

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

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

NAME : Mr. DINESH  
AGE/ GENDER : 49 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01516198  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1599568  
REG. NO./LAB NO. : 012409020064  
REGISTRATION DATE : 02/Sep/2024 03:50 PM  
COLLECTION DATE : 02/Sep/2024 03:56PM  
REPORTING DATE : 02/Sep/2024 05:39PM

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

## HAEMATOLOGY

### PERIPHERAL BLOOD SMEAR FOR MALARIA

PERIPHERAL BLOOD SMEAR  
FOR MALARIAL PARASITE (MP)  
by MICROSCOPY

NO MALARIA PARASITE (MP) SEEN IN SMEAR EXAMINED



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

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



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

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

NAME : Mr. DINESH  
AGE/ GENDER : 49 YRS/MALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01516198  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1599568  
REG. NO./LAB NO. : 012409020064  
REGISTRATION DATE : 02/Sep/2024 03:50 PM  
COLLECTION DATE : 02/Sep/2024 03:56PM  
REPORTING DATE : 02/Sep/2024 05:29PM

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

## CLINICAL CHEMISTRY/BIOCHEMISTRY

### LIVER FUNCTION TEST (COMPLETE)

|  |       |       |   |
|--|-------|-------|---|
| BILIRUBIN TOTAL: SERUM<br><i>by DIAZOTIZATION, SPECTROPHOTOMETRY</i>                           | 0.32  | mg/dL | INFANT: 0.20 - 8.00<br>ADULT: 0.00 - 1.20 |
| BILIRUBIN DIRECT (CONJUGATED): SERUM<br><i>by DIAZO MODIFIED, SPECTROPHOTOMETRY</i>            | 0.14  | mg/dL | 0.00 - 0.40                               |
| BILIRUBIN INDIRECT (UNCONJUGATED): SERUM<br><i>by CALCULATED, SPECTROPHOTOMETRY</i>            | 0.18  | mg/dL | 0.10 - 1.00                               |
| SGOT/AST: SERUM<br><i>by IFCC, WITHOUT PYRIDOXAL PHOSPHATE</i>                                 | 24.8  | U/L   | 7.00 - 45.00                              |
| SGPT/ALT: SERUM<br><i>by IFCC, WITHOUT PYRIDOXAL PHOSPHATE</i>                                 | 21.4  | U/L   | 0.00 - 49.00                              |
| AST/ALT RATIO: SERUM<br><i>by CALCULATED, SPECTROPHOTOMETRY</i>                                | 1.16  | RATIO | 0.00 - 46.00                              |
| ALKALINE PHOSPHATASE: SERUM<br><i>by PARA NITROPHENYL PHOSPHATASE BY AMINO METHYL PROPANOL</i> | 75.47 | U/L   | 40.0 - 130.0                              |
| GAMMA GLUTAMYL TRANSFERASE (GGT): SERUM<br><i>by SZASZ, SPECTROPHOTOMETRY</i>                  | 52.81 | U/L   | 0.00 - 55.0                               |
| TOTAL PROTEINS: SERUM<br><i>by BIURET, SPECTROPHOTOMETRY</i>                                   | 6.66  | gm/dL | 6.20 - 8.00                               |
| ALBUMIN: SERUM<br><i>by BROMOCRESOL GREEN</i>  | 3.76  | gm/dL | 3.50 - 5.50                               |
| GLOBULIN: SERUM<br><i>by CALCULATED, SPECTROPHOTOMETRY</i>                                     | 2.9   | gm/dL | 2.30 - 3.50                               |
| A : G RATIO: SERUM<br><i>by CALCULATED, SPECTROPHOTOMETRY</i>                                  | 1.3   | RATIO | 1.00 - 2.00                               |

#### INTERPRETATION

NOTE:- To be correlated in individuals having SGOT and SGPT values higher than Normal Reference Range.

USE:- Differential diagnosis of diseases of hepatobiliary system and pancreas.

