



IMMUNO-DIAGNOSTIC & PATHOLOGY LABORATORY

Halar Road Cross Lane, Besides L.I.C. Bldg.
Valsad-396 001. Ph.: (02632) 243280. Mo.: 99250 49280AMIT KUMAR PAUL
Male/32 YearsReg. Date : 25/05/2021
Lab. No 53657-18
Sample No
8904

Ref. Dr.

Dr. POOJA D TANDEL M D MEDICINE
VIBRANT HOSPITAL VAP1**HEMATOLOGY REPORT**

Test	Result	Unit	Ref. Range
Haemoglobin:	13.8	g/dL	13.0 - 17.0 g/dL
Total Leucocyte Count:	11940	X 10 ³ / μ L	4000 - 10000 /uL
Differential Count			
Neutrophils:	70	%	40-80
Eosinophils:	02	%	1.0-6.0
Basophils:	00	%	<1-2
Lymphocytes:;	22	%	M: 20-40; F: 20-40
Monocytes:	06	%	2-10
Neutrophils Absolute Count:	8.44	X 10 ³ / μ L	2.0-7.0
Eosinophils Absolute Count:	0.21	X 10 ³ / μ L	0.02-0.50
Basophils Absolute Count:	0.02	X 10 ³ / μ L	0.02-0.10
Lymphocytes Absolute Count:	2.60	X 10 ³ / μ L	1.0-3.0
Monocytes Absolute Count:	0.67	X 10 ³ / μ L	0.2-1.0
Total RBC Count:	4.48	X 10 ⁶ / μ L	M: 4.5-5.5; F: 3.9-4.8
Hematocrit (HCT):	42.4	%	42 - 52 %
MCV:	94.8	fL	83 - 101
MCH:	30.7	pg	27-32
MCHC:	32.4	g/dL	31.5 - 34.5
RDW-SD:	53.5	fL	39 - 46
RDW-CV:	13.7	%	11.6 - 14.0
Platelets Count:	148000	/ μ L	150000 - 400000
Plateletcrit (PCT):	0.187	%	
Mean Platelet Volume	12.6	fL	
Malariaial 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)

AMIT KUMAR PAUL
Male/32 Years

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VIBRANT HOSPITAL VAP1

C - REACTIVE PROTEIN TITRE

Test	Result	Unit	Ref. Range
CRP :	2.87	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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Dr. POOJA D TANDEL M D MEDICINE
VIBRANT HOSPITAL VAP1**D - DIMER**

Test	Result	Unit	Ref. Range
D - Dimer Level:	468.73	ng/mL FEU	Up to 500 Fibrinogen Equivalent units

INTERPRETATION

Method - Immunoturbidimetry on Cobas 400 ,Flouroscent Immunoassay on Minividas/Ichroma 2

Concentrations of approximately ng/mL or more are considered pthological.
Increased levels of D-Dimer in plasma indicaates that excessive amounts of fibrin have formed in the vascular tree. Through Activated Fibrinolytic system,fibrin is degraded by plasmin to various slouble fragments in which the D-DImer configuration occurs.

Eleveted levels are seen in.

- Deep vein thromobosis
- pulmonary embolism
- Disseminated intravascular coagulation (DIC) disorder.
- Evaluation of acute myocardial infarction and unstable angina.
- Presence of D - Dimer in pre eclampsia suggest a severe disease.

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