



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 05:30PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

COMPLETE BLOOD COUNT (CBC)				
Sample Type : WHOLE BLOOD EDTA				

HAEMOGLOBIN (Hb)	14.9	gm/dL	13.0 - 17.0	N-Cyanmethemoglobin
-------------------------	------	-------	-------------	---------------------

RED BLOOD CELL (RBC) COUNT	5.45	million/ μ L	4.5 - 5.5	Electrical Impedance
-----------------------------------	------	------------------	-----------	----------------------

PCV / HAEMATOCRIT	47.4	%	40.0 - 50.0	RBC pulse height detection
--------------------------	------	---	-------------	----------------------------

MEAN CORPUSCULAR VOLUME (MCV)	86.9	fL	83.0 - 101.0	Automated/Calculated
--------------------------------------	------	----	--------------	----------------------

MEAN CORPUSCULAR HAEMOGLOBIN (MCH)	27.3	pg	27.0 - 32.0	Automated/Calculated
---	------	----	-------------	----------------------

MEAN CORPUSCULAR HAEMOGLOBIN CONCENTRATION (MCHC)	31.4 L	g/dL	31.5 - 34.5	Automated/Calculated
--	---------------	------	-------------	----------------------

TOTAL LEUCOCYTE COUNT (TLC)	6.73	$10^3/\mu$ L	4.0 - 10.0	Flow Cytometry
------------------------------------	------	--------------	------------	----------------

DIFFERENTIAL LEUCOCYTE COUNT (DLC)				
---	--	--	--	--

NEUTROPHILS	54.6	%	40.0 - 80.0	Flow Cytometry
--------------------	------	---	-------------	----------------

LYMPHOCYTES	39.6	%	20.0 - 40.0	Flow Cytometry
--------------------	------	---	-------------	----------------

EOSINOPHILS	2.3	%	1.0 - 6.0	Flow Cytometry
--------------------	-----	---	-----------	----------------



Scan Me For Authentication



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 05:30PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
MONOCYTES	3.2	%	2.0 - 10.0	Flow Cytometry

BASOPHILS	0.3	%	0.0 - 2.0	Flow Cytometry
-----------	-----	---	-----------	----------------

PLATELET COUNT (PC)	167	x1000/ μ L	150 - 410	Automated/Microscopy
----------------------------	-----	----------------	-----------	----------------------

CLINICAL SIGNIFICANCE:

- Platelets also called thrombocytes are a component of blood whose function (along with the coagulation factors) is to react to bleeding from blood vessel injury by clumping, thereby initiating a blood clot.
- Platelets have no cell nucleus; they are fragments of cytoplasm that are derived from the megakaryocytes of the bone marrow or lung, which then enter the circulation.
- Circulating inactivated platelets are biconvex discoid (lensshaped) structures, 2–3 μ m in greatest diameter. Activated platelets have cell membrane projections covering their surface.
- On a stained blood smear, platelets appear as dark purple spots, about 20% the diameter of red blood cells. The smear is used to examine platelets for size, shape, qualitative number, and clumping.



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 05:30PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

RDW-CV	13.2	%	11.5 - 14.5	Automated/Calculated
--------	------	---	-------------	----------------------

RDW-SD	41.3	fL	35.0 - 56.0	Automated/Calculated
--------	------	----	-------------	----------------------

RDW INDEX	210.5		< 220:Likely Thalassemia > 220:Likely Iron Deficiency	Automated/Calculated
-----------	-------	--	--	----------------------

MENTZER INDEX	15.9		< 13:Likely Thalassemia > 13:Likely Iron Deficiency	Automated/Calculated
---------------	------	--	--	----------------------

ABSOLUTE NEUTROPHIL COUNT	3.67	10 ³ /μL	2.0 - 7.0	Automated/Calculated
---------------------------	------	---------------------	-----------	----------------------

