



IMMUNO-DIAGNOSTIC & PATHOLOGY LABORATORY

Halar Road Cross Lane, Besides L.I.C. Bldg.
Valsad-396 001. Ph.: (02632) 243280. Mo.: 99250 49280

PRAVIN CHHOTALAL PATEL
Male/64 Years

Reg. Date : **11/12/2022**
 Lab. No **122543-18**
 Sample No
 2629

Ref. Dr.

Dr. POOJA D TANDEL M D MEDICINE
VIBRANT HOSPITAL VAP1

HEMATOLOGY REPORT

Test	Result	Unit	Ref. Range
Haemoglobin:	<u>8.7</u>	g/dL	13.0 - 17.0 g/dL
Total Leucocyte Count:	4320	X 10 ³ / μ L	4000 - 10000 /uL
Differential Count			
Neutrophils:	63	%	40-80
Eosinophils:	3	%	1.0-6.0
Basophils:	0	%	<1-2
Lymphocytes:;	26	%	M: 20-40; F: 20-40
Monocytes:	8	%	2-10
Neutrophils Absolute Count:	2.72	X 10 ³ / μ L	2.0-7.0
Eosinophils Absolute Count:	0.13	X 10 ³ / μ L	0.02-0.50
Basophils Absolute Count:	0.01	X 10 ³ / μ L	0.02-0.10
Lymphocytes Absolute Count:	1.11	X 10 ³ / μ L	1.0-3.0
Monocytes Absolute Count:	0.35	X 10 ³ / μ L	0.2-1.0
Total RBC Count:	<u>2.68</u>	X 10 ⁶ / μ L	M: 4.5-5.5; F: 3.9-4.8
Hematocrit (HCT):	<u>25.8</u>	%	42 - 52 %
MCV:	96.1	fL	83 - 101
MCH:	<u>32.4</u>	pg	27-32
MCHC:	33.7	g/dL	31.5 - 34.5
RDW-SD:	<u>67.4</u>	fL	39 - 46
RDW-CV:	<u>16.7</u>	%	11.6 - 14.0
Platelets Count:	<u>44000</u>	/ μ L	150000 - 400000
Plateletcrit (PCT):	0.042	%	
Mean Platelet Volume	9.6	fL	
Malaria Parasite	M.P. are not seen		

Method: Fully automated bidirectional interfaced analyser (6 Part Differential **SYSMEX XN-1000**).

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Dr. Mehul SOLANKY
 M.D.(Path & Bact)

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C - REACTIVE PROTEIN TITRE

Test	Result	Unit	Ref. Range
CRP :	<u>24.96</u>	mg/L	Adult < 6.0 mg/L Newborn upto 3 weeks < 4.1 mg/L Infants & Children < 2.8 mg/L
Method	BY IMMUNOTURBIDOMETRIC METHOD.		

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PROCALCITONIN REPORT

<u>Test</u>	<u>Result</u>	<u>Unit</u>	<u>Normal Range</u>
PROCALCITONIN: Sepsis	0.21	ng/mL	Less then 0.5 ng/mL - Low Risk for

Method :- BRAHMS PCT Immunoassay on ROCHE COBAS e 411

Notes :- Procalcitonin is a 116 aminoacid prohormone secreted by neuroendocrine cells(c cells of thyroid gland, pulmonary and pancreatic tissues) an excellent PROGNOSTIC marker for sepsis & septic shock.
PCT levels are increased in bacterial infections resulting in sepsis and septic shock.
Cut off for healthy individuals is less then 0.5 ng/mL, which indicates low risk for sepsis & shock.
Levels of more then 2.0 ng/mL Indicates high risk for sepsis & shock.
PCT levels may also be increased in certain non infectious conditions like prolonged cardiogenic shock, severe perfusion anomalies, small cell lung carcinoma or C cell carcinoma of thyroid.

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*2629*Ref. Dr.**Dr. POOJA D TANDEL M D MEDICINE**
VIBRANT HOSPITAL VAP1**SERUM ELECTROLYTES**

Test	Result	Unit	Ref. Range
S. Sodium :	140.6	mmol/L	135 - 145 mmol/L
S. Potassium :	3.57	mmol/L	3.5 - 5.3 mEq/L
S. Chloride :	102.5	mmol/L	97 - 110 mmol/L

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