

KOS Diagnostic Lab (A Unit of KOS Healthcare)



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

Dr. Yugam Chopra

MD (Pathology)

CEO & Consultant Pathologist

NAME : Mr. RAM KARAN

AGE/ GENDER : 51 YRS/MALE PATIENT ID : 1650899

COLLECTED BY : REG. NO./LAB NO. : 012410220055

 REFERRED BY
 : 22/Oct/2024 09:35 PM

 BARCODE NO.
 : 01519381
 COLLECTION DATE
 : 22/Oct/2024 09:39 PM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 23/Oct/2024 01:17 PM

CLIENT ADDRESS : 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
by ICT (IMMUNOCHROMATOGRAPHY)
 POSITIVE (+ve)
 NEGATIVE (-ve)

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

 DENGUE ANTIBODY IgM - SCREENING
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).

NOTE--ADV. ELISA METHOD FOR FURTHER CONFIRMATION & BE REF. TO CIVIL HOSPITAL



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

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TITRE

1:160

NAME : Mr. RAM KARAN

AGE/ GENDER : 51 YRS/MALE **PATIENT ID** : 1650899

COLLECTED BY REG. NO./LAB NO. :012410220055

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NIL

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

Test Name	Value	Unit	Biological Reference interval
WIDAL SLIDE AGGLUTINATION TEST			
SALMONELLA TYPHI O by SLIDE AGGLUTINATION	1:40	TITRE	1:80
SALMONELLA TYPHI H by SLIDE AGGLUTINATION	1:20	TITRE	1:160
SALMONELLA PARATYPHI AH	NIL	TITRE	1:160

INTERPRETATION:

by SLIDE AGGLUTINATION SALMONELLA PARATYPHI BH

by SLIDE AGGLUTINATION

- 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.

- 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.

- 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.



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Test Name Value Unit **Biological Reference interval**

End Of Report



CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

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