

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

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

<b>NAME</b>	: Master. MEHUL	<b>PATIENT ID</b>	: 1685909
<b>AGE/ GENDER</b>	: 09 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012411290050
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 29/Nov/2024 03:01 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 29/Nov/2024 03:02PM
<b>BARCODE NO.</b>	: 01521693	<b>REPORTING DATE</b>	: 29/Nov/2024 03:10PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
<b>CLIENT ADDRESS</b>	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
-----------	-------	------	-------------------------------

## HAEMATOLOGY

### HAEMOGLOBIN (HB)

HAEMOGLOBIN (HB) by CALORIMETRIC	11.6 <sup>L</sup>	gm/dL	12.0 - 16.0
-------------------------------------	-------------------	-------	-------------

#### INTERPRETATION:-

Hemoglobin is the protein molecule in red blood cells that carries oxygen from the lungs to the bodys tissues and returns carbon dioxide from the tissues back to the lungs.

A low hemoglobin level is referred to as ANEMIA or low red blood count.

#### ANEMIA ( DECREASED HAEMOGLOBIN):

- 1) Loss of blood (traumatic injury, surgery, bleeding, colon cancer or stomach ulcer)
- 2) Nutritional deficiency (iron, vitamin B12, folate)
- 3) Bone marrow problems (replacement of bone marrow by cancer)
- 4) Suppression by red blood cell synthesis by chemotherapy drugs
- 5) Kidney failure
- 6) Abnormal hemoglobin structure (sickle cell anemia or thalassemia).

#### POLYCYTHEMIA (INCREASED HAEMOGLOBIN):

- 1) People in higher altitudes (Physiological)
- 2) Smoking (Secondary Polycythemia)
- 3) Dehydration produces a falsely rise in hemoglobin due to increased haemoconcentration
- 4) Advanced lung disease (for example, emphysema)
- 5) Certain tumors
- 6) A disorder of the bone marrow known as polycythemia rubra vera,
- 7) Abuse of the drug erythropoetin (Epogen) by athletes for blood doping purposes (increasing the amount of oxygen available to the body by chemically raising the production of red blood cells).

**NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD**





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



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



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

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

<b>NAME</b>	: Master. MEHUL	<b>PATIENT ID</b>	: 1685909
<b>AGE/ GENDER</b>	: 09 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012411290050
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 29/Nov/2024 02:53 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 29/Nov/2024 03:02PM
<b>BARCODE NO.</b>	: 01521693	<b>REPORTING DATE</b>	: 29/Nov/2024 03:10PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
<b>CLIENT ADDRESS</b>	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
-----------	-------	------	-------------------------------

### BLOOD GROUP (ABO) AND RH FACTOR TYPING

ABO GROUP  
 by SLIDE AGGLUTINATION  
 RH FACTOR TYPE  
 by SLIDE AGGLUTINATION


AB

POSITIVE

\*\*\* End Of Report \*\*\*



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

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

