

Patient

Girish vanamadi , Male, 27 Yrs
 Mobile: +91-9666654204
 UHID: APK2.0001253217

Date: Sunday, 21 Jul 2024
 Time: 9:18 PM
 Consult Type: Online
 Appointment ID: 14025150

Chief Complaints

- Fever since 3 days, running nose and cough.

Vitals (as declared by patient):

Weight: 112 Kgs, Height: "5'11" ft., Drug Allergies: I don't know, Diet Allergies/Restrictions: No allergies

Diagnosis/ Provisional Diagnosis

- Upper respiratory tract infection/ Influenza like illness

Medication Prescribed

Click To Order Medicine >

| Medicine Name | Dosage | Medicine Details | Duration |
|---|--|---|----------|
| 1. MONTEK FX TABLET 10'S Contains: FEXOFENADINE (120 MG) + MONTELUKAST (10 MG) | Tablet Montek- Fx 120 mg 1 tablet after food at bed time for 7 days | - | - |
| 2. BETADINE 2% MINT GARGLE 100 ML Contains: Povidone Iodine (2 %W/V) | Betadine 2% Mint Gargle 5ml in warm water to be gargled twice a day. | - | - |
| 3. SOMPRAZ 40 TABLET 15'S Contains: ESOMEPRAZOLE (40 MG) | 1 - 0 - 0 - 0 M- N - E - N | TABLET Once a day Orally. Before food | 5 days |
| 4. DOLO-650 TABLET 15'S Contains: PARACETAMOL (650 MG) Fever | ----- 1 ----- | TABLET As needed Orally. After food | 3 days |
| 5. ANTIFLU 75 MG CAPSULE 10'S Contains: OSELTAMIVIR (75 MG) H1N1 | 1 - 0 - 0 - 1 M- N - E - N | CAPSULE Twice a day Orally. After food | 5 days |

M-N-E-N: Morning - Noon - Evening - Night

Instruction

NOTE: Medicine Substitution Allowed Wherever Applicable.

Diagnostic Tests

Click To Book Test >

- H1N1 - PCR
- H3N2 PCR
- COVID 19 RTPCR WITH HOME COLLECTION
- DENGUE NS1 ANTIGEN - ELISA

Instruction

Disclaimer:

This prescription was generated digitally by **Dr. Swarna Deepak K** on **21/07/2024**, based on your inputs during tele-consultation. It is valid from the date of issue until the specific period/dosage of each medicine as advised.



Dr. Swarna Deepak K

MBBS: MD (Internal Medicine) MRCP (UK), EDIC (European Diploma in Critical Care), IDCCM, IFCCM (Critical Care), FID (Royal Liverpool Academy)
General Physician/ Internal Medicine
Reg.No. 56079

Apollo Hospitals Jubilee Hills, Road Number 72, Hyderabad,
Telangana, 500033

+91-80471 04009 Helpdesk@apollo247.com

Advice & Instructions

- Adequate voice rest, Fluid intake, Temperature monitoring 8 th hourly. Steam inhalation with karvol plus capsules twice a day.



Scan QR Code
to book follow-up consultation with doctor

Disclaimer:

This prescription was generated digitally by **Dr. Swarna Deepak K** on **21/07/2024**, based on your inputs during tele-consultation. It is valid from the date of issue until the specific period/dosage of each medicine as advised.

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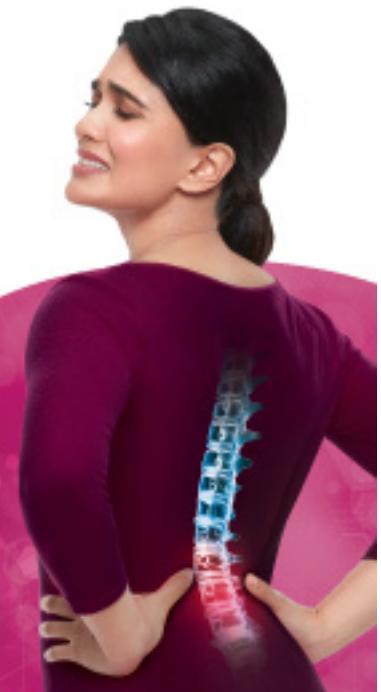
**Improves Bone
Strength in 6 Months***

 Exclusively for **24/7** customers

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31%
OFF**

EXCLUSIVE OFFER

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*Refer to pack for details. T&C apply.

