

(A Unit of KOS Healthcare)



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

NAME : Master. RIYAANSH GUPTA

AGE/ GENDER : 15 MONTH(S)/MALE PATIENT ID : 1665202

COLLECTED BY : SURJESH REG. NO./LAB NO. : 012411080039

REFERRED BY : CENTRAL PHOENIX CLUB (AMBALA CANTT) **REGISTRATION DATE** : 08/Nov/2024 11:24 AM **BARCODE NO.** : 01520369 **COLLECTION DATE** : 08/Nov/2024 11:33AM

CLIENT CODE. : KOS DIAGNOSTIC LAB REPORTING DATE : 08/Nov/2024 11:42AM

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

Test Name Value Unit Biological Reference interval

HAEMATOLOGY COMPLETE BLOOD COUNT (CBC)

RED BLOOD CELLS (RBCS) COUNT AND INDICES

HAEMOGLOBIN (HB)	10.3 ^L	gm/dL	12.0 - 16.0
by CALORIMETRIC			
RED BLOOD CELL (RBC) COUNT by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	4.52	Millions/cmm	3.50 - 5.50
PACKED CELL VOLUME (PCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	32.7^{L}	%	35.0 - 49.0
MEAN CORPUSCULAR VOLUME (MCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	72.3 ^L	fL	80.0 - 100.0
MEAN CORPUSCULAR HAEMOGLOBIN (MCH) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	22.8 ^L	pg	27.0 - 34.0
MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	31.6 ^L	g/dL	32.0 - 36.0
RED CELL DISTRIBUTION WIDTH (RDW-CV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	15.4	%	11.00 - 16.00
RED CELL DISTRIBUTION WIDTH (RDW-SD) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	41.6	fL	35.0 - 56.0
MENTZERS INDEX by CALCULATED	16	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0
GREEN & KING INDEX by CALCULATED	24.65	RATIO	BETA THALASSEMIA TRAIT:<= 65.0 IRON DEFICIENCY ANEMIA: > 65.0
WHITE BLOOD CELLS (WBCS)			
TOTAL LEUCOCYTE COUNT (TLC) by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	7280	/cmm	5000 - 15000
NUCLEATED RED BLOOD CELLS (nRBCS) by automated 6 part hematology analyzer	NIL		0.00 - 20.00
NUCLEATED RED BLOOD CELLS (nRBCS) %	NIL	%	< 10 %



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by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER



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Test Name	Value	Unit	Biological Reference interval			
DIFFERENTIAL LEUCOCYTE COUNT (DLC)						
NEUTROPHILS by Flow cytometry by SF cube & microscopy	28 ^L	%	50 - 70			
LYMPHOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	56 ^H	%	20 - 45			
EOSINOPHILS by Flow cytometry by SF cube & microscopy	4	%	1 - 6			
MONOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	12	%	3 - 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	2038	/cmm	2000 - 7500			
ABSOLUTE LYMPHOCYTE COUNT by Flow cytometry by Sf cube & microscopy	4077	/cmm	800 - 4900			
ABSOLUTE EOSINOPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	291	/cmm	40 - 440			
ABSOLUTE MONOCYTE COUNT by Flow cytometry by SF cube & microscopy	874	/cmm	80 - 880			
ABSOLUTE BASOPHIL COUNT by Flow cytometry by SF cube & microscopy	0	/cmm	0 - 110			
ABSOLUTE IMMATURE GRANULOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	0	/cmm	0.0 - 999.0			
PLATELETS AND OTHER PLATELET PREDICTIVE	MARKERS.					
PLATELET COUNT (PLT) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	285000	/cmm	150000 - 450000			
PLATELETCRIT (PCT) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	0.31	%	0.10 - 0.36			
MEAN PLATELET VOLUME (MPV) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	11	fL	6.50 - 12.0			
PLATELET LARGE CELL COUNT (P-LCC) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	97000 ^H	/cmm	30000 - 90000			
PLATELET LARGE CELL RATIO (P-LCR) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	34.2	%	11.0 - 45.0			
PLATELET DISTRIBUTION WIDTH (PDW) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	15.8	%	15.0 - 17.0			



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Test Name Value Unit Biological Reference interval

NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD



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COLLECTED BY : SURJESH :012411080039 REG. NO./LAB NO.

