Patient Reg. No :

HD0012587

Patient Name :

Mrs. VIDYA GEDAM

Gender/Age:

Address:

BURGING -

F/27 Y

OPD No. :

Mobile No.:

OPD Reg. Date :

Doctor Name :

OP0031090

7499875364

29-03-2024

Chief Complaint: LEFT KNEE SYNOVITIS

B/L KNEE PAIN

est Name		
Sr.No.	Test Name	
1	CBC	
2	ESR	
3	CRP	
4	SR URIC ACID	

POST HEDRI

Results

Run Date 03/29/2024 12:03:38 PM

Last Name GEDAM First Name VIDYA

Gender Unknown Age

Patient ID AUTO PID01564

Birth Date

Sample

Operator ABX

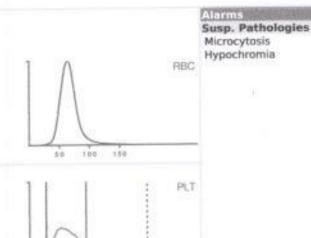
Sample ID AUTO_SID0032

Rack/Pos Department Physician

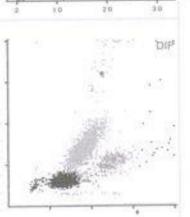
Type Standard

RBC	5.02	*	10°/µL	Range 3.80 - 6.00
HGB	10.7	1	g/dL	11.5 - 17.0
нст	34.4	1*	96	35.0 - 52.0
MCV	68.6	L*	µm³	76.0 - 100.0
MCH	21.4	L	pg	27.0 - 34.0
MCHC	31.2	L	g/dL	32.0 - 35.0
RDW-CV	12.7		96	11.0 - 17.0
RDW-SD	39.5	9	µm³	37.0 - 49.0
PLT	295		10³/μL	Range 150 - 400
	0.20		66	0.15 0.40

0.15 - 0.40PCT 0.26 8.0 - 11.0 µm3 8.9 MPV 11.0 - 22.0 µm³ 14.6 PDW 44 - 140 103/uL 84 P-LCC 18.0 - 50.0 28.3 P-LCR



Range 3.50 - 11.00 103/µL 5.00 WBC Range Range 40.0 - 73.0 1.60 - 7.00 51.0 2.53 NEU 15.0 - 45.0 2.03 1.00 - 3.0040.9 LYM 5.4 4.0 - 12.0 0.20 - 0.800.27 MON 0.5 - 7.00.00 - 0.500.07 1.3 EOS 0.0 - 2.00.00 - 0.151.4 0.07 BAS 0.0 - 1.00.00 - 0.100.6 0.03 LIC



Slide Review

Neutrophil	Myeloblast
Lymphocyte	Promyelocy
Monocyte	Myelocyte
Eosinophil	Metamyelo
Basophil	Blast
Atypical Lymphocyte	Target Cell
Other	Sickle Cell,
Atypical Lymphocyte	Target Cell

elioblast Anisocytosis
myelocyte Hypochromia
elocyte Polychromasia
myelocyte Polikilocytosis
st Microcytosis
get Cell Macrocytosis
de Cell, Platelet Clumps

Signature :

Reviewed on



Lloyds Kali Ammal Memorial Hospital लॉयड्स काली अम्माल मेमोरियल हॉस्पिटल

Lloyds Infinite Foundation

Hospital Address: Hedri, Tah-Etapalli, Dist-Gadchiroli, Maharastra

Pin Code: 442704 Phone No : 9405123224



UHID No.:

HD0012587

Booking Date : Lab Ref. No. :

29-03-2024

Patient Name:

Mrs. VIDYA GEDAM

Age/Gender:

F/27 Y

TB003099

Referred By:

Doctor Name :

Dr. PRIYA KHOBRAGADE

Dr. NIRIXA

Sample Date/Time :

Mobile No.:

7499875364

Report Date/Time :

29-03-2024 01:18 PM

Address:

BURGI NO

Investigation:

HAEMATOLOGY ROUTINE

Parameter	Result	Unit	Reference Range
ESR (WESTERGENS)	20	mm /1st	0 - 20
	BIOCHE	MISTRY TEST	
Parameter	Result	Unit	Reference Range
SERUM URIC ACID	5.42	mg/dL	0.0 - 7.0
	SEROL	OGY TEST	
Parameter	Result	Unit	Reference Range
CRP (QUANTITATIVE)	4.6	mg/l	- Up to 6.0
SEAT THE SECTION AND ASSESSED.		111311	

***********End of Report********

Signature

LAB TECHNICIAN

Signature

Dr.PRIYA KHOBRAGADE MBBS MD. PATHOLOGIST

*Value of test is only add in Diagnosis of Disease Treatment should not be based on the test result only, Kindly co-relate with Clinical symptoms * Not for medico Legal Purpose