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**FLAT 15% Cashback +
Free Delivery on Medicines**

1 FREE Lab Test

[CHECK PREMIUM](#)

*TCA

| | | | |
|--------------|----------------------|-----------------|--|
| Patient Name | : Mr.GIRISH VANAMADI | Collected | : 20/Jul/2024 12:54PM |
| Age/Gender | : 27 Y 1 M 5 D /M | Received | : 21/Jul/2024 01:58PM |
| UHID/MR No | : APK2.0001253217 | Reported | : 21/Jul/2024 07:08PM |
| Visit ID | : DPVMOPV797 | Status | : Final Report |
| Ref Doctor | : Dr.SELF | Client Name | : PUP 24X7_CREDIT |
| IP/OP NO | : | Center location | : Rtc complex road, kakinada,East Godavari |

DEPARTMENT OF MOLECULAR BIOLOGY

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|--------------|------|-----------------|---------------|
| H1N1 - PCR , NASOPHARYNGEAL SWAB AND ORAL SWAB | | | | |
| H1N1 - PCR | DETECTED | | NOT DETECTED | Real Time PCR |
| Influenza A | NOT DETECTED | | NOT DETECTED | Real Time PCR |
| Influenza A (H1N1 2009) | NOT DETECTED | | NOT DETECTED | Real Time PCR |
| Influenza B | DETECTED | | NOT DETECTED | Real Time PCR |
| FINAL INTERPRETATION | DETECTED | | | |

SRF ID : no

Comment:

Clinical Background:

- Swine flu is a respiratory disease caused by influenza virus. The causative virus of the swine influenza is the H1N1 Influenza A.
- The symptoms include: fever, chills, upper respiratory tract symptoms (rhinorrhea, cough, sore throat, watery eyes, redness of eyes and oropharyngeal mucosa), malaise, myalgia, arthralgia, headache, dyspnea, tachypnea, vomiting and diarrhea.

Interpretation:

- Results of the panel are intended to aid in the diagnosis of the illness and need to be correlated clinically.
- A “NOT DETECTED” result does not rule out infection. A careful consideration to combination of epidemiological factors, clinical history, examination, other relevant investigation findings and treatment history should be done.
- A “NOT DETECTED” result may also not rule out the possibility of infection with other viruses or other infectious microorganisms

Test Limitations:

- A Detected result does not distinguish between a viable/ replicating organism and a non-viable organism nor does it rule out co-infections by organisms not present in the panel.
- As nucleic acid may persist for days to weeks even following appropriate therapy, this test is not recommended as a test of cure.
- Sensitivity of this test depends upon the quality of the sample submitted for testing.
- False Negative results may be seen in samples collected too early or too late in the clinical course of the illness.
- False Positive results for influenza A may occur in patients who have had recent administration of nasal influenza vaccine or due to infection by other influenza viruses. Comments: Kindly consult referring Physician/ Authorized Govt. hospital for appropriate follow up.

Notes:

Details of all the positive patients will be communicated to Epidemiology Cell – BMC. Please ensure to notify the local / state/ federal authorities as per the existing rules/regulations.

