

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.



| Dr. Vinay Chop MD (Pathology & Mi Chairman & Consult | crobiology) | | (Pathology) |
|--|---------------------------|--|--|
| NAME: Mrs. PARMEETAGE/ GENDER: 29 YRS/FEMALECOLLECTED BY:REFERRED BY:BARCODE NO.: 01519811CLIENT CODE.: KOS DIAGNOSTIC LABCLIENT ADDRESS: 6349/1, NICHOLSON ROAD, AM | BALA CANTI | PATIENT ID REG. NO./LAB NO. REGISTRATION DATE COLLECTION DATE REPORTING DATE | : 1657122 : 012410300027 : 30/Oct/2024 11:15 AM : 30/Oct/2024 11:20AM : 30/Oct/2024 11:40AM |
| Test Name | Value | Unit | Biological Reference interval |
| COM RED BLOOD CELLS (RBCS) COUNT AND INDICES | | ATOLOGY OOD COUNT (CBC) | |
| HAEMOGLOBIN (HB) | 10.3 ^L | gm/dL | 12.0 - 16.0 |
| by CALORIMETRIC RED BLOOD CELL (RBC) COUNT | 3.26 ^L | Millions/ | cmm 3.50 - 5.00 |
| by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE PACKED CELL VOLUME (PCV) | 33.7 ^L | % | 37.0 - 50.0 |
| by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MEAN CORPUSCULAR VOLUME (MCV) | 103.4 ^H | fL | 80.0 - 100.0 |
| by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MEAN CORPUSCULAR HAEMOGLOBIN (MCH) | 31.7 | pg | 27.0 - 34.0 |
| by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC |) 30.6^L | g/dL | 32.0 - 36.0 |
| by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER RED CELL DISTRIBUTION WIDTH (RDW-CV) | 16.7 ^H | % | 11.00 - 16.00 |
| by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER RED CELL DISTRIBUTION WIDTH (RDW-SD) | 65.3 ^H | fL | 35.0 - 56.0 |
| by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MENTZERS INDEX by CALCULATED | 31.72 | RATIO | BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0 |
| GREEN & KING INDEX by Calculated | 53.14 | RATIO | BETA THALASSEMIA TRAIT:<= 65.0 IRON DEFICIENCY ANEMIA: > 65.0 |
| <u>WHITE BLOOD CELLS (WBCS)</u> FOTAL LEUCOCYTE COUNT (TLC) | 3280 ^L | /cmm | 4000 - 11000 |
| by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY NUCLEATED RED BLOOD CELLS (nRBCS) by AUTOMATED 6 PART HEMATOLOGY ANALYZER | NIL | | 0.00 - 20.00 |
| DY AGTOWATED OF ANT TIEWATOEOGT AWALTZER | NIL | % | < 10 % |



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

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

KOS Central Lab: 6349/1, Nicholson Road, Ambala Cantt -133 001, Haryana KOS Molecular Lab: IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt -133 001, Haryana 0171-2643898, +91 99910 43898 | care@koshealthcare.com | www.koshealthcare.com







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

| NAME | : Mrs. PARMEET | | |
|--------------------|---------------------------------------|--------------------------|------------------------|
| AGE/ GENDER | : 29 YRS/FEMALE | PATIENT ID | : 1657122 |
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| CLIENT ADDRESS | : 6349/1, NICHOLSON ROAD, AMBALA CANT | Г | |
| | | | |

Dr. Vinay Chopra

| Test Name | Value | Unit | Biological Reference interval |
|--|----------|------|--------------------------------------|
| DIFFERENTIAL LEUCOCYTE COUNT (DLC) | | | |
| NEUTROPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 63 | % | 50 - 70 |
| LYMPHOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 26 | % | 20 - 40 |
| EOSINOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 4 | % | 1 - 6 |
| MONOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 7 | % | 2 - 12 |
| BASOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 0 | % | 0 - 1 |
| ABSOLUTE LEUKOCYTES (WBC) COUNT | | | |
| ABSOLUTE NEUTROPHIL COUNT by flow cytometry by sf cube & microscopy | 2066 | /cmm | 2000 - 7500 |
| ABSOLUTE LYMPHOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 853 | /cmm | 800 - 4900 |
| ABSOLUTE EOSINOPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 131 | /cmm | 40 - 440 |
| ABSOLUTE MONOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY | 230 | /cmm | 80 - 880 |
| PLATELETS AND OTHER PLATELET PREDICTIVE | MARKERS. | | |
| PLATELET COUNT (PLT) by hydro dynamic focusing, electrical impedence | 214000 | /cmm | 150000 - 450000 |
| PLATELETCRIT (PCT) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE | 0.19 | % | 0.10 - 0.36 |
| MEAN PLATELET VOLUME (MPV) by hydro dynamic focusing, electrical impedence | 9 | fL | 6.50 - 12.0 |
| PLATELET LARGE CELL COUNT (P-LCC) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE | 39000 | /cmm | 30000 - 90000 |
| PLATELET LARGE CELL RATIO (P-LCR) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE | 18 | % | 11.0 - 45.0 |
| PLATELET DISTRIBUTION WIDTH (PDW) by hydro dynamic focusing, electrical impedence NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD | 16.6 | % | 15.0 - 17.0 |



