

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

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

NAME : Mrs. TRIPTI
AGE/ GENDER : 40 YRS/FEMALE
COLLECTED BY : SURJESH
REFERRED BY :
BARCODE NO. : 01517022
CLIENT CODE. : KOS DIAGNOSTIC LAB
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1614157
REG. NO./LAB NO. : 012409150046
REGISTRATION DATE : 15/Sep/2024 04:13 PM
COLLECTION DATE : 15/Sep/2024 04:56PM
REPORTING DATE : 15/Sep/2024 05:09PM

Test Name	Value	Unit	Biological Reference interval
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HAEMATOLOGY

HAEMOGLOBIN (HB)

HAEMOGLOBIN (HB) by CALORIMETRIC	10.2 ^L	gm/dL	12.0 - 16.0
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INTERPRETATION:-

Hemoglobin is the protein molecule in red blood cells that carries oxygen from the lungs to the bodys tissues and returns carbon dioxide from the tissues back to the lungs.

A low hemoglobin level is referred to as ANEMIA or low red blood count.

ANEMIA (DECREASED HAEMOGLOBIN):

- 1) Loss of blood (traumatic injury, surgery, bleeding, colon cancer or stomach ulcer)
- 2) Nutritional deficiency (iron, vitamin B12, folate)
- 3) Bone marrow problems (replacement of bone marrow by cancer)
- 4) Suppression by red blood cell synthesis by chemotherapy drugs
- 5) Kidney failure
- 6) Abnormal hemoglobin structure (sickle cell anemia or thalassemia).

POLYCYTHEMIA (INCREASED HAEMOGLOBIN):

- 1) People in higher altitudes (Physiological)
- 2) Smoking (Secondary Polycythemia)
- 3) Dehydration produces a falsely rise in hemoglobin due to increased haemoconcentration
- 4) Advanced lung disease (for example, emphysema)
- 5) Certain tumors
- 6) A disorder of the bone marrow known as polycythemia rubra vera,
- 7) Abuse of the drug erythropoietin (Epogen) by athletes for blood doping purposes (increasing the amount of oxygen available to the body by chemically raising the production of red blood cells).

NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD



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BARCODE NO.	: 01517022	REPORTING DATE	: 30/Sep/2024 06:15PM
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HISTOPATHOLOGY

HISTOPATHOLOGY/BIOPSY SPECIMEN (MEDIUM)

TEST NAME:

HISTOPATHOLOGY/BIOPSY SPECIMEN

CLINICAL HISTORY (IF ANY):

Polyp in uterus

SPECIMEN INFORMATION/RECEIVED:

Polypectomy

GROSS EXAMINATION:

1. Received (in formalin) two pale brownish soft tissue fragments measuring 0.8x0.4x0.3 cm and 0.5x0.4x0.3 cm.
2. Entire tissue is submitted for processing in 1 cassette.

MICROSCOPIC EXAMINATION:

Section examined shows two polypoidal tissue fragments, One polyp is lined by columnar mucinous epithelium and presence of benign endocervical glands of variable size in the underlying fibrous stroma with presence of thick-walled blood vessels. Other polyp comprises of proliferative endometrial glands separated by fibrous stroma containing thick-walled blood vessels.




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There is no evidence of dysplasia or malignancy in section examined.

INTERPRETATION/RESULT:

A fragment of benign endocervical polyp and a fragment of benign endometrial polyp.

*** End Of Report ***




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