

# NABL Accredited Laboratory







### **HEALTHSFIRST HEALTHCARE & DIAGNOSTICS PRIVATE LIMITED**

A-38, 1st Floor, Anand Vihar, Delhi-110092 € 011 46580451 © 8169528331
 ⊕ www.healthsfirst.in
 ☑ info@healthsfirst.in

### LAB REPORT

Lab No:

Barcode:

10485293

012502070106 25 Y/Male

Patient Name:

Mr. KARAN

Age/Gender: 25

24/Jan/2025 11:43AM

Panel Code:

Refer:

Self ADITYA

24/Jan/2025 11:50AM

Refer Other:

YA Sample Collection Date : Sample Receive Date :

24/Jan/2025 11:50AM

UHID:

623921

Report Release Date:

Sample Registration Date:

24/Jan/2025 04:17PM

Address:

**Haematology** 

**Test Name** 

Value

Unit

Bio Ref.Interval

## **Fever Profile 3**

## Complete Blood Count (CBC)+ESR

Specimen:	Whole	Blood	<b>EDTA</b>
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Haemoglobin (Hb) Colorimetric SLS	14.6	g/dL	13.0-17.0
TOTAL LEUKOCYTE COUNT (TLC) Flow Cytometry  Differential Cell Count	6.80	th/cumm	4.0-10.0
Neutrophils	78	%	40-80
Flow cytometry / Microscopy	40	0.7	00.40
Lymphocytes Flow cytometry / Microscopy	16	%	20-40
	2.00	%	1-6
Eosinophil Flow cytometry / Microscopy	2.00	70	1-0
Monocytes	3	%	2-10
Flow cytometry / Microscopy	3	70	2-10
Basophils	1	%	0-1
Flow cytometry / Microscopy	·	, ,	• .
Absolute Neutrophils Count	5.30	10^9/L	2.0-7.0
Impedence			
Absolute Lymphocyte Count	1.09	10^9/L	1.0-3.0
Impedence			
Absolute Eosinophils Count	0.14	10^9/L	0.02-0.5
Calculated		4040#	
Absolute Monocyte Count	0.2	10^9/L	0.2-1.0
	0.07	10^9/L	0002
Absolute Basophil Count	0.07	10*9/L	0.0-0.3
RBC Count	4.90	millions/cmm	4.5-5.5
Impedance	4.50	1111110113/011111	4.0 0.0
Haematocrit (HCT)	45.8	%	40-50
Calculated			
MCV	84.5	fl	83-101
Calculated			





Dr. Mirza Shabnam MD. Pathology Consultant Pathologist

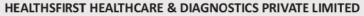


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### LAB REPORT

Barcode: 10485293
Patient Name: Mr. KARAN

Refer: Self

Panel Code: ADITYA

Refer Other:

UHID: 623921

Address:

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<u>Haematology</u>					
Test Name MCH Calculated	Value 32.0	Unit pg	Bio Ref.Interval 27-32		
MCHC Calculated	31.9	g/dl	31.5-34.5		
Platelet Count (PLT) Impedance / Microscopy	115	thou/μL	150-410		
Mean Platelet Volume (MPV) Calculated	10.30	fl	7.4-10.4		
RDW-CV Calculated	12.0	%	11.6-14.0		
RDW-SD Calculated	34.50	fl	35.0-56.0		
PCT	0.29	%	0.10-0.28		
PDW	17.00		9.0-17.0		
Mentzer Index Calculated	17.24	Ratio			
Neutrophil to Lymphocyte Ratio Calculated	4.88	Ratio			
Lymphocyte to Monocyte Ratio Calculated	5.33	Ratio			
Platelet - Lymphocyte Ratio (PLR)	7.19				
Erythrocyte Sedimentation Rate (E	ESR) <b>25</b>	mm/hr	15 or less		

## Comments:

CBC provides information about red cells, white cells and platelets. Results are useful in the diagnosis of anemia, infections, leukemias, clotting disorders and many other medical conditions.

## Malaria Parasite (MP-Slide)

Malarial Parasite- Slide

NOT SEEN

Note: A single negative result does not rule out Malaria.



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**Biochemistry** 

**Test Name** Value Unit

Bio Ref.Interval

Specimen: Serum

Bilirubin(Total) Diphylline, Diazonium Salt 3.58

mg/dl

0.2 - 1.3

Alanine Aminotransferase (ALT/SGPT) UV with Pyridoxal-5- Phosphate (P5P)

249.7

U/L

< 50.0





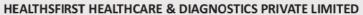


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Serology

**Test Name** Value Unit Bio Ref.Interval

Widal Test (Slide Test)

Salmonella typhi O Antigen 1:160 Slide Agglutination Salmonella typhi H Antigen 1:160 Slide Agglutination Salmonella paratyphi AH Antigen <1:80 Slide Agglutination Salmonella paratyphi BH Antigen <1:80 Slide Agglutination

Positive Result

Interpretation:

Antigens Tested	RESULT	REMARKS	
то, тн,ан,вн	Titre 1:20 and Titre 1:40	Indicates absence of IgM & IgG antibodies against Salmonella species	
то, тн,ан,вн	Titre >/= 1:80	Indicates Presence of IgM & IgG antibodies against Salmonella species.	

#### **Comments:**

This test measures Somatic O and Flagellar H antibodies against Typhoid and Paratyphoid bacilli.

Rising titres in paired samples taken 7-10 days apart are more significant than a single test.

Titres 1:80 and above indicates ongoing or recent infection by Salmonella species and the diagnosis should be confirmed by gold standard test such as Blood culture prior to start of antibiotics. The agglutinins usually appears at the end of the first week of infection and increase steadily till third / fourth week after which the decline starts. A Positive Widal test may occur because of Typhoid vaccination or previous typhoid infection and in certain autoimmune diseases.

In TAB vaccinated patients, high titres of H antibody of >= 1:160 to each of Salmonellae is observed. They tend to persist for many months and even years while O antibody shows lower titres and disappears within 6 months.

False positive results/anamnestic response may be seen in patients with past enteric infection during unrelated fevers like Malaria, Influenzae etc in the form of transient rise in H antibody in Widal test.

False negative results may be due to processing of sample collected early in the course of disease (1st week) and immunosuppression.

To diagnose infection due to Salmonella species.(Enteric fever)

To assess the response to therapy(decreasing titres) in patients being treated for Enteric fever.

Correlate Clinically.

Result rechecked and verified for abnormal cases.

\*\*\* End Of Report \*\*\*



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