Associated test:

Page 1 of 2

Dr.THISHYA KALLURI
PhD
Consultant Molecular

SIN No:MO02959398

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



| | | | |
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DEPARTMENT OF MOLECULAR BIOLOGY

- Flu panel by Real Time PCR - Test code (F0105)
- Respiratory panel by Filmarray Biofire - Test code (R0066)

References: CDC Realtime RTPCR (rRTPCR) Protocol for Detection and Characterization of Swine Influenza (version 2009)

*** End Of Report ***



Page 2 of 2

Dr.THISHYA KALLURI
PhD
Consultant Molecular

SIN No:MO02959398

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



Apollo Health and Lifestyle Limited

(CIN - U85110TG2000PLC115819)

Corporate Office: 7-1-617/A, 7th Floor, Imperial Towers, Ameerpet, Hyderabad-500016, Telangana

Ph No: 040-4904 7777 | www.apollohl.com | Email ID:enquiry@apollohl.com

| | | | |
|--------------|----------------------|-----------------|--|
| Patient Name | : Mr.GIRISH VANAMADI | Collected | : 20/Jul/2024 11:42AM |
| Age/Gender | : 27 Y 1 M 5 D /M | Received | : 21/Jul/2024 01:55PM |
| UHID/MR No | : APK2.0001253217 | Reported | : 21/Jul/2024 05:57PM |
| Visit ID | : DPVMOPV797 | Status | : Final Report |
| Ref Doctor | : Dr.SELF | Client Name | : PUP 24X7_CREDIT |
| IP/OP NO | : | Center location | : Rtc complex road, kakinada,East Godavari |

DEPARTMENT OF MOLECULAR BIOLOGY.

COVID 19 RT PCR WITH HOME COLLECTION

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|---|-----------------|------|-----------------|--------|
| COVID-19(SARS-CoV 2)-REAL TIME PCR(RT-PCR) | | | | |
| SAMPLE TYPE | PHARYNGEAL SWAB | | | |
| SARS-CoV-2 | NOT DETECTED | | | |
| N-Gene CT VALUE | NOT DETECTED | | | |
| ORF1ab Gene CT VALUE | NOT DETECTED | | | |

SRF ID : no

Comment:

| Biological Reference Range |
|---|
| *Ct value < 35 is Positive |
| *Ct value >35 is Negative |
| |
| *Ct cutoff suggested by ICMR Ct value does not correlate with disease severity |

Please Note:

*CT values vary with the type of kit used, the types of samples collected and the various pre-analytical factors.

*The published studies are conflicting to definitively prove a direct correlation between disease severity/infectiousness and CT values therefore; relying on CT values for determining infectiousness of COVID-19 patients and deciding management protocols is left to clinical discretion.

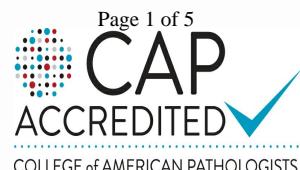
Kit used: CoviPath™ COVID-19 RTPCR KIT

| Result | Interpretation |
|---------------------------------------|---|
| Detected (Positive) Result | Indicates presence of detectable levels SARS-CoV-2 specific RNA (ORF1ab gene and/ or N gene) in patient's sample. |
| Not Detected (Negative) Result | Indicates absence of detectable levels SARS-CoV-2 specific RNA (ORF1ab gene and/ or N gene) in patient's sample. |

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DEPARTMENT OF MOLECULAR BIOLOGY.

COVID 19 RT PCR WITH HOME COLLECTION

Indeterminate Result

Indicates the target concentration is too low, or presence of interfering substances leading to PCR inhibition.

NOTE:

- If either of the genes cannot be determined or will give indeterminate results, further testing maybe required using another kit with a different primer and probe.
- A **Not Detected (Negative) Result** do not preclude SARS-CoV-2 and should not be used as the sole basis for patient management decisions. Kindly repeat test after 48 to 72 hrs if clinically suspected.
- Lower respiratory tract specimens are more representative and are preferred.
- If at a later date, suspicion of COVID-19 is strong, a fresh sample for Real Time PCR after a gap of 2-4 days after collection of first sample maybe considered.
- Please contact your Physician for necessary action to be taken and to limit the spread of infection.
- Clinical Correlation and Correlation with the history of the patient is required before arriving at any conclusion. Presence of Non-Specific interfering substances during this assay to be kept in mind. Please correlate clinically before arriving at any conclusion.
- False positive and false negative results can be due to multiple factors including sampling technique, transport & interference in the assay can affect the result.
- Presence PCR inhibitors in sample may lead to false negative or invalid results.
- Mutation in the target sequence of SARS-CoV-2 or change in the sequence due to virus evolution may lead to false negative results.
- Invalid Result: There is no typical S-shape amplification curve or Ct >35 or No Ct detected for target genes and internal control, indicating the specimen concentration is too low, or there are interfering substances that inhibit the reaction. If upon retest, the result is invalid again, another fresh sample should be collected and tested.

