NAME	**: Mr. VARDAN**		
AGE/ GENDER	: 13 YRS/MALE	**PATIENT ID**	: 1634290
COLLECTED BY	:	**REG. NO./LAB NO.**	**: 012410040059**
REFERRED BY	: DR. VIVEK MALHOTRA	**REGISTRATION DATE**	: 04/Oct/2024 01:33 PM
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Test Name	Value	Unit	Biological Reference interval

HAEMATOLOGY
COMPLETE BLOOD COUNT (CBC)

RED BLOOD CELLS (RBCS) COUNT AND INDICES

Test Name	Value	Unit	Biological Reference interval
HAEMOGLOBIN (HB) *by CALORIMETRIC*	13.4	gm/dL	12.0 - 16.0
RED BLOOD CELL (RBC) COUNT *by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE*	5.31	Millions/cmm	3.50 - 5.50
PACKED CELL VOLUME (PCV) *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	41.9	%	35.0 - 49.0
MEAN CORPUSCULAR VOLUME (MCV) *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	**78.8^L**	**fL**	**80.0 - 100.0**
MEAN CORPUSCULAR HAEMOGLOBIN (MCH) *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	**25.2^L**	**pg**	**27.0 - 34.0**
MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC) *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	32	g/dL	32.0 - 36.0
RED CELL DISTRIBUTION WIDTH (RDW-CV) *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	14.2	%	11.00 - 16.00
RED CELL DISTRIBUTION WIDTH (RDW-SD) *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	41.8	fL	35.0 - 56.0
MENTZERS INDEX *by CALCULATED*	14.84	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0
GREEN & KING INDEX *by CALCULATED*	21.04	RATIO	BETA THALASSEMIA TRAIT:<= 65.0 IRON DEFICIENCY ANEMIA: > 65.0

WHITE BLOOD CELLS (WBCS)

Test Name	Value	Unit	Biological Reference interval
TOTAL LEUCOCYTE COUNT (TLC) *by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY*	7340	/cmm	4000 - 11000
NUCLEATED RED BLOOD CELLS (nRBCS) *by AUTOMATED 6 PART HEMATOLOGY ANALYZER*	NIL		0.00 - 20.00
NUCLEATED RED BLOOD CELLS (nRBCS) % *by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER*	NIL	%	< 10 %

DIFFERENTIAL LEUCOCYTE COUNT (DLC)

Test Name	Value	Unit	Biological Reference interval
NEUTROPHILS *by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY*	**77^H**	**%**	**50 - 70**

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KOS Diagnostic Lab
(A Unit of KOS Healthcare)

ISO 9001 : 2008 CERTIFIED LAB

EXCELLENCE IN HEALTHCARE & DIAGNOSTICS

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Test Name	Value	Unit	Biological Reference interval
LYMPHOCYTES	**13^L**	**%**	**20 - 40**
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
EOSINOPHILS	1^L	%	1 - 6
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
MONOCYTES	9	%	2 - 12
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
BASOPHILS	0	%	0 - 1
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE LEUKOCYTES (WBC) COUNT			
ABSOLUTE NEUTROPHIL COUNT	5652	/cmm	2000 - 7500
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE LYMPHOCYTE COUNT	954	/cmm	800 - 4900
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE EOSINOPHIL COUNT	73	/cmm	40 - 440
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE MONOCYTE COUNT	661	/cmm	80 - 880
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE BASOPHIL COUNT	0	/cmm	0 - 110
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
PLATELETS AND OTHER PLATELET PREDICTIVE MARKERS.			
PLATELET COUNT (PLT)	279000	/cmm	150000 - 450000
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			
PLATELETCRIT (PCT)	0.3	%	0.10 - 0.36
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			
MEAN PLATELET VOLUME (MPV)	11	fL	6.50 - 12.0
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			
PLATELET LARGE CELL COUNT (P-LCC)	**93000^H**	**/cmm**	**30000 - 90000**
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			
PLATELET LARGE CELL RATIO (P-LCR)	33.2	%	11.0 - 45.0
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			
PLATELET DISTRIBUTION WIDTH (PDW)	16.3	%	15.0 - 17.0
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			

NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD

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Test Name	Value	Unit	Biological Reference interval

IMMUNOPATHOLOGY/SEROLOGY

DENGUE FEVER ANTIBODY IgG - ELISA (QUANTITATIVE)

DENGUE ANTIBODY IgG - QUANTITATIVE	0.19	ABSORBANCE	< 0.30
by ELISA (ENZYME LINKED IMMUNOSORBENT ASSAY)			

INTERPRETATION:

DENGUE IgM ELISA	
VALUE	**RESULT**
NEGATIVE	Less than 0.30 OD (Absorbance)
EQUIVOCAL	0.30 to 0.50 OD (Absorbance)
POSITIVE	More than 0.50 OD (Absorbance)
STRONGLY POSITIVE	More than 1.00 OD (Absorbance)

1. Treatment is often indicated prior to completion of serologic diagnosis, which requires at least two weeks.
2. Although dengue fever is usually not treated with antibiotics.
3. Diagnosis of dengue infection should not be made based on results of the IVD micro well Elisa dengue fever test alone, but in conjunction with other clinical signs and symptoms and other laboratory findings.
4. Epidemiologic factors, clinical findings, exposure to endemic regions, and other laboratory results should be considered when making a diagnosis.

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Test Name	Value	Unit	Biological Reference interval

DENGUE FEVER ANTIBODY IgM - ELISA (QUANTITATIVE)

DENGUE ANTIBODY IgM - QUANTITATIVE	0.16	ABSORBANCE	< 0.30

by ELISA (ENZYME LINKED IMMUNOSORBENT ASSAY)

INTERPRETATION:

DENGUE IgM ELISA	
VALUE	**RESULT**
NEGATIVE	Less than 0.30 OD (Absorbance)
EQUIVOCAL	0.30 to 0.50 OD (Absorbance)
POSITIVE	More than 0.50 OD (Absorbance)
STRONGLY POSITIVE	More than 1.00 OD (Absorbance)

1. Treatment is often indicated prior to completion of serologic diagnosis, which requires at least two weeks.
2. Although dengue fever is usually not treated with antibiotics.
3. Diagnosis of dengue infection should not be made based on results of the IVD micro well Elisa dengue fever test alone, but in conjunction with other clinical signs and symptoms and other laboratory findings.
4. Epidemiologic factors, clinical findings, exposure to endemic regions, and other laboratory results should be considered when making a diagnosis.

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Test Name	Value	Unit	Biological Reference interval

DENGUE FEVER ANTIGEN NS1 - ELISA (QUANTITATIVE)

Test Name	Value	Unit	Biological Reference interval
DENGUE NS1 ANTIGEN QUANTITATIVE *by ELISA (ENZYME LINKED IMMUNOSORBENT ASSAY)*	0.14	INDEX	NEGATIVE: < 0.90 BORDERLINE: 0.90 - 1.10 POSITIVE: >=1.10
DENGUE NS1 ANTIGEN RESULT *by ELISA (ENZYME LINKED IMMUNOSORBENT ASSAY)*	NEGATIVE (-ve)		NEGATIVE (-ve)

INTERPRETATION

DENGUE ANTIGEN NS1		
VALUE	UNIT	RESULT
< 0.90	INDEX	NEGATIVE (-ve)
0.90 - 1.10	INDEX	BORDERLINE
>=1.10	INDEX	POSITIVE (+ve)

1.The test becomes positive within 0-9 days of exposure to the virus (positive results are obtained within 24 hours of exposure in the overwhelming majority of patients) and generally remains positive till 15 days after exposure. The Dengue NS-1 antigen test is extremely useful in the early diagnosis of the disease thus helping in proper follow up and monitoring of the patients.
2.The IgM antibodies on the other hand 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.

*** End Of Report ***

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