

Patient Name	: Mr . VENKATRAMANA	Bill No/UMR No	: BIL0049353/UMR0384365
Age/Gender	: 40 Y(s) /Male	Sample Drawn Date	: 28-Oct-2024 06:01 PM
Referred By	: Dr.RAMYA S S	Received Date	: 28-Oct-2024 06:57 PM
Referral Customer	: SVASTHA HOSPITAL	Report Date	: 28-Oct-2024 06:59 PM
Sample Type	: WB-EDTA	Collection Centre	: PMD056
Bar Code	: 1127155	Print Dt	: 28-Oct-2024 10:30 PM

### HAEMATOLOGY

<b>TEST NAME</b>	<b>RESULTS</b>	<b>BIOLOGICAL REFERENCE INTERVALS</b>
<b>CBC - COMPLETE BLOOD COUNT</b>		
Haemoglobin	: 16.93	12.5-18.0 gm%
<i>Method :Automated-Cell counter</i>		
RBC Counts	: 5.25	Adults:4.0-5.2 Millions/cumm
<i>Method :Automated-Cell counter</i>		
Total WBC count	: 13,000	Adults:4,000-11,000 cells/cumm
<i>Method :Automated-Cell counter</i>		
Platelet Count	: 1.85	Adults:1.5-4.5 Lakhs/Cumm
<i>Method :Automated-Cell counter</i>		
Packed Cell Volume(PCV)	: 49.8	36.0-46.0 %Vol
<i>Method :Automated-Cell counter</i>		
Mean Corpuscular Volume(MCV)	: 90.1	80-100 fL
Mean Corpuscular Heamoglobin(MCH)	: 30.6	27-32 pg
Mean Corpuscular Heamoglobin Concentration(MCHC)	: 34.0	32-36 g/dl
<i>Method :Automated-Cell counter Calculated Parameter</i>		
<b>Differential Count</b>		
Neutrophils	: 87.66	Male :40.0-76.0 %
Lymphocytes	: 9.07	Male :20.0-40.0 %
Eosinophils	: 0.45	Male :0.0-6.0 %
Basophils	: 0.08	0.0-1.0 %
Monocytes	: 2.74	Male :2.0-10.0 %
RDW - SD	: 44.6	29-46 fL
RDW - CV	: 13.6	11.5-14.5 %
<i>Method :Automated-Cell counter</i>		

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



**Dr.SAMIKSHYA RAY**

MD PATHOLOGY

CONSULTANT PATHOLOGIST



\* Suggested Clinical Correlation If Necessary Kindly Discuss With the Signatory




**Ms.JEMISHA J**

Checked by

SENIOR LAB TECHNOLOGIST

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### SEROLOGY

TEST NAME	RESULTS	BIOLOGICAL REFERENCE INTERVALS
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#### **DENGUE NS1 ANTIGEN**

Dengue NS1 Ag : NON-REACTIVE

#### **Interpretation**

This is rapid solid phase immuno-chromatographic test for the qualitative detection of dengue NS1 antigen and differential detection of IgM & IgG antibodies to dengue virus in human serum/plasma. Serological cross reactivity across flavivirus group is common. Presence of heterophile antibodies in patient's sample with Rheumatic diseases and autoimmune disorders may lead to false results. This is only screening test, therefore isolation of virus, antigen detection in fixed tissues, RT-PCR and serological tests like haemagglutination inhibition test may be used as a confirmatory tests.

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



**Dr.SANTOSH**

MD

Consultant Molecular Biology

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### SEROLOGY

<u>TEST NAME</u>	<u>RESULTS</u>	<u>BIOLOGICAL REFERENCE INTERVALS</u>
<b>DENGUE IGG AND IGM</b>		
Dengue IgG <i>Method :Rapid Elisa</i>	: NON-REACTIVE	
Dengue IgM <i>Method :Rapid Elisa</i>	: NON-REACTIVE	

#### **Interpretation**

This is rapid solid phase immuno-chromatographic test for the qualitative detection of dengue NS1 antigen and differential detection of IgM & IgG antibodies to dengue virus in human serum/plasma. Serological cross reactivity across flavivirus group is common. Presence of heterophile antibodies in patient's sample with Rheumatic diseases and autoimmune disorders may lead to false results. This is only screening test, therefore isolation of virus, antigen detection in fixed tissues, RT-PCR and serological tests like haemagglutination inhibition test may be used as a confirmatory tests.

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### SEROLOGY

<b>TEST NAME</b>	<b>RESULTS</b>	<b>BIOLOGICAL REFERENCE INTERVALS</b>
Chikungunya IgM	: NEGATIVE	Negative

#### **Interpretation**

Chikungunya virus (CHIKV) is an arthropod-borne virus, of the genus Alphavirus, that is transmitted to humans by virus-carrying Aedes mosquitoes.[1] There have been recent breakouts of CHIKV associated with severe illness. CHIKV infection causes an illness with a similar mode of transmission as dengue fever, with an acute febrile phase lasting two to five days, followed by a longer period of joint pains in the extremities. The pain associated with CHIKV infection of the joints may persist for weeks or months, or in some cases years. Prevention is via mosquito control and preventing bite by infected mosquitoes.

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



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