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Name	:	**MRS. MOUNIKA**	Bill Number	:	**M3396**
Age/Gender	:	**28YEARS/FEMALE**	Bill Date	:	15-Jul-2024 10:06 AM
Sample Type	:	**SERUM**	Sample Collection	:	15-Jul-2024 10:11 AM
Reff By	:	**DR.SELF**	Sample Received	:	15-Jul-2024 10:16 AM
TypedBy	:	Md Masud Ansari	Reporting Date	:	15-Jul-2024 02:34 PM

LIVER FUNCTION TEST (LFT)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
TOTAL BILIRUBIN (Method: Jendrassik and Grof)	0.9	mg/dl	0.4 - 1.2
DIRECT BILIRUBIN (Method: Modified Jendrassik)	0.2	mg/dl	Up to 0.25
INDIRECT BILIRUBIN (Method: Calculated)	0.7	mg/dl	up to 1
SGPT(ALT) (Method: Kinetic: IFCC)	19	U/L	Male :Upto 40 Female :Upto 31
SGOT(AST) (Method: Kinetic IFCC)	27	U/L	Male: Upto 37 Female: Upto 31
ALKALINE PHOSPHATASE(ALP) (Method: PNPP AMP Buffer)	88	U/L	Adults : 30-120 Children: 47 - 406
TOTAL PROTEINS (Method: Biuret)	7.8	gm/dl	6.4 - 8.3
ALBUMIN (Method: BCG)	4.2	gm/dl	3.8 - 4.4 gm/dL
GLOBULIN (Method: Calculated)	3.6	gm/dl	2.6 - 3.9
A/G Ratio (Method: Calculated)	1.2		1.2-2.2

Total Bilirubin reference range in case of Premature neonates is :0 - 1day: 1.0 - 8.0, 1 - 2day: 6.0 - 12.0, 3 - 5day: 10.0 - 14.0

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Sample Type	:	**BLOOD**	Sample Collection	:	15-Jul-2024 10:11 AM
Reff By	:	**DR.SELF**	Sample Received	:	15-Jul-2024 10:16 AM
TypedBy	:	Md Masud Ansari	Reporting Date	:	17-Jul-2024 05:45 PM

ANAEROBIC BLOOD CULTURE

INVESTIGATION	RESULT
SPECIMEN	Blood
RESULTS	No bacterial growth seen after 36 to 48 hrs of aerobic incubation at 37 °C

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Reff By	:	**DR.SELF**	Sample Received	:	15-Jul-2024 10:16 AM
TypedBy	:	Md Masud Ansari	Reporting Date	:	17-Jul-2024 05:40 PM

CULTURE & SENSITIVITY OF URINE

INVESTIGATION	RESULT
SPECIMEN	Urine
Results	No bacterial growth seen after 36 to 48 hrs of aerobic incubation at 37 °C

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Sample Type	:	**WB EDTA**	Sample Collection	:	15-Jul-2024 10:11 AM
Reff By	:	**DR.SELF**	Sample Received	:	15-Jul-2024 10:16 AM
TypedBy	:	Md Masud Ansari	Reporting Date	:	15-Jul-2024 02:37 PM

COMPLETE BLOOD PICTURE (CBP)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
HAEMOGLOBIN (Method: Cell Counter)	**11.2**	gm/dL	12.0 - 15.0
RBC Count (Method: Cell Counter)	4.1	Millions/Cumm	3.8 - 4.8
WBC Count (Method: Cell Counter)	**19,800**	Cells/cumm	4,000 - 11,000
RDW (Method: Cell Counter)	13.9	%	11.0 - 16.0
DIFFERENTIAL COUNT			
NEUTROPHILS (Method: Cell Counter)	**78**	%	40 - 75
LYMPHOCYTES (Method: Cell Counter)	**18**	%	20 - 40
EOSINOPHILS (Method: Cell Counter)	01	%	01 - 06
MONOCYTES (Method: Cell Counter)	03	%	02 - 10
BASOPHILS (Method: Cell Counter)	00	%	0 - 0
PCV (Haematocrit) (Method: Cell Counter)	**33**	%	35 - 45
MCV (Method: Cell Counter)	**80**	FL	83 - 101
MCH (Method: Cell Counter)	27	pg	27 - 32
MCHC (Method: Cell Counter)	33	%	32 - 35
PLATELET COUNT (Method: Cell Counter)	2.20	Lakhs/Cumm	1.5 - 4.5

PERIPHERAL SMEAR

RBCs	NORMOCYTIC MILD HYPOCHROMIC
WBCs	LEUCOCYTOSIS WITH NEUTROPHILIA
PLATELETS	ADEQUATE

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Sugessted Clinical Correlation If necesarry Kindly Discuss.

