

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70 years / M
UHID No. : 20190722661
Bill No. : 5200204378
Department : GASTROENTEROLOGY

Patient Type / Ward : IP / NAW
Referral : DIRECT
Organisation : DIRECT
Sample Collected On : Feb 06, 2020, 03:21 p.m.
Reported On : Feb 07, 2020, 01:13 p.m.

HISTOPATHOLOGY REPORT

ONE LARGE SPECIMEN

LAB ID NO : S-200282

CLINICAL DIAGNOSIS : P/C/O RIGHT TOTAL KNEE REPLACEMENT -S/P INFECTION

CROSS REFERENCE

SPECIMEN : SYNOVIAL TISSUE

MACRO :

Received multiple irregular grey white to grey brown soft tissue bits largest measuring 5x2.2x1.5 cm and smallest measuring 1x1 cm. Part embedded in four block

Bits - A,B -Grey brown areas from larger bit

C - Greywhite areas from larger bit

D - Smallest tissue bit

MICRO :

A to D- Section studied show fibrocollagenous and fibroadipose tissue showing proliferation of capillaries, mixed inflammatory infiltrate, myxoid change and fibrinoid material.

IMPRESSION : INFLAMMATORY GRANULATION TISSUE.

****END OF REPORT****

Dr. A. K. Deshpande
Dr. A. K. Deshpande
MD (Pathology)
Professor & Head

Dr Padmaja K
Dr Padmaja K
Associate Professor
MD Pathology

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 5200204377
Department : GASTROENTEROLOGY

Patient Type / Ward : IP / NAW
Referral : DIRECT
Organisation : DIRECT
Sample Collected On : Feb 06, 2020, 03:29 p.m.
Reported On : Feb 06, 2020, 03:36 p.m.

MICROBIOLOGY REPORT

Test	Value	Unit	Reference Range	Method
------	-------	------	-----------------	--------

CULTURE & SENSITIVITY ANY SPECIMEN

Specimen : FLUID

Culture & Sensitivity CULTURE SHOWS NO GROWTH AFTER 48 HOURS OF AEROBIC INCUBATION

Note :

- * Assay results should be interpreted only in the context of other laboratory findings and the total clinical status of the patient.
- * This Report is subjected to the terms and conditions mentioned overleaf.
- * PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED.
- * Tests marked as * are outside the scope of NABL accreditation,

END OF REPORT



Dr. Ruturaj
MD (Microbiology)
Assistant Professor

KAMNENI

DIAGNOSTIC LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**
 Age / Sex : 70YEARS / M
 UHID No. : 20190722661
 Bill No. : 5200204377
 Department : GASTROENTEROLOGY

Patient Type / Ward : IP / NAW
 Referral : DIRECT
 Organisation : DIRECT
 Sample Collected On : Feb 07, 2020, 04:07 p.m.
 Reported On : Feb 08, 2020, 09:19 a.m.

MICROBIOLOGY REPORT

Test	Value	Unit	Reference Range	Method
------	-------	------	-----------------	--------

CULTURE & SENSITIVITY ANY SPECIMEN

Specimen : TISSUE (RECEIVED : 04/02/2020)
Culture & Sensitivity CULTURE SHOWS GROWTH OF STAPHYLOCOCCUS AUREUS (MSSA)

Antibiotic	ZoneSize	Interpretation
BENZYL PENICILLIN	> 0.5	RESISTANT
AMOXICLAV		SENSITIVE
CEFUROXIME		SENSITIVE
CIPROFLOXACIN	> 16	RESISTANT
LEVOFLOXACIN	4	RESISTANT
ERYTHROMYCIN	< 0.25	SENSITIVE
CLINDAMYCIN	0.25	SENSITIVE
TETRACYCLINE	< 1	SENSITIVE
TRIMETHOPRIM/SULFAMETHOXAZOLE	> 10	SENSITIVE

Comments :

Diffusion method and the interpretation is according to CLSI guideline (2019).

Note :

- * Assay results should be interpreted only in the context of other laboratory findings and the total clinical status of the patient.
- * This Report is subjected to the terms and conditions mentioned overleaf.
- * PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED.
- * Tests marked as * are outside the scope of NABL accreditation,

END OF REPORT

Ravi Shankar Reddy

Dr A Ravi Shankar Reddy
 MD (Microbiology)
 Professor

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 5200206770
Department : ORT

Patient Type / Ward : IP / NAW
Referral :
Organisation : DIRECT
Sample Collected On : Feb 06, 2020, 02:04 p.m.
Reported On : Feb 08, 2020, 11:28 a.m.

