

Dr. Vinay Chopra  
MD (Pathology & Microbiology)  
Chairman & Consultant Pathologist

Dr. Yugam Chopra  
MD (Pathology)  
CEO & Consultant Pathologist

<b>NAME</b>	: Mr. OM PARKASH GAMBHIR	<b>PATIENT ID</b>	: 1560780
<b>AGE/ GENDER</b>	: 62 YRS/MALE	<b>REG. NO./LAB NO.</b>	: <b>012407250052</b>
<b>COLLECTED BY</b>	: SURJESH	<b>REGISTRATION DATE</b>	: 25/Jul/2024 05:29 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 25/Jul/2024 05:30PM
<b>BARCODE NO.</b>	: 01513807	<b>REPORTING DATE</b>	: 25/Jul/2024 05:46PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
<b>CLIENT ADDRESS</b>	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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**HAEMATOLOGY**

**COMPLETE BLOOD COUNT (CBC)**

**RED BLOOD CELLS (RBCS) COUNT AND INDICES**

<b>HAEMOGLOBIN (HB)</b> <i>by CALORIMETRIC</i>	11.7 <sup>L</sup>	gm/dL	12.0 - 17.0
<b>RED BLOOD CELL (RBC) COUNT</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	4.93	Millions/cmm	3.50 - 5.00
<b>PACKED CELL VOLUME (PCV)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER</i>	38 <sup>L</sup>	%	40.0 - 54.0
<b>MEAN CORPUSCULAR VOLUME (MCV)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER</i>	77 <sup>L</sup>	fL	80.0 - 100.0
<b>MEAN CORPUSCULAR HAEMOGLOBIN (MCH)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER</i>	23.8 <sup>L</sup>	pg	27.0 - 34.0
<b>MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER</i>	30.9 <sup>L</sup>	g/dL	32.0 - 36.0
<b>RED CELL DISTRIBUTION WIDTH (RDW-CV)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER</i>	16.7 <sup>H</sup>	%	11.00 - 16.00
<b>RED CELL DISTRIBUTION WIDTH (RDW-SD)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER</i>	48.2	fL	35.0 - 56.0
<b>MENTZERS INDEX</b> <i>by CALCULATED</i>	15.62	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0
<b>GREEN &amp; KING INDEX</b> <i>by CALCULATED</i>	26.16	RATIO	BETA THALASSEMIA TRAIT: < = 65.0 IRON DEFICIENCY ANEMIA: > 65.0

**WHITE BLOOD CELLS (WBCS)**

<b>TOTAL LEUCOCYTE COUNT (TLC)</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	8360	/cmm	4000 - 11000
<b>NUCLEATED RED BLOOD CELLS (nRBCS)</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER &amp; MICROSCOPY</i>	NIL		0.00 - 20.00
<b>NUCLEATED RED BLOOD CELLS (nRBCS) %</b> <i>by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER &amp; MICROSCOPY</i>	NIL	%	< 10 %

**DIFFERENTIAL LEUCOCYTE COUNT (DLC)**



DR. VINAY CHOPRA  
CONSULTANT PATHOLOGIST  
MBBS, MD (PATHOLOGY & MICROBIOLOGY)

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CONSULTANT PATHOLOGIST  
MBBS, MD (PATHOLOGY)



TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.

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<b>NEUTROPHILS</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	74 <sup>H</sup>	%	50 - 70
<b>LYMPHOCYTES</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	11 <sup>L</sup>	%	20 - 40
<b>EOSINOPHILS</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	6	%	1 - 6
<b>MONOCYTES</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	9	%	2 - 12
<b>BASOPHILS</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	0	%	0 - 1
<b><u>ABSOLUTE LEUKOCYTES (WBC) COUNT</u></b>			
<b>ABSOLUTE NEUTROPHIL COUNT</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	6186	/cmm	2000 - 7500
<b>ABSOLUTE LYMPHOCYTE COUNT</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	920	/cmm	800 - 4900
<b>ABSOLUTE EOSINOPHIL COUNT</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	502 <sup>H</sup>	/cmm	40 - 440
<b>ABSOLUTE MONOCYTE COUNT</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	752	/cmm	80 - 880
<b>ABSOLUTE BASOPHIL COUNT</b> <i>by FLOW CYTOMETRY BY SF CUBE &amp; MICROSCOPY</i>	0	/cmm	0 - 110
<b><u>PLATELETS AND OTHER PLATELET PREDICTIVE MARKERS.</u></b>			
<b>PLATELET COUNT (PLT)</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	169000	/cmm	150000 - 450000
<b>PLATELET CRIT (PCT)</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	0.2	%	0.10 - 0.36
<b>MEAN PLATELET VOLUME (MPV)</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	12	fL	6.50 - 12.0
<b>PLATELET LARGE CELL COUNT (P-LCC)</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	64000	/cmm	30000 - 90000
<b>PLATELET LARGE CELL RATIO (P-LCR)</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	37.7	%	11.0 - 45.0
<b>PLATELET DISTRIBUTION WIDTH (PDW)</b> <i>by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE</i>	16.5	%	15.0 - 17.0

NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD



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CONSULTANT PATHOLOGIST  
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Test Name	Value	Unit	Biological Reference interval
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**PERIPHERAL BLOOD SMEAR FOR MALARIA**

