



	Dr. Vinay Chopra MD (Pathology & Micr Chairman & Consultar	obiology)		(Pathology)
NAME	: Mrs. AMAR SHARDA			
AGE/ GENDER	: 81 YRS/FEMALE		PATIENT ID	: 1563641
COLLECTED BY	: SURJESH		REG. NO./LAB NO.	: 012407280082
REFERRED BY	: CENTRAL PHOENIX CLUB (AMBAI	LA CANTT)	REGISTRATION DATE	: 28/Jul/2024 06:47 PM
BARCODE NO.	:01514017		COLLECTION DATE	: 28/Jul/2024 06:49PM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		REPORTING DATE	: 28/Jul/2024 07:07PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMB/	AI A CANTT		
Test Name		Value	Unit	Biological Reference interval
		HAEM	ATOLOGY	
	COM		OOD COUNT (CBC)	
	BCS) COUNT AND INDICES	10.8 ^L		10.0.1/.0
HAEMOGLOBIN (HB) by CALORIMETRIC	HAEMOGLOBIN (HB)		gm/dL	12.0 - 16.0
RED BLOOD CELL (RB	RED BLOOD CELL (RBC) COUNT by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE		Millions/	/cmm 3.50 - 5.00
PACKED CELL VOLUME (PCV)		33.2 ^L	%	37.0 - 50.0
MEAN CORPUSCULA		95.6	fL	80.0 - 100.0
	<i>utomated hematology analyzer</i> R HAEMOGLOBIN (MCH)	31.1	DQ	27.0 - 34.0
	UTOMATED HEMATOLOGY ANALYZER	31.1	pg	27.0 - 34.0
	R HEMOGLOBIN CONC. (MCHC) UTOMATED HEMATOLOGY ANALYZER	32.6	g/dL	32.0 - 36.0
RED CELL DISTRIBUT	ION WIDTH (RDW-CV) utomated hematology analyzer	15.6	%	11.00 - 16.00
RED CELL DISTRIBUT	ION WIDTH (RDW-SD) UTOMATED HEMATOLOGY ANALYZER	55.3	fL	35.0 - 56.0
by CALCULATED BY A MENTZERS INDEX by CALCULATED	GTOWATED HEWATOLOGY AWALTZER	27.47	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0
GREEN & KING INDE by CALCULATED	X	42.95	RATIO	BETA THALASSEMIA TRAIT: < = 65.0
				IRON DEFICIENCY ANEMIA: > 65.0
WHITE BLOOD CELLS				
TOTAL LEUCOCYTE C	OUNT (TLC) Y BY SF CUBE & MICROSCOPY	13890 ^H	/cmm	4000 - 11000
NUCLEATED RED BLC		NIL		0.00 - 20.00
	OOD CELLS (nRBCS) % utomated hematology analyzer &	NIL	%	< 10 %

DIFFERENTIAL LEUCOCYTE COUNT (DLC)



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

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

 KOS Central Lab: 6349/1, Nicholson Road, Ambala Cantt - 133 001, Haryana

 KOS Molecular Lab: IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt - 133 001, Haryana

 0171-2643898, +91 99910 43898
 care@koshealthcare.com



TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT





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Test Name		Value	Unit	Biological Reference interval
	RY BY SF CUBE & MICROSCOPY	81 ^H	%	50 - 70
LYMPHOCYTES	RY BY SF CUBE & MICROSCOPY	14 ^L	%	20 - 40
EOSINOPHILS	RY BY SF CUBE & MICROSCOPY	0 ^L	%	1 - 6
MONOCYTES		5	%	2 - 12
-	by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		%	0 - 1
BASOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		0	70	0-1
ABSOLUTE LEUKOCY	YTES (WBC) COUNT			
ABSOLUTE NEUTROPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		11251 ^H	/cmm	2000 - 7500
ABSOLUTE LYMPHO		1945	/cmm	800 - 4900
ABSOLUTE EOSINOF		0 ^L	/cmm	40 - 440
ABSOLUTE MONOCY		694	/cmm	80 - 880
ABSOLUTE BASOPHI		0	/cmm	0 - 110
	Y BY SF CUBE & MICROSCOPY	-De		
	HER PLATELET PREDICTIVE MARKE	_		150000 (50000
PLATELET COUNT (P	'L I) FOCUSING, ELECTRICAL IMPEDENCE	164000	/cmm	150000 - 450000
PLATELETCRIT (PCT)		0.16	%	0.10 - 0.36
by HYDRO DYNAMIC I MEAN PLATELET VO	FOCUSING, ELECTRICAL IMPEDENCE	10	fL	6.50 - 12.0
	FOCUSING, ELECTRICAL IMPEDENCE	10		0.50 - 12.0
PLATELET LARGE CE	LL COUNT (P-LCC) FOCUSING, ELECTRICAL IMPEDENCE	37000	/cmm	30000 - 90000
PLATELET LARGE CE	LL RATIO (P-LCR)	22.7	%	11.0 - 45.0
PLATELET DISTRIBU	FOCUSING, ELECTRICAL IMPEDENCE TION WIDTH (PDW)	16.8	%	15.0 - 17.0
	FOCUSING, ELECTRICAL IMPEDENCE			

by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD

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

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







NAME		onsultant Pathologist	CEO & Consultant	
	: Mrs. AMAR SHARDA			1500044
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CLIENT ADDRESS	: 6349/1, NICHOLSON ROAI	D, AMBALA CANTT		
Test Name		Value	Unit	Biological Reference interv
	II	MMUNOPATHO	DLOGY/SEROLOGY	
			PROTEIN (CRP)	
		C-REACTIVE		
C-REACTIVE PROTEI	N (CRP) QUANTITATIVE:	C-REACTIVE 41.87 ^H	mg/L	0.0 - 6.0
SERUM	N (CRP) QUANTITATIVE:			0.0 - 6.0
SERUM by NEPHLOMETRY	N (CRP) QUANTITATIVE:			0.0 - 6.0
SERUM by NEPHLOMETRY INTERPRETATION: 1. C-reactive protein	(CRP) is one of the most sensit	41.87^H ive acute-phase read	mg/L	0.0 - 6.0 n, inflammation, surgery, or neoplastic

and the recovery being earlier than ESR. Unlike ESR, CRP levels are not influenced by hematologic conditions like Anemia, Polycythemia etc., 5. Elevated values are consistent with an acute inflammatory process. NOTE:

*** End Of Report ***





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1. Elevated C-reactive protein (CRP) values are nonspecific and should not be interpreted without a complete clinical history. 2. Oral contraceptives may increase CRP levels.

KOS Diagnostic Lab (A Unit of KOS Healthcare)