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| CLIENT ADDRESS | : 6349/1, NICHOLSON ROAD, AM | BALA CANTT | | |
| Test Name | | Value | Unit | Biological Reference interval |
| | LIVER | FUNCTION | FRY/BIOCHEMIST TEST (COMPLETE) | |
| BILIRUBIN TOTAL: S | | 0.55 | mg/dL | INFANT: 0.20 - 8.00 |
| by DIAZOTIZATION, SPE | | | | ADULT: 0.00 - 1.20 |
| BILIRUBIN DIRECT (| (CONJUGATED): SERUM | 0.11 | mg/dL | 0.00 - 0.40 |
| - | T (UNCONJUGATED): SERUM | 0.44 | mg/dL | 0.10 - 1.00 |
| SGOT/AST: SERUM by IFCC, WITHOUT PYRI | IDOXAL PHOSPHATE | 21.75 | U/L | 7.00 - 45.00 |
| SGPT/ALT: SERUM by IFCC, WITHOUT PYR | IDOXAL PHOSPHATE | 17.84 | U/L | 0.00 - 49.00 |
| AST/ALT RATIO: SEI by CALCULATED, SPEC | | 1.22 | RATIO | 0.00 - 46.00 |
| ALKALINE PHOSPHA by PARA NITROPHENYL PROPANOL | ATASE: SERUM . PHOSPHATASE BY AMINO METHYL | 86.54 | U/L | 40.0 - 130.0 |
| | TRANSFERASE (GGT): SERUM | 26.35 | U/L | 0.00 - 55.0 |
| TOTAL PROTEINS: S | ERUM | 5.82 ^L | gm/dL | 6.20 - 8.00 |
| ALBUMIN: SERUM | | 4.2 | gm/dL | 3.50 - 5.50 |
| GLOBULIN: SERUM by CALCULATED, SPEC | TROPHOTOMETRY | 1.62 ^L | gm/dL | 2.30 - 3.50 |
| A : G RATIO: SERUM by CALCULATED, SPEC INTERPRETATION | | 2.59 ^H | RATIO | 1.00 - 2.00 |

INTERPRETATION

NOTE:- To be correlated in individuals having SGOT and SGPT values higher than Normal Referance 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 |
| INTRAHEPATIC CHOLESTATIS | > 1.5 |
| | |





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| Test Name | | Value Unit | Biological Reference interval |
| HEPATOCELLULAR C | ARCINOMA & CHRONIC HEPATITIS | > 1.3 (Slightly In | creased) |

| HEPATOCELLULAR CARCINOMA & CHRONIC HEPATITIS | 1.3 (Slightly Increased) |
|--|----------------------------|
| | > 1.5 (Slightly increased) |
| DECREASED: | |
| DEGREAJED. | |

1. Acute Hepatitis due to virus, drugs, toxins (with AST increased 3 to 10 times upper limit of normal)

2. Extra Hepatic cholestatis: 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 |



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| UREA: SERUM 11.33 mg/dL 10.00 - 50.00 | Fest Name | | Value | Unit | Biological Reference interv |
| | | | UREA | | |
| by OREASE - GEOTAWATE DETTUDROGENASE (GEDT) | | MATE DEHYDROGENASE (GLDH) | 11.33 | mg/dL | 10.00 - 50.00 |





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| Test Name | | Value | Unit | Biological Reference interval |
| | | CREATIN | INE | |
| CREATININE: SERI | | 0.94 | mg/dL | 0.40 - 1.20 |
| by ENZ TMATIC, SPEC | TROPHOTOMETRY | | | |
| | | | | |
| | | | | |
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| CLIENT ADDRESS | : 6349/1, NICHOLSO | N ROAD, AMBALA CANTT | | |
| Test Name | | Value | Unit | Biological Reference interval |
| | | FI FCTROI VTFS | COMPLETE PROFILE | |
| SODIUM: SERUM | | 135.8 | mmol/L | 135.0 - 150.0 |
| by ISE (ION SELECTIV POTASSIUM: SERU | M | 3.82 | mmol/L | 3.50 - 5.00 |
| by ISE (ION SELECTIV CHLORIDE: SERUM by ISE (ION SELECTIV | [| 101.85 | mmol/L | 90.0 - 110.0 |
| INTERPRETATION:- | E ELECTRODE) | | | |
| | diarrhea & vomiting w | th adequate water and ia | dequate salt replacement. | |
| Diuretics abuses. Salt loosing nephr Metabolic acidosis Adrenocortical iss Hepatic failure. HYPERNATREMIA (ING) Diabetes insipidus Diabetic acidosis Cushings syndrome Dehydration | s. uficiency . C REASED SODIUM LEVEL nged) |) CAUSES:- | | |





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4.Hemolysis of blood

*** End Of Report ***



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