Dr. Vinay Chopra
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Dr. Yugam Chopra
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CEO & Consultant Pathologist

NAME	**: Mr. AMANDEEP**		
AGE/ GENDER	: 23 YRS/MALE	**PATIENT ID**	: 1599027
COLLECTED BY	:	**REG. NO./LAB NO.**	**: 012409020043**
REFERRED BY	:	**REGISTRATION DATE**	: 02/Sep/2024 11:53 AM
BARCODE NO.	: 01516176	**COLLECTION DATE**	: 02/Sep/2024 11:54AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB	**REPORTING DATE**	: 02/Sep/2024 05:37PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval

HAEMATOLOGY

DIRECT COOMBS TEST (DCT)

DIRECT COOMBS TEST (DCT)	NEGATIVE (-ve)		NEGATIVE (-ve)

Interpretation:-

The direct Coombs test (also known as the **direct antiglobulin test** or DAT) is used to detect if antibodies or complement system factors have bound to RBC surface antigens *in vivo*.

The direct Coombs test is used clinically when immune-mediated hemolytic anemia (antibody-mediated destruction of RBCs) is suspected. This mechanism could be autoimmunity, alloimmunity or a drug-induced immune-mediated mechanism.

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CLIENT CODE.	: KOS DIAGNOSTIC LAB	**REPORTING DATE**	: 02/Sep/2024 01:49PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval

CLINICAL CHEMISTRY/BIOCHEMISTRY

G-6-PD (QUANTITATIVE KINECTICS)

G6PD (QUANTITATIVE KINECTICS) *by SPECTROPHOTOMETRY*	13.03	U/gHb	4.6 - 13.5

INTERPRETATION:

1.G-6 PD deficiency is a sex/X-linked recessive genetically inherited RBC enzyme disorder making the cells vulnerable to oxidative denaturation of haemoglobin characterized by abnormally low levels of glucose-6-phosphate dehydrogenase .

2. G6PD deficiency is the most common human enzyme defect.

3. G-6 PD levels are highest in young cells and decrease as cells age, hence in cases of G-6 PD deficiency, the older cells are preferentially destroyed.

5.G6PD helps body process carbohydrates and turn them into energy.

6. Hemolytic susceptibility in affected persons can increase greatly during intercurrent illness or upon exposure to various drugs that have oxidant properties like Primaquin, Nalidixic acid, Nitrofurantoin etc., Marked genetic heterogeneity has been reported in G-6 PD deficiency cases and > 300 variants have been defined. This heterogeneity causes variability in the degree of deficiency, types of cells affected, types of drugs causing hemolysis and susceptibility to chronic hemolysis and neonatal jaundice.

COMMON DRUGS THAT CAN INDUCE HEMOLYSIS IN G6PD DEFICIENT INDIVIDUALS INCLUDE:

1.Anti Malarial drugs (like primaquine, pamaquine, and chloroquine).

2.Sulfonamides (such as sulfanilamide, sulfamethoxazole, and mafenide).

3.Thiazolesulfone, methylene blue and naphthalene.

4.Certain analgesics (such as aspirin, phenazopyridine, and acetanilide)

5.Few non-sulfa antibiotics (nalidixic acid, nitrofurantoin, isoniazid, dapsone, and furazolidone).

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CLIENT CODE.	: KOS DIAGNOSTIC LAB	**REPORTING DATE**	: 02/Sep/2024 12:32PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval

LACTATE DEHYDROGENASE (LDH): SERUM

LACTATE DEHYDROGENASE (LDH): SERUM	335.5	U/L	225.0 - 450.0

by BASED ON SCE, SPECTROPHOTOMETRY

INTERPRETATION:-

1.Lactate dehydrogenase (LDH) activity is present in all cells of the body with highest concentrations in heart, liver, muscle, kidney, lung, and erythrocytes.
2.The test can be used for monitoring changes in tumor burden after chemotherapy, although, lactate dehydrogenase elevations in patients with cancer are too erratic to be of use in the diagnosis of cancer

INCREASED (MARKED) :-

1.Megaloblastic anemia.
2.Untreated pernicious anemia.
3.Hodgkins disease.
4.Abdominal and lung cancers.
5.Severe shock.
6.Hypoxia.

INCREASED (MODERATE):-

1.Myocardial infarction (MI).
2.Pulmonary infarction and pulmonary embolism.
3.Leukemia.
4.Hemolytic anemia.
5.Infectious mononucleosis.
6.Progressive muscular dystrophy (especially in the early and middle stages of the disease)
7.Liver disease and renal disease.

NOTE:-

1.In liver disease, elevations of LDH are not as great as the increases in aspartate amino transferase (AST) and alanine aminotransferase (ALT).
2.Serum LDH may be falsely elevated in otherwise healthy individuals which can be due to mechanical destrunction of RBCs. Therefore, Possiblity of mechanical errors (Transportation or vigorous shaking) should always be ruled out.

*** End Of Report ***

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