ICT	

Comment:

The test detects the presence of Plasmodium lactate dehydrogenase, an enzyme produced by all forms of the parasite.

This is only a screening test. The results are to be interpreted within the epidemiological, clinical and therapeutic context. In most of the cases, after successful anti-malarial therapy the result will turn negative. However, sometimes the clearance of parasite may take longer and test may remain positive. In such cases the test should be repeated after 5-10 days of start of treatment. The possibility of resistant strain of malaria should always be considered if the reaction of the test remains positive with after 5-10 days post treatment.



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DEPARTMENT OF BIOCHEMISTRY						
Test Name	Result	Unit	Bio. Ref. Range	Method		
LIVER FUNCTION TEST (LFT), SERUM			2			
BILIRUBIN, TOTAL	0.40	mg/dL	0.20-1.20	Colorimetric		
BILIRUBIN CONJUGATED (DIRECT)	0.10	mg/dL	0.0-0.3	Calculated		
BILIRUBIN (INDIRECT)	0.30	mg/dL	0.0-1.1	Dual Wavelength		
ALANINE AMINOTRANSFERASE (ALT/SGPT)	51	U/L	<50	Visible with P-5-P		
ASPARTATE AMINOTRANSFERASE (AST/SGOT)	41.0	U/L	17-59	UV with P-5-P		
ALKALINE PHOSPHATASE	66.00	U/L	38-126	p-nitrophenyl phosphate		
PROTEIN, TOTAL	8.00	g/dL	6.3-8.2	Biuret		
ALBUMIN	4.50	g/dL	3.5 - 5	Bromocresol Green		
GLOBULIN	3.50	g/dL	2.0-3.5	Calculated		
A/G RATIO	1.29		0.8-1.2	Calculated		



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DEPARTMENT OF CLINICAL PATHOLOGY					
Test Name Result Unit Bio. Ref. Range Method					





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DEPARTMENT OF CLINICAL PATHOLOGY							
Test Name	Result	Unit	Bio. Ref. Range	Method			
COMPLETE URINE EXAMINATION , URINE							
PHYSICAL EXAMINATION							
COLOUR	PALE YELLOW		PALE YELLOW	Visual			
TRANSPARENCY	CLEAR		CLEAR	Visual			
рН	5.0		5-7.5	Dipstick			
SP. GRAVITY	1.025		1.002-1.030	Dipstick			
BIOCHEMICAL EXAMINATION							
URINE PROTEIN	NEGATIVE		NEGATIVE	Dipstick/Heat test			
GLUCOSE	NEGATIVE		NEGATIVE	Dipstick/Benedicts Test			
URINE BILIRUBIN	NEGATIVE		NEGATIVE	Dipstick/Fouchet Test			
URINE KETONES (RANDOM)	NEGATIVE		NEGATIVE	Dipstick/Rotheras Test			
UROBILINOGEN	NORMAL		NORMAL	Dipstick/Ehrlichs Test			
BLOOD	NEGATIVE		NEGATIVE	Dipstick			
NITRITE	NEGATIVE		NEGATIVE	Dipstick			
LEUCOCYTE ESTERASE	NEGATIVE		NEGATIVE	Dipstick			
CENTRIFUGED SEDIMENT WET MO	ÚNT AND MICROSCOPY						
PUS CELLS	3-4	/hpf	0-5				
EPITHELIAL CELLS	1-2	/hpf	<10				
RBC	NIL	/hpf	ABSENT				
CASTS	NIL		ABSENT				
CRYSTALS	ABSENT		ABSENT				

*** End Of Report ***

Dr.Sukumar Sannidhi MD(Path) Consultant Pathologist

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