





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

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

NAME : Mrs. RESHMA

PATIENT ID AGE/ GENDER : 29 YRS/FEMALE : 1627249

COLLECTED BY : 012409270058 REG. NO./LAB NO.

REGISTRATION DATE REFERRED BY : 27/Sep/2024 03:41 PM BARCODE NO. :01517834 **COLLECTION DATE** : 27/Sep/2024 03:43PM CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 27/Sep/2024 04:26PM

CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

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)





(A Unit of KOS Healthcare)



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CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit **Biological Reference interval**

CLINICAL CHEMISTRY/BIOCHEMISTRY BILIRUBIN TOTAL

BILIRUBIN TOTAL: SERUM 0.45 mg/dL INFANT: 0.20 - 8.00

by DIAZOTIZATION, SPECTROPHOTOMETRY ADULT: 0.00 - 1.20



CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST









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

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

: 27/Sep/2024 04:32PM

NAME : Mrs. RESHMA

AGE/ GENDER : 29 YRS/FEMALE **PATIENT ID** : 1627249

COLLECTED BY :012409270058 REG. NO./LAB NO.

REFERRED BY **REGISTRATION DATE** : 27/Sep/2024 03:41 PM BARCODE NO. :01517834 **COLLECTION DATE** : 27/Sep/2024 03:43PM

: KOS DIAGNOSTIC LAB **CLIENT ADDRESS** : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit **Biological Reference interval**

IMMUNOPATHOLOGY/SEROLOGY

REPORTING DATE

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

DENGUE NS1 ANTIGEN - SCREENING NEGATIVE (-ve) NEGATIVE (-ve) by ICT (IMMUNOCHROMATOGRAPHY) NEGATIVE (-ve) DENGUE ANTIBODY IgG - SCREENING NEGATIVE (-ve) by ICT (IMMUNOCHROMATOGRAPHY)

DENGUE ANTIBODY IgM - SCREENING NEGATIVE (-ve) NEGATIVE (-ve) by ICT (IMMUNOCHROMATOGRAPHY)

INTERPRETATION:-

CLIENT CODE.

- 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).



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Chairman & Consultant Pathologist

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Test Name	Value	Unit	Biological Reference interval

WIDAL SLIDE AGGLUTINATION TEST

SALMONELLA TYPHI O	NIL	TITRE	1:80
by SLIDE AGGLUTINATION			
SALMONELLA TYPHI H	NIL	TITRE	1:160
by SLIDE AGGLUTINATION			
SALMONELLA PARATYPHI AH	NIL	TITRE	1:160
by SLIDE AGGLUTINATION			
SALMONELLA PARATYPHI BH	NIL	TITRE	1:160
by SLIDE AGGLUTINATION			

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 repitition 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 Oagglutinins indicate recent infection.

*** End Of Report ***



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