

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

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

| | | | |
|-----------------------|--|--------------------------|------------------------|
| NAME | : Mr. SHER SINGH | PATIENT ID | : 1573837 |
| AGE/ GENDER | : 45 YRS/MALE | REG. NO./LAB NO. | : 012408070044 |
| COLLECTED BY | : | REGISTRATION DATE | : 07/Aug/2024 03:29 PM |
| REFERRED BY | : | COLLECTION DATE | : 07/Aug/2024 03:30PM |
| BARCODE NO. | : 01514665 | REPORTING DATE | : 08/Aug/2024 10:44AM |
| CLIENT CODE. | : KOS DIAGNOSTIC LAB | | |
| CLIENT ADDRESS | : 6349/1, NICHOLSON ROAD, AMBALA CANTT | | |

| Test Name | Value | Unit | Biological Reference interval |
|-----------|-------|------|-------------------------------|
|-----------|-------|------|-------------------------------|

CLINICAL PATHOLOGY
PLEURAL FLUID EXAMINATION

| | | | |
|---------------------------------------|----------------|-------|----------------|
| TYPE OF SAMPLE | PLEURAL FLUID | | |
| <u>MACROSCOPIC EXAMINATION</u> | | | |
| VOLUME | 20 | ML | |
| COLOUR | PALE YELLOW | | PALE YELLOW |
| APPEARANCE | HAZY | | CLEAR |
| COAGULUM | SEEN | | NOT SEEN |
| BLOOD | NEGATIVE (-ve) | | NEGATIVE (-ve) |
| <u>CHEMICAL ANALYSIS</u> | | | |
| PROTEINS | 5.57 | gm/dL | |
| <i>by SPECTROPHOTOMETRY</i> | | | |
| GLUCOSE | 38.75 | mg/dL | 0 |
| <i>by SPECTROPHOTOMETRY</i> | | | |
| <u>CYTOLOGY</u> | | | |
| TOTAL LEUCOCYTE COUNT (TLC) | 925 cells | /cmm | |
| <i>by MICROSCOPY</i> | | | |
| LYMPHOCYTES | 92 | % | |
| <i>by MICROSCOPY</i> | | | |
| POLYMORPHS | 8 | % | |
| <i>by MICROSCOPY</i> | | | |
| ** EXUDATE MAINLY. | | | |




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ADENOSINE DEAMINASE ACTIVITY (ADA)

ADENOSINE DEAMINASE ACTIVITY (ADA) 64.2^H U/L 0 - 40
 by KINETIC, SPECTROPHOTOMETRY

INTERPRETATION


| | | |
|----------------|-----|--------|
| Normal | U/L | <30 |
| Suspect | U/L | 30- 40 |
| Strong suspect | U/L | 40- 60 |
| Positive | U/L | >60 |

1. Adenosine deaminase is widely distributed in mammalian tissues, especially in T lymphocytes.
2. Increased levels of ADA are found in various forms of tuberculosis making it a marker for the same.

NOTE: Though ADA is also increased in various infections like infectious mononucleosis, typhoid, viral hepatitis & in cases of malignant tumours, the same can be ruled out clinically.




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CYTOLOGY

CYTOLOGY/CYTOLOGY EXAMINATION BODY FLUIDS/CYTOLOGY FOR MALIGNANT CELLS

TEST NAME:
CYTOLOGY

CLINICAL HISTORY (IF ANY):

SITE:

Pleural fluid

NATURE/APPEAREANCE OF SPECIMEN :

Pale yellow hazy

MICROSCOPIC EXAMINATION:

Smear show many inflammatory cells consisting of mainly lymphocytes.No malignant cells seen.

INTERPRETATION/RESULT:

Correlate clinically.




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MICROBIOLOGY
GRAMS STAIN

TEST NAME:
GRAMS STAIN

CLINICAL HISTORY (IF ANY):

NATURE OF SPECIMEN:
 Pleural fluid


MICROSCOPIC EXAMINATION :
 Gram's stained smear show no gram-ve or gram +ve bacteria.


IMPRESSION:
 Correlate clinically.

Interpretation:-

Gram stain is the most important staining method in bacteriology .It is the most rapid method employed for the presumptive diagnosis of infections agent in clinical specimens. It also servers to assess the quality of clinical specimens.
It distinguishes bacteria into broad categories :




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- (a).The gram-positive, which stain dark purple
 (b).Gram-negative ,which stain light red.
 (c).A few species are Gram-variable , and tend to show a mixture of the cells .
 (d).Further details of the bacteria as any other special features , including unusual shapes (such as comma shaped Gram negative bacilli) as also observed.

*** End Of Report ***




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