MICROBIOLOGY REPORT

Test	Value	Unit	Reference Range	Method
------	-------	------	-----------------	--------

CULTURE & SENSITIVITY ANY SPECIMEN

Specimen : DRAIN TIP

Microscopy :

Culture & Sensitivity CULTURE SHOWS NO GROWTH AFTER 48 HOURS OF AEROBIC INCUBATION.

Note :

- * Assay results should be interpreted only in the context of other laboratory findings and the total clinical status of the patient.
- * This Report is subjected to the terms and conditions mentioned overleaf.
- * PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED.
- * Tests marked as * are outside the scope of NABL accreditation,

END OF REPORT

Ravi Shankar Reddy

Dr A Ravi Shankar Reddy
MD (Microbiology)
Professor

KAMENI

DIAGNOSTIC LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**

Age / Sex : 70YEARS / M

UHID No. : 20190722661

Bill No. : 5200206770S

Department : ORT

Patient Type / Ward : IP / NAW

Referral :

Organisation : DIRECT

Sample Collected On : Feb 06, 2020, 02:04 p.m.

Reported On : Feb 06, 2020, 03:55 p.m.

SEROLOGY REPORT

Test	Value	Unit	Reference Range	Method
<u>C-REACTIVE PROTEIN (CRP)</u>				
SPECIMEN	SERUM			
C - Reactive Protein	POSITIVE(48)	mg/L	< 6 mg/L	LATEX AGGLUTINATION

Note :

* Assay results should be interpreted only in the context of other laboratory findings and the total clinical status of the patient.

* This report is subjected to the terms and conditions mentioned overleaf.

* PARTIAL REPRODUCTION OF THIS REPORT IS NOT PERMITTED.

* Tests marked as * are outside the scope of NABL accreditation.

END OF REPORT



Dr. Ruturaj
MD (Microbiology)
Assistant Professor

KAMNENI

DIAGNOSTIC

LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**
 Age / Sex : 70 years / M
 UHID No. : 20190722661
 Bill No. : 5200206770
 Department : ORT

Patient Type / Ward : IP / NAW
 Referral :
 Organisation : DIRECT
 Sample Collected On : Feb 06, 2020, 02:04 p.m.
 Reported On : Feb 06, 2020, 02:42 p.m.

HEMATOLOGY REPORT

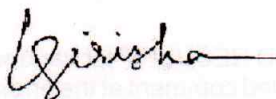
E S R 35 mm/hr
 Men: Age < 50 : 15mm/hr
 Age > 50 : 20mm/hr
 Age > 85 : 30mm/hr

Women:

Age < 50 : 20mm/hr
 Age > 50 : 30mm/hr
 Age < 85 : 42mm/hr

Method Modified Westergren

****END OF REPORT****



Dr. Shirisha
 MD (Pathology)
 Assistant Professor

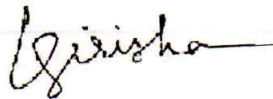
Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70 years / M
UHID No. : 20190722661
Bill No. : 5200206770
Department : ORT

Patient Type / Ward : IP / NAW
Referral :
Organisation : DIRECT
Sample Collected On : Feb 06, 2020, 02:04 p.m.
Reported On : Feb 06, 2020, 02:42 p.m.

HEMATOLOGY REPORT

Test Description	Value(s)	Reference Range	
<u>CBP</u>			
HAEMOGLOBIN	8.9	gm/dL	Neonatal-14.0 - 22.0 g/dl 1 year-11.1 - 14.1 g/dl 2-5 years-11.0 - 14.0 g/dl 6-12 years-11.5 - 15.5 g/dl Adult male-13.0 - 17.0 g/dl Adult female-12.0-15.0 g/dl Colorimetric
PCV	27.5	VOL %	Adult male- 40.0 - 50.0 Vol. % Adult female- 36.0 - 46.0 Vol. % Calculation
RBC COUNT	3.53	mill/Cmm	Adult male - 4.7 - 6.1 million/cu.mm Adult female -4.2 - 5.4 million/cu.mm Impedance
TOTAL WBC COUNT	8380	Cells/Cu.mm	Adult :- 4000 - 10000 cells/cu.mm Flow Cytometric
<u>DIFFERENTIAL COUNT :</u>			
NEUTROPHILS	77	%	40 - 75 Light Microscopy
LYMPHOCHYTES	18	%	20 - 40 Light Microscopy
EOSINOPHILS	03	%	1 - 6 Light Microscopy
MONOCYTES	02	%	2 - 10 Light Microscopy
BASOPHILS	00	%	<1 - 2 Light Microscopy
PLATELET COUNT	413000	Cu.mm	Infants :- 1.0 - 4.50 lakhs/cu.mm Adults :- 1.5 - 4.10 lakhs/cu.mm Microscopy Impedance

