



Governor Yulo Drive Brgy. Quezon Arevalo, Iloilo City
Telephone No.: (033)3215439, 09392828878 and 09667562388
DOH License No.: 06-0279-21-CL-2

Patient ID: ML-000003
Date: 07/03/2023
Physician:

AQUISOLA, RIC ANDREW

Age: 21 Gender: 0
Date of Birth: 01/26/2002
Address: 0

HEMATOLOGY

TEST	RESULT	REFERENCE VALUE
Hemoglobin	_____	Female: 120 - 160 g/L Male: 130 - 180 g/L
Hematocrit	_____	Female: 0.37 - 0.43 Vol. Fr. Male: 0.40 - 0.50 Vol. Fr.
Red Blood Cell Count	_____	Female: $4.0-5.4 \times 10^{12} / L$ Male: $4.5-6.2 \times 10^{12} / L$
White Blood Cell Count	_____	$4.5 - 11.0 \times 10^9 / L$
DIFFERENTIAL COUNT:		
Neutrophil	_____	55 - 65
Lymphocyte	_____	25 - 35
Monocyte	_____	3 - 6
Eosinophil	_____	2 - 6
Platelet Count	_____	$150 - 450 \times 10^9 / L$

***Laboratory results must be clinically correlated by your attending physician.*

MAISIE LOU P. LONADO
Lic. No. 0069667
Medical Technologist

MA. BEMERLY J. SIRA, MD, FPSP
Lic. No. 0080910
Pathologist