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Value Unit **Biological Reference interval Test Name**

CLINICAL CHEMISTRY/BIOCHEMISTRY

IRON PROFILE

IRON: SERUM by FERROZINE, SPECTROPHOTOMETRY	21.5 ^L	μg/dL	59.0 - 158.0
UNSATURATED IRON BINDING CAPACITY (UIBC) :SERUM	301.75	μg/dL	150.0 - 336.0
by FERROZINE, SPECTROPHOTOMETERY			
TOTAL IRON BINDING CAPACITY (TIBC)	323.25	μg/dL	230 - 430
SERUM by SPECTROPHOTOMETERY			
%TRANSFERRIN SATURATION: SERUM by CALCULATED, SPECTROPHOTOMETERY (FERENE)	6.65 ^L	%	15.0 - 50.0
TRANSFERRIN: SERUM by SPECTROPHOTOMETERY (FERENE)	229.51	mg/dL	200.0 - 350.0

INTERPRETATION:-

VARIABLES	ANEMIA OF CHRONIC DISEASE	IRON DEFICIENCY ANEMIA	THALASSEMIA α/β TRAIT	
SERUM IRON:	Normal to Reduced	Reduced	Normal	
TOTAL IRON BINDING CAPACITY:	Decreased	Increased	Normal	
% TRANSFERRIN SATURATION:	Decreased	Decreased < 12-15 %	Normal	
SERUM FERRITIN:	Normal to Increased	Decreased	Normal or Increased	

IRON:

1. Serum iron studies is recommended for differential diagnosis of microcytic hypochromic anemia.i.e iron deficiency anemia, zinc deficiency anemia, anemia of chronic disease and thalassemia syndromes.

2. It is essential to isolate iron deficiency anemia from Beta thalassemia syndromes because during iron replacement which is therapeutic for iron deficiency anemia, is severely contra-indicated in Thalassemia. TOTAL IRON BINDING CAPACITY (TIBC):

1.It is a direct measure of protein transferrin which transports iron from the gut to storage sites in the bone marrow.

% TRANSFERRIN SATURATION:

1.Occurs in idiopathic hemochromatosis and transfusional hemosiderosis where no unsaturated iron binding capacity is available for iron mobilization. Similar condition is seen in congenital deficiency of transferrin.



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CLINICAL PATHOLOGY STOOL ROUTINE AND MICROSCOPIC EXAMINATION

PHYSICAL EXAMINATION

COLOUR / APPEARANCE YELLOWISH GREEN YELLOWISH BROWN
CONSISTENCY SEMI-FORMED SEMI-FORMED/FORMED

PUS ABSENT ABSENT MUCOUS ABSENT ABSENT

BLOOD NEGATIVE (-ve) NEGATIVE (-ve)
PARASITES NOT SEEN NOT SEEN

ICDOCCODIC EVAMINATION

MICROSCOPIC EXAMINATION

PUS CELLS NEGATIVE (-ve) /HPF 0 - 5 by MICROSCOPY

RED BLOOD CELLS (RBCs) NEGATIVE (-ve) /HPF 0 - 3

by MICROSCOPY

OVA NOT SEEN NOT SEEN NOT SEEN

CYSTS NOT SEEN NOT SEEN

STOOL FOR VIBRIO CHOLERA NO DARTING MOTILITY SEEN

by MICROSCOPY
STOOL FOR FAT GLOBULES NOT SEEN NOT SEEN

by MICROSCOPY

by MICROSCOPY



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STOOL FOR OCCULT BLOOD

OCCULT BLOOD WEAKLY POSITIVE (+ve) NEGATIVE (-ve) by IMMUNOCHROMATOGRAPHY

*** End Of Report ***



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