# COSMOPOLITAN SP YOUR HEALTH OUR PRIORIY



**PHONE** 

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#### **CLIENT DETAILS**

CLIENT NAME : TWILUMBA MHALILA

AGE : 23 : 255682830868 ID : CMS/2020/05/5154

**ATTENDED on** : 2021-04-28

ATTENDED by : Dr.Effesso Braston Kaguo

#### **CLINICAL HISTORY:**

SEEN PT KNOWN PT WITH ANEMIA CC; HEADACHE EASY FATIGABILITY

#### **EXAMINATION:**

CLINICALLY STABLE.

#### FINAL DIAGNOSIS

CODE	DISEASE NAME
D50	Iron deficiency anemia
N39	Other disorders of urinary system
R51	Headache
N39	Other disorders of urinary system
G43	Migraine

## PATHOLOGY REPORT

## URINE-ANALYSIS RESULTS

Type Name	Result	Ref. Range	
Appearance	CLEAR YELLOW		
Microscopic	FEW PUS CELLS		
Bilirubin	Negative Negative		
Ketone	Negative	Negative	
Blood	Negative	Non hemolysed	
Protein	Negative	Negative	
Nitrite	Negative Negative		
Leukocytes	+15wbc/ml Negative		
Glucose	Negative	Negative	
Specific Gravity	1.000	1.000	
рН	5.0	5.0	
Urobilinogen	Normal	Normal	

Test Name	Unit	Result	Ref. Range
MALARIA(mRDT)		Negative	-

### FULL-BLOOD-PICTURE RESULTS

Type Name	Result	Ref. Range
WBC	9.5	4.0 - 10.0
LYM%	23.5	0.20 - 0.40
MID%	6.5	1.0 - 15.0
GRAN%	56.9	50.0 - 70.0
LYM#	3.5	0.6 - 4.1
MID#	0.7	0.1 - 1.8
GRAN#	3.5	0.2 - 7.8
RBC	3.54	3.50 - 8.50
HGB	12.0	11.0 - 16.0
НСТ	43.8	36.0 - 48.0
MCV	38.9	37.0 - 54.0
МСН	31.8	26.0 - 32.0
MCHC	33.9	32.0 - 36.0
RDW-SD	43.8	37.0 - 54.0
RDW-CV	13.8	11.5 - 14.5
PLT	234	100.0 - 450.0
MPV	8.0	7.4 - 12.0
PDW	12.5	10.0 - 17.0
PCT	0.12	0.10 - 0.28
P-LCR		0.13 - 43.0

Lab Technologist: Cathbert M Msema

----\*\*End of PATHOLOGY Report\*\*-----

## **PHARMACY**

Item Name	Formulation	Prescription	Quantity
IBUPROFEN TABS	400mg	TID/TDS	18
AZITHROMYCIN TABLETS	500mg	OD	5
FERROUS AND FOLIC ACID CAP	205mg	OD	30

**Pharmacist: LUCY ABEL LWIMIKO**