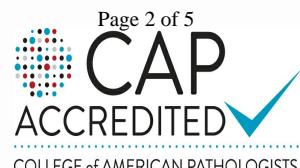
SARS-CoV-2 Virus:

SARS-CoV-2 is an enveloped single stranded positive sense RNA virus belongs to family Coronoviridae. It carries largest single stranded RNA genome of ~30kb and is the causative pathogen of ongoing COVID-19 pandemic (3). The capsid consists of the nucleocapsid protein N and this is further surrounded by a membrane, that contains three proteins: the membrane protein (M) and the envelope protein (E), which are involved in the virus budding process, and the spike glycoprotein (S), which is a key player in binding host receptor and mediating membrane fusion and virus entry into host cells (4).

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PhD
Consultant Molecular

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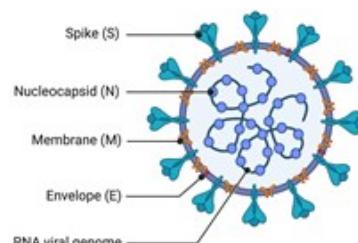
This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



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**DEPARTMENT OF MOLECULAR BIOLOGY.
COVID 19 RT PCR WITH HOME COLLECTION**

Coronavirus Structure



Disclaimer:

This Test is based on real-time reverse transcriptase PCR technology for the qualitative detection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) specific RNA

*ICMR ID-AHLLBHT- HYDERABAD

*ICMR ID-AHLVDLA- VIJAYAWADA * I C M R I D - D L U A H T M H - MUMBAI

*ICMR ID-AHLLKDLKAP- KURNOOL

* I C M R I D - A D N T K L K W B *ICMR ID-AHLLDLDD-DELHI
KOLKATA

*ICMR ID-AHLLKDIALBK- BENGALURU

* I C M R I D - A P H L I L K D L C T N *ICMR ID-AHHHSPPMH- PUNE
CHENNAI

* I C M R I D - A P H L T H L F L A D L C K -
LUCKNOW

(For kits determining RdRp gene or ORF1b, sensitivity / specificity of such kits shall be mentioned).

COVID-19 Advisory

Dr.THISHYA KALLURI
PhD
Consultant Molecular

SIN No:MO02959399

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DEPARTMENT OF MOLECULAR BIOLOGY.
COVID 19 RT PCR WITH HOME COLLECTION



Office of the Principal Scientific Adviser
to the Government of India



Stop the Transmission, Crush the Pandemic.



Dr.THISHYA KALLURI
PhD
Consultant Molecular

SIN No:MO02959399

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad

Page 4 of 5

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COLLEGE of AMERICAN PATHOLOGISTS



| | | | | |
|--------------|----------------------|-----------------|--|--|
| Patient Name | : Mr.GIRISH VANAMADI | Collected | : 20/Jul/2024 11:42AM | |
| Age/Gender | : 27 Y 1 M 5 D /M | Received | : 21/Jul/2024 01:22PM | |
| UHID/MR No | : APK2.0001253217 | Reported | : 21/Jul/2024 03:21PM | |
| Visit ID | : DPVMOPV797 | Status | : Final Report | |
| Ref Doctor | : Dr.SELF | Client Name | : PUP 24X7_CREDIT | |
| IP/OP NO | : | Center location | : Rtc complex road, kakinada,East Godavari | |

DEPARTMENT OF SEROLOGY

| Test Name | Result | Unit | Bio. Ref. Range | Method |
|----------------------------|--------|-------|-----------------|----------------------------------|
| DENGUE NS1 ANTIGEN , SERUM | 0.02 | INDEX | <1 | ELISA with Fluorescent Detection |

SRF ID : no

Comment:

| | |
|-----------------------------|----------------|
| RESULT (Dengue NS1 Antigen) | INTERPRETATION |
| <1 INDEX | NEGATIVE |
| ≥1 INDEX | POSITIVE |

This is only a screening test and will only indicate the presence or absence of Dengue NS1 antigen in the specimen. All reactive samples should be confirmed by confirmatory test.

