

Ref. No : 19190
 Name : Ms. Vaishnavi
 Ref. by : Dr. POOJA S MARGOL.

Collected On : 05/08/2025 / 19:32
 Age/Sex : 24 Years, Female
 Reported On : 05/08/2025 21:14

HAEMATOLOGY REPORTS

Test Parameters	Observed Values	Biological Reference Interval	Specimen
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COMPLETE BLOOD COUNT

R.B.C COUNT	: 4.41 millions/cumm	3.90 - 5.20 millions/cumm
HAEMOGLOBIN	: 10.5 gm/dl	11.5 - 15.1 gm/dl
HCT/PCV(HCT001)	: 33.3 %	35.0 - 45.0 %
M.C.V.	: 75.6 fl	75.0 - 97.0 fl
M.C.H.	: 23.9 pg	26.5 - 33.0 pg
M.C.H.C.	: 31.6 gm/dl	32.0 - 36.0 gm/dl
RDW CV%	: 20.0 %	11 - 14.5 %
PLATELET COUNT	: 3.8 lakh/cumm	1.5-4.5 lakh/cumm
PDW	: 11.3 fl	11.0 - 20.0 fl
MPV	: 10.1 fl	7.4 - 11.0 fl
PCT	: 0.383 %	0.150 - 0.400 %
W.B.C COUNT	: 6060 cells/cumm	4000 - 11000 cells/cumm

DIFFERENTIAL COUNTS

NEUTROPHILS %	: 80 %	40 - 75 %
LYMPHOCYTES %	: 15 %	15.0 - 45.0 %
MONOCYTES %	: 03 %	4.0 - 13.0 %
EOSINOPHILS %	: 02 %	0.5 - 7.0 %
BASOPHILS %	: 00 %	0.0 - 2.0 %

DIFFERENTIAL COUNTS ABSOLUTE

ABSOLUTE NEUTROPHIL COUNT	: 4.91 $10^3/\mu l$	1.50 - 7.50 $10^3/\mu l$
ABSOLUTE LYMPHOCYTE COUNT	: 0.95 $10^3/\mu l$	1.25 - 4.00 $10^3/\mu l$
ABSOLUTE MONOCYTE COUNT	: 0.17 $10^3/\mu l$	0.20 - 0.80 $10^3/\mu l$
ABSOLUTE EOSINOPHIL COUNT	: 0.03 $10^3/\mu l$	0 - 0.5 $10^3/\mu l$
ABSOLUTE BASINOPHIL COUNT	: 0.00 $10^3/\mu l$	0.00 - 0.10 $10^3/\mu l$

Specimen Type : Whole Blood EDTA

Methodology : (Horiba Yumizen Principle/Electrical Impedance/Photometric/Automated Calculation/Modified Westergren's/VCSn Technology/Optical/Impedance/Microscopy)



Dr. Geetanjali Jeevangi
 MBBS, MD DNB (Pathology)
 Pathologist
 KMC No: 87132

Registered On : 05/08/2025 / 19:32
 Sample received on :
 Sample collected from : LAB

Entered by : RAJSHEKAR / 05/08/2025 9:08:00 PM
 Reported by : Dr. GEETANJALI J / 05/08/2025 9:14:00 PM
 Sample collection time :

Investigations have their limitations. Solitary Pathological/Radiological and other investigation only help in diagnosing the disease in correlation to clinical symptoms and other related test. Please interpret accordingly. This report is not for medico legal purpose.

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SEROLOGY REPORTS

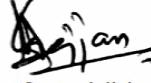
Test Parameters	Observed Values	Biological Reference Interval	Specimen
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DENGUE (Spot)

NS 1 Antigen <i>(Qualitative Rapid Immunochromatography)</i>	Negative	Serum
IgG Antibodies <i>(Qualitative Rapid Immunochromatography)</i>	Negative	
IgM Antibodies <i>(Qualitative Rapid Immunochromatography)</i>	Negative	

NOTE:

- 1) This is only a screening test.
- 2) Confirmation should be done by higher tests like isolation of virus, antigen detection in fixed tissues & RT-PCR.
- 3) Serological cross reactivity across Flavivirus is common.
- 4) Reactivity for IgG may be indicative of secondary or previous Dengue infections.
- 5) As with all diagnostic tests, results must be correlated with clinical findings.
- 6) If strongly suspected retest after 3-5 days.


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Entered by : RAJSHEKAR / 05/08/2025 8:44:00 PM
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Reported On : 05/08/2025 20:42

BIOCHEMISTRY REPORTS

Test Parameters	Observed Values	Biological Reference Interval	Specimen
Random Blood Glucose <i>Method : Absorbance Photometry</i>	142 mg/dl	70 - 180 mg/dl	Serum

Method : Biuret**Dr. Shivprasad. S**
MBBS, M.D.(Biochemistry)
Biochemist

Registered On : 05/08/2025 / 19:32

Entered by : Dr. SHIVPRASAD S / 05/08/2025 8:42:00 PM

Sample received on :

Reported by : Dr. SHIVPRASAD S / 05/08/2025 8:42:00 PM

Sample collected from : LAB

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CLINICAL PATHOLOGY

Test Parameters	Observed Values	Biological Reference Interval	Specimen
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CLINICAL PATHOLOGY

Urine -Routine analysis

General Examination

Appearance	Clear
Color	Pale yellow
	Pale Yellow

Chemical Examination

Albumin	Nil	Absent	Urine
Sugar	Nil	Absent	

Microscopic Examination

Pus Cells	2 - 3 /hpF
Epithelial Cells	3 - 5 /hpF
RBC	NIL
Casts	NIL
Crystals	NIL
Bacteria	NIL



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HAEMATOLOGY

Test Parameters

Observed Values

SpecimeTest Parameters

Malarial Parasite
(slide Method)

Negative



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SEROLOGY REPORTS.

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Widal Test (Slide Method)

S. Typhi 'O'	1 : 320	Serum
S. Typhi 'H'	1 : 160	
S. Para Typhi 'AH'	Negative	
S. Para Typhi 'BH'	Negative	

Widal Test **POSITIVE(Correlate Clinically)**

NOTE:

1. This is a rapid test for detection of Agglutinins to S.typhi and S. paratyphi in the patient's serum.
2. Agglutinins usually appear at the end of first week. So the test may be negative in spite of patient having infection which can be confirmed by blood culture.
2. If patient is on antibiotic therapy, Antibody titre will not show significant rise.
3. Endemic or local titre should be considered which may range from 1:20 to 1:80.
4. Transient rise is seen in case of previous infection or immunization, so rising titre is more significant.
5. A rising titre is more significant than a single high titre. It is therefore necessary to evaluate two or more serum samples taken at 4-6 days intervals after the onset of disease.
5. Chronic liver disease has been shown to cause rise in salmonella antibody titre.
6. As with all diagnostic tests, results must be correlated with clinical findings.



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