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 Chairman & Consultant Pathologist

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<b>NAME</b>	: Mr. HARBANS LAL	<b>PATIENT ID</b>	: 1461607
<b>AGE/ GENDER</b>	: 63 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012408160066
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 16/Aug/2024 06:42 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 16/Aug/2024 06:43PM
<b>BARCODE NO.</b>	: 01515185	<b>REPORTING DATE</b>	: 16/Aug/2024 07:52PM
<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

#### PROTHROMBIN TIME STUDIES (PT/INR)

<b>PT TEST (PATIENT)</b> by PHOTO OPTICAL CLOT DETECTION	15 <sup>H</sup>	SECS	11.5 - 14.5
<b>PT (CONTROL)</b> by PHOTO OPTICAL CLOT DETECTION	12	SECS	
<b>ISI</b> by PHOTO OPTICAL CLOT DETECTION	1.1		
<b>INTERNATIONAL NORMALISED RATIO (INR)</b> by PHOTO OPTICAL CLOT DETECTION	1.28 <sup>H</sup>		0.80 - 1.20
<b>PT INDEX</b> by PHOTO OPTICAL CLOT DETECTION	80	%	

#### INTERPRETATION:-

1. INR is the parameter of choice in monitoring adequacy of oral anti-coagulant therapy. Appropriate therapeutic range varies with the disease and treatment intensity.
2. Prolonged INR suggests potential bleeding disorder /bleeding complications
3. Results should be clinically correlated.
4. Test conducted on Citrated Plasma

#### RECOMMENDED THERAPEUTIC RANGE FOR ORAL ANTI-COAGULANT THERAPY (INR)

INDICATION		INTERNATIONAL NORMALIZED RATIO (INR)
Treatment of venous thrombosis	Low Intensity	2.0 - 3.0
Treatment of pulmonary embolism		
Prevention of systemic embolism in tissue heart valves		
Valvular heart disease		
Acute myocardial infarction		
Atrial fibrillation		
Bileaflet mechanical valve in aortic position		
Recurrent embolism	High Intensity	2.5 - 3.5
Mechanical heart valve		



  
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Antiphospholipid antibodies <sup>+</sup>			
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**COMMENTS:**

The prothrombin time (PT) and its derived measures of prothrombin ratio (PR) and international normalized ratio (INR) are measures of the efficacy of the extrinsic pathway of coagulation. PT test reflects the adequacy of factors I (fibrinogen), II (prothrombin), V, VII, and X. It is used in conjunction with the activated partial thromboplastin time (aPTT) which measures the intrinsic pathway.

The common causes of prolonged prothrombin time are :

- 1.Oral Anticoagulant therapy.
- 2.Liver disease.
- 3.Vit K. deficiency.
- 4.Disseminated intra vascular coagulation.
- 5.Factor 5, 7 , 10 or Prothrombin deficiency

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



  
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