

KOS Diagnostic Lab (A Unit of KOS Healthcare)



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

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

NAME : Mrs. PARVEEN KAUR

AGE/ GENDER : 37 YRS/FEMALE **PATIENT ID** : 1565119

COLLECTED BY : 012407300028 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 30/Jul/2024 10:56 AM BARCODE NO. :01514123 **COLLECTION DATE** : 30/Jul/2024 11:03AM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 30/Jul/2024 11:08AM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit **Biological Reference interval**

HAEMATOLOGY COMPLETE BLOOD COUNT (CBC)

RED BLOOD CELLS (RBCS) COUNT AND INDICES

HAEMOGLOBIN (HB) by CALORIMETRIC	11.2 ^L	gm/dL	12.0 - 16.0
RED BLOOD CELL (RBC) COUNT by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	4.09	Millions/cmm	3.50 - 5.00
PACKED CELL VOLUME (PCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	36.2 ^L	%	37.0 - 50.0
MEAN CORPUSCULAR VOLUME (MCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	88.3	fL	80.0 - 100.0
MEAN CORPUSCULAR HAEMOGLOBIN (MCH) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	27.4	pg	27.0 - 34.0
MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	31 ^L	g/dL	32.0 - 36.0
RED CELL DISTRIBUTION WIDTH (RDW-CV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	14.1	%	11.00 - 16.00
RED CELL DISTRIBUTION WIDTH (RDW-SD) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	46.8	fL	35.0 - 56.0
MENTZERS INDEX by CALCULATED	21.59	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0
GREEN & KING INDEX by CALCULATED	30.46	RATIO	BETA THALASSEMIA TRAIT: < = 65.0 IRON DEFICIENCY ANEMIA: > 65.0
WHITE BLOOD CELLS (WBCS)			
TOTAL LEUCOCYTE COUNT (TLC)	6130	/cmm	4000 - 11000

TOTAL LEUCOCYTE COUNT (TLC)	6130	/cmm	4000 - 11000
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
NUCLEATED RED BLOOD CELLS (nRBCS)	NIL		0.00 - 20.00
by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER &			
MICROSCOPY			
NUCLEATED RED BLOOD CELLS (nRBCS) %	NIL	%	< 10 %

by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER & MICROSCOPY

DIFFERENTIAL LEUCOCYTE COUNT (DLC)



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





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Test Name	Value	Unit	Biological Reference interval
NEUTROPHILS by Flow cytometry by SF cube & microscopy	48 ^L	%	50 - 70
LYMPHOCYTES by Flow cytometry by SF cube & microscopy	43 ^H	%	20 - 40
EOSINOPHILS by Flow cytometry by SF cube & microscopy	2	%	1 - 6
MONOCYTES by Flow cytometry by SF cube & microscopy	7	%	2 - 12
BASOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY ABSOLUTE LEUKOCYTES (WBC) COUNT	0	%	0 - 1
ABSOLUTE NEUTROPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	2942	/cmm	2000 - 7500
ABSOLUTE LYMPHOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	2636	/cmm	800 - 4900
ABSOLUTE EOSINOPHIL COUNT by Flow cytometry by sf cube & microscopy	123	/cmm	40 - 440
ABSOLUTE MONOCYTE COUNT by Flow cytometry by sf cube & microscopy	429	/cmm	80 - 880
ABSOLUTE BASOPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY PLATELETS AND OTHER PLATELET PREDICTIVE MARKEI	0 RS.	/cmm	0 - 110
PLATELET COUNT (PLT) by hydro dynamic focusing, electrical impedence	127000 ^L	/cmm	150000 - 450000
PLATELETCRIT (PCT) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	0.22	%	0.10 - 0.36
MEAN PLATELET VOLUME (MPV) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	17 ^H	fL	6.50 - 12.0
PLATELET LARGE CELL COUNT (P-LCC) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	95000 ^H	/cmm	30000 - 90000
PLATELET LARGE CELL RATIO (P-LCR) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	74.8 ^H	%	11.0 - 45.0
PLATELET DISTRIBUTION WIDTH (PDW) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD	16	%	15.0 - 17.0



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CYTOLOGY

FINE NEEDLE ASPIRATION CYTOLOGY (FNAC) OF BREAST

TEST NAME:

FINE NEEDLE ASPIRATION CYTOLOGY (FNAC) OF BREAST

CLINICAL HISTORY (IF ANY):

SITE:

Rt. breast swelling.

NATURE OF SWELLING:

Diffuse, ill-defined & soft.

MATERIAL ASPIRATED:

Fat mixed mainly.

MICROSCOPIC EXAMINATION:

FNAC rt. breast swelling show many fat cells clusters & scanty ductal cells in clusters & occ. singly. Occasionally. cells nuclei show mild atypia also.



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INTERPRETATION/RESULT:

Suggestive of Fibroadenosis. In view of atypia , biosy may be advised

*** End Of Report ***



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