#### INCREASED:

|                     |                         |
|---------------------|-------------------------|
| DRUG HEPATOTOXICITY | > 2                     |
| ALCOHOLIC HEPATITIS | > 2 (Highly Suggestive) |
| CIRRHOSIS           | 1.4 - 2.0               |



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

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



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

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

|                       |  |                          |                        |
|-----------------------|--|--------------------------|------------------------|
| <b>NAME</b>           | : Mr. DINESH                           | <b>PATIENT ID</b>        | : 1599568              |
| <b>AGE/ GENDER</b>    | : 49 YRS/MALE                          | <b>REG. NO./LAB NO.</b>  | : 012409020064         |
| <b>COLLECTED BY</b>   | :                                      | <b>REGISTRATION DATE</b> | : 02/Sep/2024 03:50 PM |
| <b>REFERRED BY</b>    | :                                      | <b>COLLECTION DATE</b>   | : 02/Sep/2024 03:56PM  |
| <b>BARCODE NO.</b>    | : 01516198                             | <b>REPORTING DATE</b>    | : 02/Sep/2024 05:29PM  |
| <b>CLIENT CODE.</b>   | : KOS DIAGNOSTIC LAB                   |                          |                        |
| <b>CLIENT ADDRESS</b> | : 6349/1, NICHOLSON ROAD, AMBALA CANTT |                          |                        |

| Test Name                                    | Value                      | Unit | Biological Reference interval |
|--|----------------------------|------|-------------------------------|
| INTRAHEPATIC CHOLESTATIS                     | > 1.5                      |      |                               |
| HEPATOCELLULAR CARCINOMA & CHRONIC HEPATITIS | > 1.3 (Slightly Increased) |      |                               |

**DECREASED:**

1. Acute Hepatitis due to virus, drugs, toxins (with AST increased 3 to 10 times upper limit of normal)
2. Extra Hepatic cholestasis: 0.8 (normal or slightly decreased).

**PROGNOSTIC SIGNIFICANCE:**

|                      |           |
|----------------------|-----------|
| NORMAL               | < 0.65    |
| GOOD PROGNOSTIC SIGN | 0.3 - 0.6 |
| POOR PROGNOSTIC SIGN | 1.2 - 1.6 |



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

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



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

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

|                       |  |                          |                        |
|-----------------------|--|--------------------------|------------------------|
| <b>NAME</b>           | : Mr. DINESH                           | <b>PATIENT ID</b>        | : 1599568              |
| <b>AGE/ GENDER</b>    | : 49 YRS/MALE                          | <b>REG. NO./LAB NO.</b>  | : 012409020064         |
| <b>COLLECTED BY</b>   | :                                      | <b>REGISTRATION DATE</b> | : 02/Sep/2024 03:50 PM |
| <b>REFERRED BY</b>    | :                                      | <b>COLLECTION DATE</b>   | : 02/Sep/2024 03:56PM  |
| <b>BARCODE NO.</b>    | : 01516198                             | <b>REPORTING DATE</b>    | : 02/Sep/2024 05:48PM  |
| <b>CLIENT CODE.</b>   | : KOS DIAGNOSTIC LAB                   |                          |                        |
| <b>CLIENT ADDRESS</b> | : 6349/1, NICHOLSON ROAD, AMBALA CANTT |                          |                        |

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

#### IMMUNOPATHOLOGY/SEROLOGY

##### DENGUE FEVER COMBO SCREENING - (NS1 ANTIGEN, IgG AND IgM)

|  |                |  |                |
|--|----------------|--|----------------|
| DENGUE NS1 ANTIGEN - SCREENING<br>by ICT (IMMUNOCHROMATOGRAPHY)  | NEGATIVE (-ve) |  | NEGATIVE (-ve) |
| DENGUE ANTIBODY IgG - SCREENING<br>by ICT (IMMUNOCHROMATOGRAPHY) | NEGATIVE (-ve) |  | NEGATIVE (-ve) |
| DENGUE ANTIBODY IgM - SCREENING<br>by ICT (IMMUNOCHROMATOGRAPHY) | NEGATIVE (-ve) |  | NEGATIVE (-ve) |

