

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

NAME : Mrs. ALKA  
AGE/ GENDER : 54 YRS/FEMALE  
COLLECTED BY :  
REFERRED BY :  
BARCODE NO. : 01521927  
CLIENT CODE. : KOS DIAGNOSTIC LAB  
CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

PATIENT ID : 1690078  
REG. NO./LAB NO. : 012412030056  
REGISTRATION DATE : 03/Dec/2024 07:37 PM  
COLLECTION DATE : 03/Dec/2024 07:38PM  
REPORTING DATE : 03/Dec/2024 08:34PM

Test Name	Value	Unit	Biological Reference interval
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HAEMATOLOGY  
HAEMOGLOBIN (HB)

HAEMOGLOBIN (HB) 9.3<sup>L</sup> gm/dL 12.0 - 16.0  
by CALORIMETRIC

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 erythropoietin (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

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



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