Results should be interpreted after taking into consideration the patient's clinical history and symptomatology. False positive results can be obtained due to cross reaction with Murray Valley and encephalitis, Japanese encephalitis, yellow fever and West Nile viruses

*** End Of Report ***

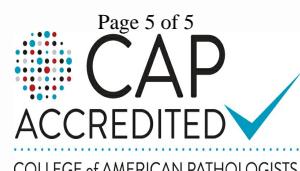
Result/s to Follow:
H1N1 - PCR



DR.MIR SALMAN ALI
M.B.B.S,MD
Consultant Microbiologist

SIN No:SE02230339

This test has been performed at Apollo Health & Lifestyle Ltd, Global Reference Laboratory, Hyderabad



PatientGirish Vanamadi, Male, 27 Yrs
Mobile: +91-9666654204
UHID: APK2.0001253217Date: Saturday, 20 Jul 2024
Time: 9:41 AM
Consult Type: Online
Appointment ID: 14025150**Chief Complaints**

- Fever since 3 days, running nose and cough.

Vitals (as declared by patient):

Weight: 112 Kgs, Height: "5'11" ft., Drug Allergies: I don't know, Diet Allergies/Restrictions: No allergies

Diagnosis/ Provisional Diagnosis

- Upper respiratory tract infection/ Influenza like illness

Medication Prescribed Click To Order Medicine >

| Medicine Name | Dosage | Medicine Details | Duration |
|--|--|---|----------|
| 1. MONTEK FX TABLET 10'S Contains: FEXOFENADINE (120 MG) + MONTELUKAST (10 MG) | Tablet Montek- Fx 120 mg 1 tablet after food at bed time for 7 days | - | - |
| 2. BETADINE 2% MINT GARGLE 100 ML Contains: Povidone Iodine (2 %W/V) | Betadine 2% Mint Gargle 5ml in warm water to be gargled twice a day. | - | - |
| 3. SOMPRAZ 40 TABLET 15'S Contains: ESOMEPRAZOLE (40 MG) | 1 - 0 - 0 - 0 M- N - E - N | TABLET Once a day Orally. Before food | 5 days |
| 4. PYRIGESIC 1000 MG TABLET 10'S Contains: PARACETAMOL (1000 MG) ① If fever/headache/body aches not controlled by paracetamol 650 mg | ----- 1 ----- | TABLET As needed Orally. After food | 3 days |
| 5. RESWAS SYRUP 120 ML Contains: CHLORPHENIRAMINE MALEATE (2 MG) + LEVODROPROPIZINE (30 MG) | 10 ml per oral thrice a day(cough) | - | - |
| 6. DOLO-650 TABLET 15'S Contains: PARACETAMOL (650 MG) ① Fever | 1 - 1 - 1 - 1 M- N - E - N | TABLET Four times a day Orally. After food | 3 days |

M-N-E-N: Morning - Noon - Evening - Night

① Instruction

NOTE: Medicine Substitution Allowed Wherever Applicable.

Diagnostic Tests Click To Book Test >**Disclaimer:**

This prescription was generated digitally by Dr. Swarna Deepak K on 20/07/2024, based on your inputs during tele-consultation. It is valid from the date of issue until the specific period/dosage of each medicine as advised.

-
1. H1N1 - PCR
 2. H3N2 PCR
 3. COVID 19 RTPCR WITH HOME COLLECTION
 4. DENGUE NS1 ANTIGEN - ELISA
-

 Instruction

Advice & Instructions

- To upload the reports
- Adequate voice rest, Fluid intake, Temperature monitoring 8 th hourly. Steam inhalation with karvol plus capsules twice a day.



