

MISS. SONAM K. CHOUDHARY

Age / Sex : 30 YRS/ F  
Referred by : Dr. Karthik D. Srinivas (MBBS, MD Pathologist)  
Reg No. : 223  
Collected at : 85696 Dwaipayana Cape, Sangali 858

Registered on : 29/02/2024 04:45 PM  
Collected on : 01/03/2024 11:45 AM  
Received on : 02/03/2024 04:45 PM  
Reported on : 02/03/2024 04:45 PM



Hematology  
COMPLETE BLOOD COUNT (CBC)

| TEST  | VALUE    | UNIT | REFERENCE      |
|---|----------|------|----------------|
| Hemoglobin  | 14       | g/dl | 13 - 17        |
| Total Leukocyte Count                             | ↑ 12,000 | cumm | 4,000 - 11,000 |
| Differential Leucocyte Count (DLC)                |          |      |                |
| Nutrophils  | 45       |      | 40 - 80        |
| Lymphocytes                                       | ↑ 45     |      | 20 - 40        |
| Mean Corpuscular Volume (MCV) <i>(Calculated)</i> | ↓ 12,000 | cumm | 4,000 - 11,000 |

Instruments : CBC machine

A complete blood count (CBC) is used to evaluate overall health and detect wide range of disorders, including anemia, infection and leukemia.

There have been some reports of WBC and platelet counts being lower in venous blood than in capillary blood samples, although still within these reference ranges. Low WBC - sepsis, marrow hypoplasia  
High WBC - acute stress, infection, malignancies

Low platelets - risk of bleeding


High platelets - risk of thrombosis


Notes :


1.Macrocytic Anemia/Dimorphic Anemia can have low platelet count.


2.Microcytic Anemia/Leucocytosis can have Reactive thrombocytosis.

For microcytic indices a Mentzer index of less than 13 suggests that the patient may have thalassemia trait, and an index of more than 13 suggests that the patient may have iron deficiency.

  
Mr. Sachin Sharma  
DMLT, Lab Incharge

  
Dr. A. K. Asthana  
MBBS, MD.DPB(MUMBAI)  
Consulting Pathologist

  
Mr. Sachin Sharma  
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Dr. H. K. Asthana  
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