ABSOLUTE LYMPHOCYTE COUNT	2.67	10 ³ /μL	1.0 - 3.0	Automated/Calculated
---------------------------	------	---------------------	-----------	----------------------

ABSOLUTE EOSINOPHIL COUNT	0.15	10 ³ /μL	0.02 - 0.5	Automated/Calculated
---------------------------	------	---------------------	------------	----------------------

ABSOLUTE MONOCYTE COUNT	0.22	10 ³ /μL	0.2 - 1.0	Automated/Calculated
-------------------------	------	---------------------	-----------	----------------------

ABSOLUTE BASOPHIL COUNT	0.02	10 ³ /μL	0.02 - 0.1	Automated/Calculated
-------------------------	------	---------------------	------------	----------------------

MPV	13.5 H	fL	6.5 - 12.0	Automated/Calculated
-----	---------------	----	------------	----------------------

PCT	0.225	%	0.150 - 0.620	Automated/Calculated
-----	-------	---	---------------	----------------------

P - LCC	93.0 H	10 ⁹ /L	30.0 - 90.0	Automated/Calculated
---------	---------------	--------------------	-------------	----------------------

P - LCR	55.8 H	%	11.0 - 45.0	Automated/Calculated
---------	---------------	---	-------------	----------------------

PDW-SD	23.4	fL	8.1 - 25.0	Automated/Calculated
--------	------	----	------------	----------------------



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 05:30PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF HAEMATOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
PDW-CV	17.4	%	10.0 - 17.9	Automated/Calculated

INTERPRETATION:

- A complete blood count (CBC) is a blood test used to evaluate your overall health and detect a wide range of disorders, including anemia, infection and leukemia. Abnormal increase or decrease in cell counts as revealed in a complete blood count may indicate that you have an underlying medical condition that calls for further evaluation.
- Abnormal results have been further confirmed by microscopy. Test conducted on EDTA whole blood.
- As per the recommendation of International council for Standardization in Hematology, the differential leucocyte counts are additionally being reported as absolute numbers of each cell in per unit volume of blood.
- The complete blood count is an essential tool of haematology, which is the study of the cause, prognosis, treatment, and prevention of diseases related to blood. The results of the CBC and smear examination reflect the functioning of the haematopoietic system—the organs and tissue involved in the production and development of blood cells, particularly the bone marrow. For example, a low count of all three cell types (pancytopenia) can indicate that blood cell production is being affected by a marrow disorder, and a bone marrow examination can further investigate the cause.
- Abnormal cells on the blood smear might indicate acute leukemia or lymphoma, while an abnormally high count of neutrophils or lymphocytes, in combination with indicative symptoms and blood smear findings, may raise suspicion of a myeloproliferative disorder or lymphoproliferative disorder. Examination of the CBC results and blood smear can help to distinguish between causes of anemia, such as nutritional deficiencies, bone marrow disorders, acquired hemolytic anaemias and inherited conditions like sickle cell anaemia and thalassemia.



Scan Me For Authentication



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 06:26PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF HAEMATOLOGY

PERIPHERAL SMEAR

PERIPHERAL SMEAR

RBC series:

- Normocytic normochromic red cells. No schistocytes are seen.
- No target cells are seen. No immature RBC precursors are seen.

WBC series:

- Total leucocyte count within normal range.
- Differential cell count within normal reference range.
- No toxic granules seen. No blast seen.

Platelet series:

- Platelets are adequate in number and are normal in morphology.

Hemoparasite:

- Not seen.

Impression: Normocytic normochromic blood picture.

Kindly correlate clinically.



