



MC-2438

Patient Name : Mr.NISHANTH
Age/Gender : 23 Y 0 M 0 D /M
UHID/MR No : DVEQ.0000000270
Visit ID : DVEQOPV272
Ref Doctor : Dr.SELF
IP/OP NO :

Collected : 29/Oct/2025 05:39PM
Received : 30/Oct/2025 08:32AM
Reported : 30/Oct/2025 11:38AM
Status : Final Report
Client Name : PCC VENGAL RAO NAGAR
Center location : Vengal Rao Nagar,Hyderabad

DEPARTMENT OF HAEMATOLOGY

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|--|--------------|---------------|--------------------|--------------------------------|
| COMPLETE BLOOD COUNT (CBC) , WHOLE BLOOD EDTA | | | | |
| HAEMOGLOBIN | 15.9 | g/dL | 13-17 | Spectrophotometer |
| PCV | 47.40 | % | 40-50 | Electronic pulse & Calculation |
| RBC COUNT | 5.4 | Million/cu.mm | 4.5-5.5 | Electrical Impedance |
| MCV | 87.8 | fL | 83-101 | Calculated |
| MCH | 29.5 | pg | 27-32 | Calculated |
| MCHC | 33.6 | g/dL | 31.5-34.5 | Calculated |
| R.D.W | 13.7 | % | 11.6-14 | Calculated |
| TOTAL LEUCOCYTE COUNT (TLC) | 3,900 | cells/cu.mm | 4000-10000 | Electrical Impedance |
| DIFFERENTIAL LEUCOCYTIC COUNT (DLC) | | | | |
| NEUTROPHILS | 62 | % | 40-80 | Flow cytometry |
| LYMPHOCYTES | 25 | % | 20-40 | Flow cytometry |
| EOSINOPHILS | 2 | % | 1-6 | Flow cytometry |
| MONOCYTES | 10 | % | 2-10 | Flow cytometry |
| BASOPHILS | 1 | % | 0-2 | Flow cytometry |
| CORRECTED TLC | 3,900 | Cells/cu.mm | | Calculated |
| ABSOLUTE LEUCOCYTE COUNT | | | | |
| NEUTROPHILS | 2418 | Cells/cu.mm | 2000-7000 | Calculated |
| LYMPHOCYTES | 975 | Cells/cu.mm | 1000-3000 | Calculated |
| EOSINOPHILS | 78 | Cells/cu.mm | 20-500 | Calculated |
| MONOCYTES | 390 | Cells/cu.mm | 200-1000 | Calculated |
| BASOPHILS | 39 | Cells/cu.mm | 0-100 | Calculated |
| Neutrophil lymphocyte ratio (NLR) | 2.48 | | 0.78- 3.53 | Calculated |
| PLATELET COUNT | 150000 | cells/cu.mm | 150000-410000 | Electrical impedance |
| MPV | 10.1 | fL | 8.1-13.9 | Calculated |

Leucopenia.Kindly correlate clinically.

Dr.R.SHALINI
M.B.B.S,M.D(Pathology)
Consultant Pathologist

SIN No:HA09993464

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This test has been performed at Apollo Health and Lifestyle Ltd- Hyderabad.



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Center location : Vengal Rao Nagar,Hyderabad

DEPARTMENT OF SEROLOGY

| Test Name | Result | Unit | Bio. Ref. Interval | Method |
|-------------------------------------|--------|------|--------------------|--------------------|
| WIDAL TEST (TUBE METHOD) | | | | |
| SALMONELLA TYPHI `O` , SERUM | 1:20 | | | TUBE AGGLUTINATION |
| SALMONELLA TYPHI `H` , SERUM | 1:20 | | | TUBE AGGLUTINATION |
| S.PARATYPHI A `H` , SERUM | 1:20 | | | TUBE AGGLUTINATION |
| S.PARATYPHI B `H` , SERUM | 1:20 | | | TUBE AGGLUTINATION |

Comment:

Note:

1. Titres 1:80 and above of "O" antigen & 1:160 and above of "H" antigen are significant
2. Rising titers are significant

Comments: This test measures somatic O and flagellar H antibodies against Typhoid and Paratyphoid bacilli. The agglutinins usually appear at the end of the first week of infection and increase steadily till third / fourth week after which they start declining. A positive Widal test may occur because of typhoid vaccination or previous typhoid infection and in certain autoimmune diseases. Non-specific febrile disease may cause this titer to increase. The test may be falsely negative in cases of Enteric fever treated with antibiotics in the early stages. The recommended test especially in the first week after infection is Blood Culture.

*** End Of Report ***

DR.MIR SALMAN ALI
M.B.B.S,MD
Consultant Microbiologist

SIN No:SE02966367

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6. It is presumed that the tests performed are, on the specimen / sample being to the patient named or identified and the verifications of particulars have been confirmed by the patient or his / her representative at the point of generation of said specimen
7. The reported results are restricted to the given specimen only. Results may vary from lab to lab and from time to time for the same parameter for the same patient (within subject biological variation).
8. The patient details along with their results in certain cases like notifiable diseases and as per local regulatory requirements will be communicated to the assigned regulatory bodies
9. The patient samples can be used as part of internal quality control, test verification, data analysis purposes within the testing scope of the laboratory.
10. This report is not valid for medico legal purposes. It is performed to facilitate medical diagnosis only



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