Acti Halemi

# **OPD TICKET**

Lloyds Kali Ammal Memorial Hospital छॉयड्स काली अम्माल मेमोरियल हॉस्पिटल Lloyds Infinite Foundation

Hospital Address: Hedri, Tah. - Etapalli, Dist. - Gadchiroli, Maharashtra PIN Code: 442704 Phone No.: 9405123224

NAME A SEX F ADDRESS PRESADORE

DESIGNATION

DEPARTMENT

REGISTRATION NO.: 3 9 89 DATE

400013989

#400 - CBC PS - TSM (Q3)

al

TALUK ETAPALLI

Age

#### DIST GADCHROLI / MA

#### Results

Run Date 03/31/2024 02:21:26 PM

Last Name

First Name ARTI HALAMI

Gender Unknown

Patient ID AUTO\_PID01625

Birth Date

Sample comments

Operator ABX

Sample ID AUTO SID0028

Rack/Pos

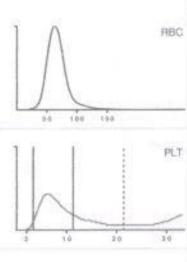
Department HEAMATOLOGY

Physician

Type Standard







WBC	7.94	10³/μL 3.50 - 11.00		
	#	Range	96	Range
NEU	5.72	1.60 - 7.00	72.3	40.0 - 73.0
LYM	1.79	1.00 - 3.00	22.6	15.0 - 45.0
MON	0.29	0.20 - 0.80	3.7 1	4.0 - 12.0
EOS	0.06	0.00 - 0.50	0.7	0.5 - 7.0
BAS	0.05	0.00 - 0.15	0.7	0.0 - 2.0
LIC	0.03	0.00 - 0.10	0.4	0.0 - 1.0

Danna



### Slide Review

Neutrophil	Myeloblast	Anisocytosis
Lymphocyte	Promyelocyte	Hypochromia
Monocyte	Myelocyte	Polychromasia
Eosinophil	Metamyelocyte	Poikilocytosis
Basophil	Blast	Microcytosis
Atypical Lymphocyte	Target Cell	Macrocytosis
Other	Sickle Cell	Platelet Clumps

Reviewed on \_\_\_\_\_\_ by \_\_\_\_\_\_ Signature :



# 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.:

HD0013989

MISS ARTI S. HALAMI

Booking Date :

31-03-2024

Patient Name :

TB003167

Age/Gender:

F/17 Y

Lab Ref. No. : Doctor Name :

Referred By :

Dr. CHETAN BURRIWAR

Sample Date/Time:

Dr. PRIYA KHOBRAGADE

Mobile No.:

9420551915

Report Date/Time :

31-03-2024 03:21 PM

Address:

PRASALGUNDI-NC

Investigation:

### HAEMATOLOGY ROUTINE

Parameter	Result	Unit	Reference Range
Sickling (Solubility test )	NEGATIVE		

## COMPLETE BLOOD COUNT (CBC)

## IMMUNOLOGY

Parameter	Result	Unit	Reference Range
THYROID STIMULATING HORMONE (TSH)	1.35	uIU/mL	0.25 - 5.0 (ELFA)

\*\*\*\*\*\*\*\*\*\*\*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