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RAPID MALARIA TEST (PV PF)

INVESTIGATION	RESULT	NORMAL RANGE
MALARIAL PARASITE PLASMODIUM VIVAX(P.V) (Method: Immunochromotography)	NEGATIVE	NEGATIVE
MALARIAL PARASITE PLASMODIUM FALCIPARUM(PF) (Method: Immunochromotography)	NEGATIVE	NEGATIVE

Method: *Immunochromotography*

Note :

1. This test detects P.falciparum and P.Vivax Malarial antigens targeted by highly specific monoclonal antibodies of pLDH and Aldolase respectively.
2. Sensitivity and Specificity of this test are 98.2% &99.6% for P.falciparum and 91.8% &99.6% for P.Vivax detection.
3. This kit can provide fast and easy way to get a result, but do not completely exclude the possibility of false positive or false negative result caused by various factors.

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WIDAL

INVESTIGATION	RESULT
SALMONELLA TYPHI‘ O ‘	1 in 160 DILUTION
SALMONELLA TYPI ‘ H ‘	1 in 80 DILUTION
SALMONELLA PARA TYPHI‘ AH‘	1 in 20 DILUTION
SALMONELLA PARA TYPHI‘ BH‘	1 in 20 DILUTION
BIOLOGICAL REFERENCE	1:80 and above titers considered as positive

Method: *SEMI QUANTITAVE SLIDE AGGLUTINATION*

Interpretation and Remarks:

- The Widal test is applied for the diagnosis of enteric fever that includes typhoid and paratyphoid caused by Salmonella? typhi and Salmonella paratyphi respectively.
- For the slide agglutination test, stained Salmonella antigens are used to detect the presence of specific agglutinin in the patient's serum.
- The slide agglutination test is used as a primary screening procedure.
- Widal test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli. The Agglutinins appears usually at the end of the first week of infection and increases steadily till third / fourth week after which the decline starts. A positive Widal test may occur because of typhoid vaccination or past typhoid infection and in certain autoimmune diseases. Nonspecific febrile disease may cause titre to increase. The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages

Sugessted Clinical Correlation If necesarry Kindly Discuss.

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C - REACTIVE PROTEINS (CRP)

INVESTIGATION	RESULT	UNITS	NORMAL RANGE
C – REACTIVE PROTEINS (Method: Immunoturbidimetry)	**24.76**	mg/L	0.0 - 6.0
INERPRETAION	POSITIVE		

Note :

1.The CRP test is a sensitive indicator of inflammatory processes.

2.The determination of the CRP level can be used in therapy control

3.As with all the diagnostic methods, the final diagnosis should not be based on the result of a single test, but on a correlation of test results with other clinical findings.

4.The strength of agglutination is not indicative of the CRP concentration in the samples tested.

Please Corelate With Clinical Findings If Necessary Discuss

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CUE(COMPLETE URINE EXAMINATION)

INVESTIGATION	RESULT	NORMAL RANGE
PHYSICAL EXAMINATION		
QUANTITY	20 ml	
COLOUR	PALE YELLOW	
APPEARANCE	SLIGHTLY TURBID	
REACTION (PH)	6.0	4.6 - 8.0
SPECIFIC GRAVITY	1.025	1.005 - 1.030
CHEMICAL EXAMINATION		
ALBUMIN	TRACE	NEGATIVE
SUGAR	NIL	NIL
UROBILINOGEN	NEGATIVE	NEGATIVE
BILE SALT	NEGATIVE	NEGATIVE
BILE PIGMENT	NEGATIVE	NEGATIVE
KETONE BODIES	NEGATIVE	NEGATIVE
MICROSCOPIC EXAMINATION		
PUS CELLS	**6 - 8 / HPF**	0 - 5 / HPF
RBC	NIL	NIL
EPETHILIAL CELLS	2 - 3 / HPF	0 - 5 / HPF
CRYSTALS	NIL	NIL
CASTS	NIL	NIL

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OTHERS	NIL	NIL

Method: *Multi Reagent Strip / Chemical / Microscopy*

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