#### INTERPRETATION:-

- 1.This is a solid phase immunochromatographic ELISA test for the qualitative detection of the specific IgG and IgM antibodies against the Dengue virus.
- 2.The IgM antibodies take a minimum of 5-10 days in primary infection and 4-5 days in secondary infections to test positive and hence are suitable for the diagnosis of dengue fever only when the fever is approximately one week old.
- 3.The IgG antibodies develop at least two weeks after exposure to primary infection and subsequently remain positive for the rest of the life. A positive result is incapable of differentiating a current infection from a past infection.
- 4.The Dengue NS-1 antigen test is most suited for early diagnosis (within the first week of exposure).



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

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





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

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

|                       |  |                          |                        |
|-----------------------|--|--------------------------|------------------------|
| <b>NAME</b>           | : Mr. DINESH                           | <b>PATIENT ID</b>        | : 1599568              |
| <b>AGE/ GENDER</b>    | : 49 YRS/MALE                          | <b>REG. NO./LAB NO.</b>  | : 012409020064         |
| <b>COLLECTED BY</b>   | :                                      | <b>REGISTRATION DATE</b> | : 02/Sep/2024 03:50 PM |
| <b>REFERRED BY</b>    | :                                      | <b>COLLECTION DATE</b>   | : 02/Sep/2024 03:56PM  |
| <b>BARCODE NO.</b>    | : 01516198                             | <b>REPORTING DATE</b>    | : 02/Sep/2024 05:39PM  |
| <b>CLIENT CODE.</b>   | : KOS DIAGNOSTIC LAB                   |                          |                        |
| <b>CLIENT ADDRESS</b> | : 6349/1, NICHOLSON ROAD, AMBALA CANTT |                          |                        |

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

#### WIDAL SLIDE AGGLUTINATION TEST

|   |        |       |         |
|---|--------|-------|---------|
| SALMONELLA TYPHI O<br>by SLIDE AGGLUTINATION      | 1 : 40 | TITRE | 1 : 80  |
| SALMONELLA TYPHI H<br>by SLIDE AGGLUTINATION      | 1 : 40 | TITRE | 1 : 160 |
| SALMONELLA PARATYPHI AH<br>by SLIDE AGGLUTINATION | NIL    | TITRE | 1 : 160 |
| SALMONELLA PARATYPHI BH<br>by SLIDE AGGLUTINATION | NIL    | TITRE | 1 : 160 |

#### INTERPRETATION:

1. Titres of 1:80 or more for "O" agglutinin is considered significant.
2. Titres of 1:160 or more for "H" agglutinin is considered significant.

#### LIMITATIONS:

1. Agglutinins usually appear by 5th to 6th day of illness of enteric fever, hence a negative result in early stage is inconclusive. The titre then rises till 3rd or 4th week, after which it declines gradually.
2. Lower titres may be found in normal individuals.
3. A single positive result has less significance than the rising agglutination titre, since demonstration of rising titre four or more in 1st and 3rd week is considered as a definite evidence of infection.
4. A simultaneous rise in H agglutinins is suggestive of paratyphoid infection.

#### NOTE:

1. Individuals with prior infection or immunization with TAB vaccine may develop an ANAMNESTIC RESPONSE (False-Positive) during an unrelated fever i.e High titres of antibodies to various antigens. This may be differentiated by repetition of the test after a week.
2. The anamnestic response shows only a transient rise, while in enteric fever rise is sustained.
3. H agglutinins tend to persist for many months after vaccination but O agglutinins tend to disappear sooner i.e within 6 months. Therefore rise in O agglutinins indicate recent infection.

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



  
 DR. VINAY CHOPRA

CONSULTANT PATHOLOGIST  
 MBBS, MD (PATHOLOGY & MICROBIOLOGY)

  
 DR. YUGAM CHOPRA

CONSULTANT PATHOLOGIST  
 MBBS, MD (PATHOLOGY)

