



		Chopra gy & Microbiology) Consultant Pathologist	Dr. Yugam Chopra MD (Pathology) CEO & Consultant Pathologist	
NAME	: Mrs. POOJA			
AGE/ GENDER	: 22 YRS/FEMALE	PA	TIENT ID	: 1767907
COLLECTED BY	:	RE	G. NO./LAB NO.	: 012502240037
REFERRED BY	: LOOMBA HOSPITAL (AM	IBALA CANTT) RE	GISTRATION DATE	: 24/Feb/2025 11:33 AM
BARCODE NO.	:01526080	CO	LLECTION DATE	: 24/Feb/2025 11:34AM
CLIENT CODE.	: KOS DIAGNOSTIC LAB	RE	PORTING DATE	: 24/Feb/2025 11:50AM
CLIENT ADDRESS	: 6349/1, NICHOLSON RO	AD, AMBALA CANTT		
Test Name		Value	Unit	Biological Reference interval
<u>NTERPRETATION:-</u> lemoglobin is the pr issues back to the lu		cells that carries oxygen f	from the lungs to the bo	odys tissues and returns carbon dioxide from th
A low hemoglobin lev	el is referred to as ANEMIA	or low red blood count.		
ANEMIA (DECRESED 1) Loss of blood (trai	HAEMOGLOBIN): umatic injury, surgery, bleed	ing, colon cancer or stom	ach ulcer)	
Nutritional deficie	ncy (iron, vitamin B12, folat plems (replacement of bone r	e)		
b) bone manow prou	d blood cell synthesis by che	motherapy drugs		
 Suppression by re 				
5) Kidney failure		emia or thalassemia).		
5) Kidney failure 5) Abnormal hemogl POLYCYTHEMIA (INCI	obin structure (sickle cell an REASED HAEMOGLOBIN):	emia or thalassemia).		
5) Kidney failure 5) Abnormal hemogl P OLYCYTHEMIA (INCI 1) People in higher a 2) Smoking (Seconda	obin structure (sickle cell an REASED HAEMOGLOBIN): Ititudes (Physiological) ry Polycythemia)			
5) Kidney failure 5) Abnormal hemogl P OLYCYTHEMIA (INCI 1) People in higher a 2) Smoking (Seconda 3) Dehydration prod	obin structure (sickle cell an REASED HAEMOGLOBIN): Ititudes (Physiological) ry Polycythemia) uces a falsely rise in hemoglo	bbin due to increased hae	moconcentration	
5) Kidney failure 6) Abnormal hemogl POLYCYTHEMIA (INCI 1) People in higher a 2) Smoking (Seconda 3) Dehydration prod 4) Advanced lung dis 5) Certain tumors	obin structure (sickle cell an REASED HAEMOGLOBIN): Ititudes (Physiological) ry Polycythemia) uces a falsely rise in hemoglo ease (for example, emphyser	obin due to increased hae na)	emoconcentration	
 5) Kidney failure 5) Abnormal hemogl POLYCYTHEMIA (INCI People in higher a 2) Smoking (Seconda 3) Dehydration prod 4) Advanced lung dis 5) Certain tumors 6) A disorder of the k 	obin structure (sickle cell an REASED HAEMOGLOBIN): Ititudes (Physiological) ry Polycythemia) uces a falsely rise in hemoglo ease (for example, emphyser pone marrow known as polyc	obin due to increased hae na) ythemia rubra vera,		e amount of oxygen available to the body by

NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD





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

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

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TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.





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		TM
	AKUS	
EXCE	LENCE IN HEALTHCARE & DIAGNOSTIC	s

	Dr. Vinay Ch MD (Pathology & Chairman & Con		Dr. Yugam Chopra MD (Pathology) t CEO & Consultant Pathologist	
NAME	: Mrs. POOJA			
AGE/ GENDER	: 22 YRS/FEMALE : : LOOMBA HOSPITAL (AMBALA CANTT) : 01526080		ENT ID	: 1767907 : 012502240037 : 24/Feb/2025 11:33 AM : 24/Feb/2025 11:34AM
COLLECTED BY			NO./LAB NO.	
REFERRED BY			REGISTRATION DATE	
BARCODE NO.				
CLIENT CODE.	: KOS DIAGNOSTIC LAB	REPO	RTING DATE	: 24/Feb/2025 11:52AM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD,	AMBALA CANTT		
Test Name		Value	Unit	Biological Reference interval
		BLEEDING TIN	AE (BT)	
BLEEDING TIME (B'	T)	1 MIN 25 SEC	MINS	1 - 5





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NAME	: Mrs. POOJA			
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CLIENT CODE.	: KOS DIAGNOSTIC LAB	F		
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD	, AMBALA CANTT		
Test Name		Value	Unit	Biological Reference interval
		CLOTTING	TIME (CT)	
CLOTTING TIME (C by CAPILLARY TUBE N		5 MIN 10 S	EC MINS	4 - 9
		*** End Of Rep	oort ***	



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