

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

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

<b>NAME</b>	: Mr. RAMESH CHAND	<b>PATIENT ID</b>	: 1738364
<b>AGE/ GENDER</b>	: 55 YRS/MALE	<b>REG. NO./LAB NO.</b>	: 012501280046
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 28/Jan/2025 06:45 PM
<b>REFERRED BY</b>	: CIVIL HOSPITAL (AMBALA CANTT)	<b>COLLECTION DATE</b>	: 28/Jan/2025 06:47PM
<b>BARCODE NO.</b>	: 01524578	<b>REPORTING DATE</b>	: 28/Jan/2025 08:47PM
<b>CLIENT CODE.</b>	: KOS DIAGNOSTIC LAB		
<b>CLIENT ADDRESS</b>	: 6349/1, NICHOLSON ROAD, AMBALA CANTT		

Test Name	Value	Unit	Biological Reference interval
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### IMMUNOPATHOLOGY/SEROLOGY

#### HEPATITIS C VIRUS (HCV) ANTIBODY: TOTAL

HEPATITIS C ANTIBODY (HCV) TOTAL: SERUM **20.87<sup>H</sup>** S/CO **NEGATIVE: < 1.00**  
 by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY) **POSITIVE: > 1.00**

**HEPATITIS C ANTIBODY (HCV) TOTAL** **REACTIVE**

**RESULT**  
 by CMIA (CHEMILUMINESCENT MICROPARTICLE IMMUNOASSAY)

#### INTERPRETATION:-

RESULT (INDEX)	REMARKS
< 1.00	NON - REACTIVE/NOT - DETECTED
> =1.00	REACTIVE/ASYMPTOMATIC/INFECTIVE STATE/CARRIER STATE.

Hepatitis C (HCV) is an RNA virus of Favivirus group transmitted via blood transfusions, transplantation, injection drug abusers, accidental needle punctures in healthcare workers, dialysis patients and rarely from mother to infant. 10 % of new cases show sexual transmission. As compared to HAV & HBV , chronic infection with HCV occurs in 85 % of infected individuals. In high risk population, the predictive value of Anti HCV for HCV infection is > 99% whereas in low risk populations it is only 25 %.

#### USES:

- Indicator of past or present infection, but does not differentiate between Acute/ Chronic/Resolved Infection.
- Routine screening of low and high prevalence population including blood donors.

#### NOTE:

- False positive results are seen in Auto-immune disease, Rheumatoid Factor, HYpergammaglobulinemia, Paraproteinemia, Passive antibody transfer, Anti-idiotypes and Anti-superoxide dismutase.
- False negative results are seen in early Acute infection, Immunosuppression and Immuno—incompetence.
- HCV-RNA PCR recommended in all reactive results to differentiate between past and present infection.

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





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



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 MBBS, MD (PATHOLOGY)