END OF REPORT



Dr. Shirisha
MD (Pathology)
Assistant Professor

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 5200204871
Department : ORT

Patient Type / Ward : IP / NAW
Referral :
Organisation : DIRECT
Sample Collected On : Feb 05, 2020, 05:35 a.m.
Reported On : Feb 05, 2020, 07:21 a.m.

HEMATOLOGY REPORT

Test	Value	Unit	Reference Range	Method
HEMOGLOBIN (AUTOMATION)				
HAEMOGLOBIN	8.9	gm/dl	Neonatal :- 14.0 - 22.0 g/dl 1 year :- 11.1 - 14.1 g/dl 2-5 years :- 11.0 - 14.0 g/dl 6-12 years :- 11.5 - 15.5 g/dl Adult male :- 13.0 - 17.0 g/dl Adult female :- 12.0-15.0 g/dl	Colorimetric

****END OF REPORT****



Dr. Shirisha
MD (Pathology)
Assistant Professor

KAMNENI

DIAGNOSTIC LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**
 Age / Sex : 70YEARS / M
 UHID No. : 20190722661
 Bill No. : 5200203594F
 Department : ORT

Patient Type / Ward : IP / NAW
 Referral :
 Organisation : DIRECT
 Sample Collected On : Feb 04, 2020, 07:51 a.m.
 Reported On : Feb 04, 2020, 07:52 a.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
GLUCOSE - (NA-F) PLASMA (FASTING)				
Sample type :-	Na-Flouride Plasma			
Fasting Plasma Glucose	157	mg/dL	1. Normal < 110 2. Impaired Fasting Glucose 111-125 (Advised OGTT for further confirmation) 3. Diabetes Mellitus >= 126	GOD POD
Urine Sugar	-		NIL	-

NOTE :

* AS per ADA Clinical Practice Recommendations 2004*

NOTE:- Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received.

END OF REPORT

S. Praveena
Dr. S. Praveena
 MD (Biochemistry)
 Associate Professor

Patient Name : **MR NARENDRA NATH LAL**

Age / Sex : 70YEARS / M

UHID No. : 20190722661

Bill No. : 5200203594S

Department : ORT

Patient Type / Ward : IP / NAW

Referral :

Organisation : DIRECT

Sample Collected On : Feb 04, 2020, 07:51 a.m.

Reported On : Feb 04, 2020, 07:52 a.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
<u>ELECTROLYTES (NA , K , CL) - SERUM [3]</u>				
Sodium	139	meq/L	135 - 150	Direct ISE
Potassium	4.9	meq/L	3.5 - 5.1 (Adults) 3.5 - 6.5 (Neonates)	Direct ISE
Chloride	102	meq/L	94 - 110	Direct ISE
Method :	Direct ISE			
NOTE :-	Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received.			

END OF REPORT

S. Praveena
Dr. S. Praveena
MD (Biochemistry)
Associate Professor

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 5200202929
Department : ORT

Patient Type / Ward : IP / NAW
Referral :
Organisation : DIRECT
Sample Collected On : Feb 03, 2020, 03:39 p.m.
Reported On : Feb 03, 2020, 05:13 p.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
GLUCOSE FASTING PLASMA(RANDOM)				
Sample type	Na-Flouride Plasma			
Random Plasma Glucose	196	mg/dL	1. Normal <140 2. Impaired Glucose Tolerance 141 to 199 (Advised OGTT for further confirmation) 3. Diabetes Mellitus > 200	
Method	GOD - POD			
Note	As per ADA Clinical Practice Recommendations 2004.			
NOTE:-	Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received.			