Scan QR Code
to book follow-up consultation with doctor

Disclaimer:

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& Unlock**

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Free Delivery on Medicines**

1 FREE Lab Test

CHECK PREMIUM

*TCA



Kakinada Main Branch RT-PCR Lab

Quality Care Lab

Speciality Lab @ 24 hrs



| | | | |
|---------------|-------------------|--------------------|--------------------------|
| Patient Name | : Mr. V. GIRRISH | Aadhar No | : |
| Sex / Age | : Male / 28 Years | Client Code | : QCLAP - 17 |
| Ref. Doctor | : | Reg. On | : 21-07-2024 02:30:00 PM |
| Ref. Customer | : SELF | Sample Received On | : 21-07-2024 02:32:00 PM |
| Test ID | : 602419 | Reported On | : 21-07-2024 03:45:00 PM |

DEPARTMENT OF HAEMATOLOGY AND CLINICAL PATHOLOGY

| TEST NAME | RESULT | UNITS | BIO.REFERENCE INTERVAL |
|-----------|--------|-------|------------------------|
|-----------|--------|-------|------------------------|

COMPLETE BLOOD COUNT:

| | | | |
|-----------------|-------|-----------|--------------|
| Haemoglobin | 16.1 | gms% | 13 - 18 |
| PCV | 50.1 | Vol % | 39 - 54 |
| RBC Count | 5.78 | M/cmm | 4.2 - 6.5 |
| MCV | 86.6 | f l | 75 - 95 |
| MCH | 27.8 | pg | 26 - 32 |
| MCHC | 32.1 | % | 31 - 36 |
| Total WBC Count | 8,500 | /cmm | 4000 - 11000 |
| Platelet Count | 2.64 | lakhs/cmm | 1.4 - 4.4 |

DIFFERENTIAL COUNT:

| | | | |
|-------------|----|--------|---------|
| Neutrophils | 58 | % | 45 - 75 |
| Lymphocytes | 34 | % | 20 - 45 |
| Eosinophils | 03 | % | 01 - 06 |
| Monocytes | 05 | % | 02 - 10 |
| Basophils | 0 | % | 00 - 01 |
| E.S.R. | 08 | mm/ hr | 00 - 10 |



Dr. K. Srikanth Reddy, MD
Consultant Pathologist

LAB Technician

Home Collection Available on prior appointment

Date : 19/7/29

Ans

P.W

20m oral C
Furosemide 10
as per prescription
Mucilin C

Catapox 10

ID. NO: AI98

NAME: VANAMADI GIRISHI

Ref by Dr: KALADI KRISHNA (PMP)

MALE / 28 Yrs

DATE: 19-07-2024

HEMOGRAM

| <u>INVESTIGATIONS</u> | <u>RESULTS</u> | <u>NORMAL VALUES</u> |
|---------------------------|-------------------------------|-----------------------------------|
| HEMOGLOBIN | 15.4 gms% | 13 - 17 gms% |
| RBC COUNT | 5.56 million cells/cu.mm | 4.5 – 5.5 million cells/cu.mm |
| HCT | 46.6 % | 40 - 50 % |
| MCV | 83.8 fl | 83 – 101 fl |
| MCH | 27.7 pg | 27 – 32 pg |
| MCHC | 33.0 gm/dl | 31 – 34 gm/dl |
| TWBC COUNT | 7,600 cells/cu.mm | 4,000 – 12,000 cells/cu.mm |
| DIFFERENTIAL COUNT | | |
| NEUTROPHILS | 53 % | 40 – 70% |
| LYMPHOCYTES | 35 % | 20 – 45% |
| MONOCYTES | 02 % | 2 – 10% |
| EOSINOPHILS | 10 % | 2 – 6% |
| PLATELET COUNT | <u>2.70 lakhs / cu.mm</u> | 1.5 – 4.0 lakhs / cu.mm |
| BLEEDING TIME | 01 min 30 sec | 1 – 3 minutes |
| CLOTTING TIME | 03 min 30 sec | 3 – 7 minutes |
| ESR | 24 mm in 1 st hour | 0 – 10 mm in 1 st hour |
| RETICULOCYTE COUNT | 0.8 % | 0.5 – 2.5% |

CONTD.