Scan Me For Authentication



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 05:47PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF BIOCHEMISTRY

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

TOTAL, DIRECT & INDIRECT BILIRUBIN

Sample Type : Serum

TOTAL BILIRUBIN	0.68	mg/dL	0.0 - 1.3	Diazo
-----------------	------	-------	-----------	-------

DIRECT/CONJUGATED BILIRUBIN	0.27	mg/dL	0.0 - 0.4	Diazo
-----------------------------	------	-------	-----------	-------

INDIRECT/UNCONJUGATED BILIRUBIN	0.41	mg/dL	0.0 - 1.0	Calculated
---------------------------------	------	-------	-----------	------------

SGPT (ALT)

Sample Type : Serum

SGPT/ALT - ALANINE TRANSAMINASE	83.4 H	U/L	0.0 - 45.0	IFCC, without P5P
---------------------------------	---------------	-----	------------	-------------------

SIGNIFICANCE:

- Liver function tests are blood tests used to diagnose and monitor liver disease or damage.
- Liver function tests can be used to screen for liver infections, such as hepatitis, measure the severity of a disease, particularly scarring of the liver (cirrhosis) and monitor possible side effects of medications.
- In an asymptomatic patient, Non alcoholic fatty liver disease (NAFLD) is the most common cause of increased AST, ALT levels. NAFLD is considered as hepatic manifestation of metabolic syndrome.



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 06:29PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
-----------	--------	------	-----------------	--------

URINE ROUTINE EXAMINATION

Sample Type : URINE

PHYSICAL EXAMINATION

QUANTITY	10	ml		
----------	----	----	--	--

COLOUR	PALE YELLOW		PALE YELLOW	
--------	-------------	--	-------------	--

TRANSPARENCY	CLEAR		CLEAR	
--------------	-------	--	-------	--

SPECIFIC GRAVITY	1.025		1.000 - 1.030	Ion exchange
------------------	-------	--	---------------	--------------

CHEMICAL EXAMINATION

pH	5.0		5 - 7	Double Indicator
----	-----	--	-------	------------------

PROTEIN	Negative		Negative	Sulphosalicylic acid
---------	----------	--	----------	----------------------

GLUCOSE	Negative		Negative	Benedicts
---------	----------	--	----------	-----------

UROBILINOGEN	Normal		Normal	Ehrlichs Reaction
--------------	--------	--	--------	-------------------

KETONES	Negative		Negative	Nitroprusside
---------	----------	--	----------	---------------

BILIRUBIN	Negative		Negative	Azo-coupling Reaction
-----------	----------	--	----------	-----------------------

BLOOD	Negative		Negative	Pseudo-peroxidase
-------	----------	--	----------	-------------------

LEUCOCYTE ESTERASE	Negative		Negative	Enzymatic Reaction
--------------------	----------	--	----------	--------------------



Patient Name : Mr.DEEPAK SINGH	Lab No : 100096
Age/Gender : 27 Y O M O D /Male	Reg.Date : 10/Apr/2025 03:29PM
Visit/Reg. No : STPL128319	Collected : 10/Apr/2025 03:35PM
Referred By : Dr.RAKESH MOHAN	Reported : 10/Apr/2025 06:29PM
Client Name : CC SHRI SHAI DIAGNOSTIC	Report Status : Final Report

DEPARTMENT OF CLINICAL PATHOLOGY

Test Name	Result	Unit	Bio. Ref. Range	Method
NITRITE	Negative		Negative	Griess Test

MICROSCOPIC EXAMINATION

PUS CELLS	0 - 2	cells/HPF	0 - 5	Microscopy
-----------	-------	-----------	-------	------------

RBCs	Not seen	cells/HPF	0 - 1	Microscopy
------	----------	-----------	-------	------------

EPITHELIAL CELLS	2 - 4	/HPF	0 - 5	Microscopy
------------------	-------	------	-------	------------

CRYSTALS	Not seen		Not seen	Microscopy
----------	----------	--	----------	------------

CASTS	Not seen	/LPF	Not seen	Microscopy
-------	----------	------	----------	------------

OTHER	NA		NA	Microscopy
-------	----	--	----	------------

*** End Of Report ***

Dr. Gauttam Bhatia, MD
Lab Director
Reg. No. 7669 (UKMC)