END OF REPORT

S. Praveena
Dr. S. Praveena
MD (Biochemistry)
Associate Professor

KAMENI

DIAGNOSTIC LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**
 Age / Sex : 70YEARS / M
 UHID No. : 20190722661
 Bill No. : 5200202929
 Department : ORT

Patient Type / Ward : IP / NAW
 Referral :
 Organisation : DIRECT
 Sample Collected On : Feb 03, 2020, 03:39 p.m.
 Reported On : Feb 03, 2020, 05:40 p.m.

PATHOLOGY REPORT

Investigations

BLOOD GROUPING & RH

Specimen

Blood Grouping

RH (D) Typing

Result(s)

Blood

O

NEGATIVE

Advised Du test for confirmation

****END OF REPORT****

Dr. A. K. Deshpande

Dr. A. K. Deshpande
 MD (Pathology)
 Professor & Head

KAMENI

DIAGNOSTIC

LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**
 Age / Sex : 70YEARS / M
 UHID No. : 20190722661
 Bill No. : 5200202929S
 Department : ORT

Patient Type / Ward : IP / NAW
 Referral :
 Organisation : DIRECT
 Sample Collected On : Feb 03, 2020, 03:39 p.m.
 Reported On : Feb 03, 2020, 05:43 p.m.

SEROLOGY REPORT

Investigations

Result(s)

HBsAg

SPECIMEN

SERUM

HBsAg

Negative

Method : IMMUNOCHROMATOGRAPHY (SPOT)

Comments :

- This test is for the qualitative detection of Hepatitis B surface Antigen (HBsAg) in human serum.
- This is only a screening test, it should not be used as sole criterion for the diagnosis of hepatitis B infection.
- This test is not useful during window period of acute HBV infection.
- **Discrepant results may be observed**
 - * during pregnancy.
 - * patients receiving mouse monoclonal antibodies for diagnosis / therapy or animal products.
 - * patients carrying mutant forms of the virus.
- **False positive results may occur**
 - * in patients having elevated levels of RF Factor.
 - * in patients having heterophile antibodies.
- **Positive screening test should be interpreted in conjunction with patient history & test results of other HBV serologic markers (eg...Anti HBs, Anti HBc Total, Anti HBc IgM, HBeAg & Anti HBe)**
 - Individuals who recently received Hepatitis B vaccination may have been transient positive HBsAg test results because of large dose of HBsAg in the vaccine.
 - If the test result is positive, additional confirmatory tests employing NAAT are recommended.

****END OF REPORT****

Ravi Shankar Reddy

Dr A Ravi Shankar Reddy
 MD (Microbiology)
 Professor

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 5200202929S
Department : ORT

Patient Type / Ward : IP / NAW
Referral :
Organisation : DIRECT
Sample Collected On : Feb 03, 2020, 03:39 p.m.
Reported On : Feb 03, 2020, 05:42 p.m.

SEROLOGY REPORT

Test	Value	Unit	Reference Range	Method
<u>HIV - 1 & 2</u>				
SPECIMEN	SERUM			
HIV (1&2)	Non Reactive			IMMUNOCHROMATOGRAPHY

Method : IMMUNOCHROMATOGRAPHY

Comments :

- This test is for the qualitative detection of Human Immunodeficiency Virus (HIV) in human serum.
- This is only a screening test, it should not be used as a sole criterion for the diagnosis of HIV infection.
- A negative result with HIV 1/2 does not exclude the possibility of infection with HIV.
- A **false negative result** can occur in the following circumstances.
 - * Low levels of antibody (E.g early seroconversion specimens), that are below the detection limit of the test.
 - * Infection with a variant of the virus that is less detectable by the HIV 1-/2 configuration.
 - * HIV antibodies in the patient that do not react with specific antigens in the assay configuration.
 - * HIV-infected person taking antiretroviral medication.
- For these reasons, care should be taken in interpreting negative results. Other clinical data should be used in conjunction with test results.
- Positive specimens should be retested with another method & the results should be evaluated in the light of overall clinical evaluation with test results.
- Whole blood or plasma specimens containing anticoagulants may give incorrect results.
- Neonates of HIV-infected mothers may carry maternal antibodies to HIV for up to around 18 months, which may not necessarily indicate the true infection status of the newborn.

If the test result is positive, additional confirmatory tests employing NAAT is recommended.