NAME: VANAMADI GIRISH

Ref by Dr: KALADI KRISHNA (PMP)

2-4-12, Murali Street, Sri Nagar,
Bhanugudi Junction, Kakinada-533 003, A.P.
Contact Numbers : 0884-2384858, 94910 69686

MALE / 28 Yrs

DATE: 19-07-2024

PERIPHERAL SMEAR

RBC : Normocytic normochromic type

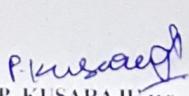
WBC : Total count is normal.
Differential count shows eosinophilia.

PLATELETS : Adequate.
No hemoparasites and no abnormal cells are seen.

IMPRESSION : Eosinophilia.

SUGGESTED CLINICAL CORRELATION.
IF THERE IS NEED KINDLY DISCUSS.
Typed by thrimurtulu

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PATHOLOGIST


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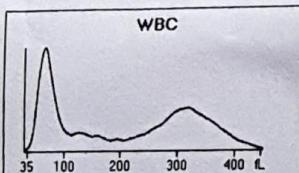
- Note: * The reported above results are for the reference of referring doctor only.
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Tube Pos ID: 00021, ---
Specimen Type: Whole blood
Physician:

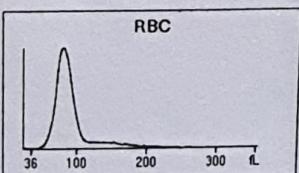
Panels: CD
Flag Set: Adult
Priority: Routine
Diagnosis:

Name: Patient ID: A198 V GIRISH
Gender: Male Age: 28 Years
Location: DOB:
Comment:

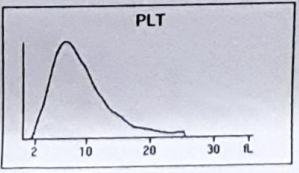
| Panels | Date | Time | Tube Pos | Instrument | Opr ID | Exceptions |
|-------------|----------------|--------------|--------------------|------------|--------|----------------|
| CD | (C) 07/19/2024 | 07:07:00 PM | 00021 | RBA31029 | SYSTEM | |
| Test | Result | Flags | Units | | | Suspect |
| WBC | 7.6 | | $10^3/\mu\text{L}$ | | | Seg |
| UWBC | 7.6 | | $10^3/\mu\text{L}$ | | | Band |
| RBC | 5.56 | H | $10^6/\mu\text{L}$ | | | Lymph |
| HGB | 15.4 | | g/dL | | | Mono |
| HCT | 46.6 | | % | | | Eos |
| MCV | 83.8 | | fL | | | Baso |
| MCH | 27.7 | | pg | | | Meta |
| MCHC | 33.0 | | g/dL | | | Myelo |
| RDW | 14.2 | | % | | | Pro |
| RDW-SD | 42.0 | | fL | | | Blast |
| PLT | 270 | | $10^3/\mu\text{L}$ | | | ATL |
| MPV | 8.5 | | fL | | | Other |
| NE | 49.6 | | % | | | NRBC |
| LY | 35.0 | | % | | | Aniso |
| MO | 11.1 | | % | | | Poik |
| EO | 3.5 | | % | | | Polychr |
| BA | 0.8 | | % | | | Hypo |
| NE# | 3.7 | | $10^3/\mu\text{L}$ | | | Micro |
| LY# | 2.6 | | $10^3/\mu\text{L}$ | | | Macro |
| MO# | 0.8 | | $10^3/\mu\text{L}$ | | | Other |
| EO# | 0.3 | | $10^3/\mu\text{L}$ | | | Reviewed by |
| BA# | 0.1 | | $10^3/\mu\text{L}$ | | | Comment |
| NRBC | 0.1 | | /100WBC | | | |
| NRBC# | 0.01 | | $10^3/\mu\text{L}$ | | | |



