



MAA BHADRAKALI DIAGNOSTIC

Fully Computerised Diagnostic Solution

REPORT ON PATHOLOGICAL INVESTIGATION

Patient : Mrs. RISHIKA GUPTA

Age/Gender : 26 Year/Female

Ref. Doctor : Dr. K.K. DUBEY

Report printed Date : 14-Oct-2025 / 12:39 pm

Reg. ID : 73



Sample : BLOOD UHID. : 2510002116

Sample Reg Date : 11-Oct-2025 / 05:59 PM

Collection Centre : Maa Bhadrakali Diagnostic

Investigations	Result	Unit	Reference Range
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Interpretations :

The presence of three pink coloured line indicate the presence of specific IgM & IgG antibodies against Dengue virus. The presence of two pink coloured lines one test line IgM with in test zone closer to the sample well & one control line in control zone indicate presence of IgM antibodies against of Dengue virus. The presence of two pink coloured lines one test line IgG with in test zone closer to control zone or away from sample zone and one control line in control zone indicate presence of IgG antibodies against dengue virus.

In primary Dengue fever IgM antibodies can be detected as early as 3-5 days after the fever, where as IgG antibodies are negative. In secondary Dengue fever IgG antibodies are positive & IgM antibodies may also be positive. Secondary dengue fever is a secondary infection with same or different sero type & is often associated with the complications as dengue Haemorrhagic fever and dengue shock syndrome.

A few patients of dengue fever may not produce detectable levels of antibodies with in 7-10 days after infection & test result may show negative for antibodies. If Symptoms persist a retest after 5-7 days is recommended.

The serological cross reactivity across the Flavi virus group is common i.e. between Dengue 1,2,3,4 murray valley Encephalitis, Japanese encephalitis & yellow fever virus.

Result to be correlated clinically.

-----End of Report-----

Dr. AKANCHHA
M.D Pathologist
Reg. no. JCMR5847



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The kit is intended for the detection of malaria infection in human sample, indicating differential diagnosis between pf HRP-II (Plasmodium falciparum, histidine-rich protein II) and other plasmodium species (Pan, pLDH) (P. vivax, P. malariae, p. ovale). This method is qualitative and initial screening test only.

Dr. AKANCHHA

M.D Pathologist

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Investigations	Result	Unit	Reference Range
HAEMATOLOGY			
COMPLETE BLOOD COUNT (CBC)			
HAEMOGLOBIN	11.5 Low	gm/dl	12.0-15.0
TOTAL LEUCOCYTE COUNT	5560 Normal	/cumm	4000-11000
DIFFERENTIAL LEUCOCYTE COUNT			
NEUTROPHILS	70 Normal	%	40-75
LYMPHOCYTES	20 Normal	%	20-45
EOSINOPHILS	04 Normal	%	00-06
MONOCYTES	06 Normal	%	00-08
BASOPHILS	00 Normal	%	00-01
TOTAL R.B.C. COUNT	3.65 Normal	million/cumm	3.5-6.5
P.C.V./ Haematocrit value	35.6 Normal	%	35-54
M C V	97.53 High	fL	76- 96
M C H	31.51 Normal	pg	27.00-32.00
M C H C	32.30 Normal	g/dl	30.50-34.50
PLATELET COUNT	0.60 Low	lacs/mm3	1.50 - 4.50
RDW-CV	15.6 Normal	%	10-16

E.S.R. (Westergren Method) 56 High mm 0-20

Reference Sedimentation rate (mm in 1 hour 20(+&-3 degree C)

Men		Women	
17-50 yr	10 or<	17 - 50yr	12 or<
51-60 yr	12 or<	51-60 yr	19 or<
61-70 yr	14 or<	61-70yr	20 or<
>70 yr	30 or<	>70 yr	35 or<

MALARIA ANTIGEN CARD TEST

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NEGATIVE

NEGATIVE

Dr. AKANCHHA
M.D Pathologist
Reg. no. JCMR5847

Dr. K.K Dubey
Dr. Harshita Dubey
 MBBS (KIMS)
OPD Timing:
 10:00-12:00A.M.5:00-7:00P.M.

SPARSH NURSING HOME

Opposite Choudhary Petrol Pump,
 Mahavir Nagar, Booty, Ranchi-835217
 Mob.: 9955121210 9939740323

Date 12.10.2025

Name Ritika Gupta

Age 26yr

Sex ☒ M ☐ F

Comm Fever

Headache

Bleeding

Vomiting

Abdominal

Dysphagia

F-103

Puls-72

02-95

B.P-100/70mmHg

C.B.C ESR

M.R. Typhoid

Dengue

Rx

Admit

- ① Paracetamol - 9V-1
 ① Cefbi A2 - tab - (10)
 1x2
 ① Augmentin - P - tab (10)
 1x2
 ③ Vit-C - tab (10)
 1x2
 ④ Grutucur ESP-1

12.10.2025

उपलब्ध सुविधाएँ:

○ पैथोलॉजी सुविधा (जाँच घर) ○ एक्स-रे ○ अल्ट्रासाउण्ड ई.सी.जी.

24 घंटे सेवा उपलब्ध है।

नार्मल डिलीवरी, सिजेरियन, नसबंदी एवं वच्चादानी का ऑपरेशन किया जाता है।