

Patient : Mr. PRINCE
Consultant : self
Address :

Age / Sex : 24 Yrs / Male
Date : 01/09/2025
Lab No. : 13416

TEST NAME	RESULT	UINITS	REF RANGE
COMPLETE BLOOD COUNTS			
HAEMOGLOBIN	14.4	gm/dL	(12 - 16)
Tech:- PHOTOMETRY			
TOTAL LEUCOCYTE COUNT			
TOTAL LEUCOCYTE COUNT	3800	/cumm	(4000 - 11000)
Tech:- IMPEDENCE			
DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHILS	69	%	(40 - 75)
LYMPHOCYTES	26	%	(20 - 45)
MONOCYTES	03	%	(01 - 08)
EOSINOPHILS	02	%	(1 - 6)
BASOPHILS	00	%	(0 - 1)
PACKED CELL VOLUME	43.2	%	(35 - 48)
Tech:- NUMERIC INTEGRATION			
RBC	5.24	m/cumm	(4.00 - 5.50)
Tech:- IMPEDANCE			
MCV	84.7	fL	(76 - 96)
Tech:- CALCULATED			
MCH	27.5	pg	(27 - 32)
Tech:- CALCULATED			
MCHC	32.5	%	(30 - 35)
Tech:- CALCULATED			
PLATELET COUNT	1.68	lacs/cmm	(1.5 - 4.5)
Tech:- IMPEDANCE			

WIDAL TITER

O ANTIGEN(TO)	1:80
T `H`	1:80
PARATYPHI A H ANTIGEN	1:40
PARATYPHI B H ANTIGEN	1:40

Interpretation:

Comments:

This test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli. The agglutinins usually appear at the end of the first week of infection and increase steadily till third / fourth

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week after which the decline starts. A positive Widal test may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases. Non specific febrile disease may cause this titre to increase (anamnestic reaction). The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages. The recommended test specially in the first week after infection is Blood Culture.

TECHNOLOGIST
PATHOLOGIST
PMC: 46853