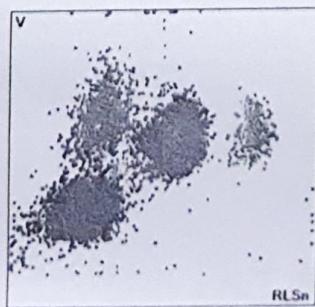
WBC



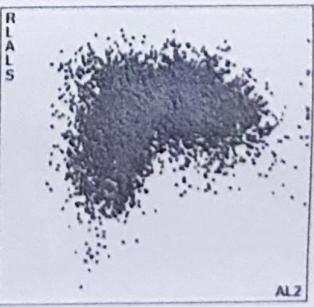
RBC



PLT



5PD1



NRBC1

RL5R
AL2

Actions:

Comment:



Abbott

Dengue

WB

198

C M G

10 μ l

15-20 min

1

2

NS1 Ag



NAME: VANAMADI GIRISH
AGE / SEX: 28 / M
REF: KALADI KRISHNA.

2-4-12, Murali Street, Sri Nagar,
Bhanugudi Junction, Kakinada-533 003, A.P.
Contact Numbers : 0884-2384858, 94910 69686

COLLECTION DATE, TIME: 19/07/2024, 18:33
REPORTING DATE, TIME : 19/07/2024, 07:55
PATIENT ID: A198

INVESTIGATIONS

BLOOD FOR MALARIAL PARASITE (Q.B.C) : NEGATIVE

BLOOD FOR DENGUE

| | |
|-----------------------|-----------------|
| Ig/G ANTIBODIES | : WEAK POSITIVE |
| Ig/M ANTIBODIES | : NEGATIVE |
| (RAPID) ANTIGEN (NS1) | : NEGATIVE |

* TEST DEVICE ISSUED

RESULTS

***** END OF REPORT *****

T. SURESH, MSc(BIOCHEM)MLT
SENIOR BIO-CHEMIST.

B.INDRAPRIYA DARSHINI
MSc (MICRO)PG, DMLT (NIMS)

SUGGESTED CLINICAL CORRELATION, IF THERE IS NEED, KINDLY DISCUSS.

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- * Test results of investigations are influenced by various factors such as sensitivity and specificity of test procedures, drug interactions and quality of sample. Hence reports have limitations.

NAME: VANAMADI GIRISH
 AGE / SEX: 28 / M
 REF: KALADI KRISHNA.

COLLECTION DATE, TIME: 19/07/2024, 18:33
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WIDAL TEST:

INVESTIGATIONS

RESULTS

| | | |
|----------------------------|---|------------------|
| SALMONELLA TYPHI 'O' | : | 1 : 80 DILUTIONS |
| SALMONELLA TYPHI 'H' | : | 1 : 80 DILUTIONS |
| SALMONELLA PARA TYPHI 'AH' | : | 1 : 20 DILUTIONS |
| SALMONELLA PARA TYPHI 'BH' | : | 1 : 20 DILUTIONS |

Method: Slide Agglutination

***** END OF REPORT *****

- Note:** 1. Titres of 1:80 and above of 'O' antigen and 1:160 and above of 'H' antigen are significant.
 2. Rising titres are significant.
 3. Repeat after 7 days for rising titre, if clinically indicated.

Comments: The test measures somatic 'O' and flagellar 'H' antibodies against Typhoid and Paratyphoid bacilli. The agglutination usually appear at the end of the first week of infection and increased steadily till third/fourth week after which the decline starts. A significant Widal titre may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases. The test may be falsely negative in case of enteric fever treated with antibiotics in the early stages. The recommended test specially in the first week of infection is blood culture.

T. SURESH, MSc(BIOCHEM)MLT
 SENIOR BIO-CHEMIST.

Belle
 B.INDIRAPRIYA BARSHINI
 MSc (MICRO)PG, DMI-T (NIMS)

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