PERIPHERAL BLOOD SMEAR  
FOR MALARIAL PARASITE (MP)  
by MICROSCOPY

NO MALARIA PARASITE (MP) SEEN IN SMEAR EXAMINED

DR.VINAY CHOPRA  
CONSULTANT PATHOLOGIST  
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CONSULTANT PATHOLOGIST  
MBBS , MD (PATHOLOGY)



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<b>AGE/ GENDER</b>	: 62 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012407250052
<b>COLLECTED BY</b>	: SURJESH	<b>REGISTRATION DATE</b>	: 25/Jul/2024 05:29 PM
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<b>BARCODE NO.</b>	: 01513807	<b>REPORTING DATE</b>	: 25/Jul/2024 06:05PM
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Test Name	Value	Unit	Biological Reference interval
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**IMMUNOPATHOLOGY/SEROLOGY**

**DENGUE FEVER COMBO SCREENING - (NS1 ANTIGEN, IgG AND IgM)**

DENGUE NS1 ANTIGEN - SCREENING <i>by ICT (IMMUNOCHROMATOGRAPHY)</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
DENGUE ANTIBODY IgG - SCREENING <i>by ICT (IMMUNOCHROMATOGRAPHY)</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
DENGUE ANTIBODY IgM - SCREENING <i>by ICT (IMMUNOCHROMATOGRAPHY)</i>	NEGATIVE (-ve)		NEGATIVE (-ve)

**INTERPRETATION:-**

- This is a solid phase immunochromatographic ELISA test for the qualitative detection of the specific IgG and IgM antibodies against the Dengue virus.
- The IgM antibodies take a minimum of 5-10 days in primary infection and 4-5 days in secondary infections to test positive and hence are suitable for the diagnosis of dengue fever only when the fever is approximately one week old.
- The IgG antibodies develop at least two weeks after exposure to primary infection and subsequently remain positive for the rest of the life. A positive result is incapable of differentiating a current infection from a past infection.
- The Dengue NS-1 antigen test is most suited for early diagnosis (within the first week of exposure).



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Test Name	Value	Unit	Biological Reference interval
<b>WIDAL SLIDE AGGLUTINATION TEST</b>			
SALMONELLA TYPHI O <i>by SLIDE AGGLUTINATION</i>	NIL	TITRE	1 : 80
SALMONELLA TYPHI H <i>by SLIDE AGGLUTINATION</i>	NIL	TITRE	1 : 160
SALMONELLA PARATYPHI AH <i>by SLIDE AGGLUTINATION</i>	NIL	TITRE	1 : 160
SALMONELLA PARATYPHI BH <i>by SLIDE AGGLUTINATION</i>	NIL	TITRE	1 : 160

**INTERPRETATION:**

1. Titres of 1:80 or more for "O" agglutinin is considered significant.
2. Titres of 1:160 or more for "H" agglutinin is considered significant.

**LIMITATIONS:**

1. Agglutinins usually appear by 5th to 6th day of illness of enteric fever, hence a negative result in early stage is inconclusive. The titre then rises till 3rd or 4th week, after which it declines gradually.
2. Lower titres may be found in normal individuals.
3. A single positive result has less significance than the rising agglutination titre, since demonstration of rising titre four or more in 1st and 3rd week is considered as a definite evidence of infection.
4. A simultaneous rise in H agglutinins is suggestive of paratyphoid infection.

**NOTE:**

1. Individuals with prior infection or immunization with TAB vaccine may develop an ANAMNESTIC RESPONSE (False-Positive) during an unrelated fever i.e High titres of antibodies to various antigens. This may be differentiated by repetition of the test after a week.
2. The anamnestic response shows only a transient rise, while in enteric fever rise is sustained.
3. H agglutinins tend to persist for many months after vaccination but O agglutinins tend to disappear sooner i.e within 6 months. Therefore rise in O agglutinins indicate recent infection.



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**CLINICAL PATHOLOGY**

**URINE ROUTINE & MICROSCOPIC EXAMINATION**

**PHYSICAL EXAMINATION**

QUANTITY RECEIVED	10	ml	
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
COLOUR	PALE YELLOW		PALE YELLOW
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
TRANSPARANCY	CLEAR		CLEAR
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
SPECIFIC GRAVITY	>=1.030		1.002 - 1.030
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			

**CHEMICAL EXAMINATION**

REACTION	ACIDIC		
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
PROTEIN	2+		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
SUGAR	Negative		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
pH	<=5.0		5.0 - 7.5
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
BILIRUBIN	Negative		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
NITRITE	Negative		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY.</i>			
UROBILINOGEN	Normal	EU/dL	0.2 - 1.0
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
KETONE BODIES	Negative		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
BLOOD	Negative		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			
ASCORBIC ACID	NEGATIVE (-ve)		NEGATIVE (-ve)
<i>by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY</i>			

**MICROSCOPIC EXAMINATION**



*Chopra*  
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MBBS, MD (PATHOLOGY)



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Test Name	Value	Unit	Biological Reference interval
RED BLOOD CELLS (RBCs) <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)	/HPF	0 - 3
PUS CELLS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	2-3	/HPF	0 - 5
EPITHELIAL CELLS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	1-2	/HPF	ABSENT
CRYSTALS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
CASTS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
BACTERIA <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
OTHERS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
TRICHOMONAS VAGINALIS (PROTOZOA) <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	ABSENT		ABSENT

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



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