END OF REPORT

Ravi Shankar Reddy

Dr A Ravi Shankar Reddy
MD (Microbiology)
Professor

KAMENI

DIAGNOSTIC LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**
 Age / Sex : 70YEARS / M
 UHID No. : 20190722661
 Bill No. : 5200202929
 Department : ORT

Patient Type / Ward : IP / NAW
 Referral :
 Organisation : DIRECT
 Sample Collected On : Feb 03, 2020, 03:39 p.m.
 Reported On : Feb 04, 2020, 11:14 a.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
GLYCOSYLATED HEMOGLOBIN(HBA1C)-(EDTA)WHOLE BLOOD				
*Glycosylated Haemoglobin	8.3	%	Non Diabetic Level : 4.0 - 5.6% Pre Diabetic Level : 5.7 - 6.4% Diabetic Level: > 6.5% Well Controlled: <7.0% Unsatisfactory Control: 7.1 - 8.0% Poor Control: >8.0%	HPLC BIORAD D-10
Estimated Average Glucose(EAG)	192	mg/dl	-	Calculated

Low Hb% values may not correlate with GHB. GHB value should not be taken as a sole criteria for diagnosis. Any condition altering red cell life will alter the GHB values. A GHB gives average Blood Glucose level for the period of 10 - 12 weeks and it need not correlate with Blood Sugar levels. For Geriatric group, HbA1c reference range depends upon co-morbid conditions.

Note: Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received. The test marked with star are out of the scope of NABL Services.

END OF REPORT

S. Praveena
Dr. S. Praveena
 MD (Biochemistry)
 Associate Professor

KAMENI

DIAGNOSTIC LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**

Age / Sex : 70YEARS / M

UHID No. : 20190722661

Bill No. : 5200202929S

Department : ORT

Patient Type / Ward : IP / NAW

Referral :

Organisation : DIRECT

Sample Collected On : Feb 03, 2020, 03:39 p.m.

Reported On : Feb 04, 2020, 08:56 a.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
UREA - SERUM				
Blood Urea	36	mg/dL	10 - 40	UREASE-GLDH

NOTE:-

Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received.

****END OF REPORT****

S. Praveena
Dr. S. Praveena
 MD (Biochemistry)
 Associate Professor

Patient Name : **MR NARENDRA NATH LAL**
Age / Sex : 70YEARS / M
UHID No. : 20190722661
Bill No. : 5200202929S
Department : ORT

Patient Type / Ward : IP / NAW
Referral :
Organisation : DIRECT
Sample Collected On : Feb 03, 2020, 03:39 p.m.
Reported On : Feb 03, 2020, 05:13 p.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
<u>CREATININE - SERUM</u>				
Sample type :-	Serum			
Serum Creatinine	1.3	mg/dL	Male: 0.6 - 1.5 Female: 0.5 - 1.2 Children: 1-4 days: 0.3 - 1 mg/dl Infant: 0.2-0.4 mg/dl Child: 0.3 - 0.7 mg/dl	Modified Jaffes

NOTE:-

Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received.

****END OF REPORT****

S. Praveena
Dr. S. Praveena
MD (Biochemistry)
Associate Professor

KAMENI

DIAGNOSTIC

LABORATORY SERVICES

Patient Name : **MR NARENDRA NATH LAL**

Age / Sex : 70YEARS / M

UHID No. : 20190722661

Bill No. : 5200202929S

Department : ORT

Patient Type / Ward : IP / NAW

Referral :

Organisation : DIRECT

Sample Collected On : Feb 03, 2020, 03:39 p.m.

Reported On : Feb 03, 2020, 05:13 p.m.

BIOCHEMISTRY REPORT

Test	Value	Unit	Reference Range	Method
<u>ELECTROLYTES (NA , K , CL) - SERUM [3]</u>				
Sodium	137	meq/L	135 - 150	Direct ISE
Potassium	4.9	meq/L	3.5 - 5.1 (Adults) 3.5 - 6.5 (Neonates)	Direct ISE
Chloride	102	meq/L	94 - 110	Direct ISE
Method :	Direct ISE			
NOTE :-	Assay results should be interpreted only in the context of other laboratory findings and the clinical status of the patient. Kindly discuss if necessary. The above report relates only to the sample received.			

END OF REPORT

S. Praveena
Dr. S. Praveena
 MD (Biochemistry)
 Associate Professor