



	Dr. Vinay Chop MD (Pathology & Mi Chairman & Consult	crobiology)	Dr. Yugam MD CEO & Consultant	(Pathology)				
NAME : Mrs. MAN	PREET KAUR							
AGE/ GENDER : 29 YRS/FE	MALE	PATIEN	T ID	: 1772114				
COLLECTED BY :		REG. NO	./LAB NO.	: 012502270028				
REFERRED BY :		REGIST	RATION DATE	: 27/Feb/2025 12:15 PM				
BARCODE NO. : 01526202			TION DATE	: 27/Feb/2025 12:16PM				
	NOSTIC LAB		ORTING DATE : 27/Feb/2025 01:02PM					
CLIENT ADDRESS : 6349/1, N	ICHOLSON ROAD, AM	BALA CANTT						
Test Name		Value	Unit	Biological Reference interval				
			01.001					
CLINICAL PATHOLOGY								
	URINE ROUT	TINE & MICROSCO	OPIC EXAMINA	ATION				
PHYSICAL EXAMINATION								
QUANTITY RECIEVED by DIP STICK/REFLECTANCE SPECTF	ROPHOTOMETRY	10	ml					
COLOUR		AMBER YELLOW		PALE YELLOW				
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY TRANSPARANCY		HAZY		CLEAR				
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY								
SPECIFIC GRAVITY by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY		1.01		1.002 - 1.030				
CHEMICAL EXAMINATION								
REACTION		NEUTRAL						
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY PROTEIN		2+		NEGATIVE (-ve)				
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY								
SUGAR by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY		Negative		NEGATIVE (-ve)				
рН		7		5.0 - 7.5				
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY BILIRUBIN		Negative		NEGATIVE (-ve)				
by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY								
NITRITE by DIP STICK/REFLECTANCE SPECTF	OPHOTOMETRY.	Negative		NEGATIVE (-ve)				
UROBILINOGEN by DIP STICK/REFLECTANCE SPECTF	ROPHOTOMETRY	Normal	EU/dL	0.2 - 1.0				
KETONE BODIES		Negative		NEGATIVE (-ve)				
by DIP STICK/REFLECTANCE SPECTF BLOOD	KUPHU I UMETRY	TRACE		NEGATIVE (-ve)				
by DIP STICK/REFLECTANCE SPECT	ROPHOTOMETRY							
ASCORBIC ACID by DIP STICK/REFLECTANCE SPECTF	ROPHOTOMETRY	NEGATIVE (-ve)		NEGATIVE (-ve)				
MICROSCOPIC EXAMINATION								
RED BLOOD CELLS (RBCs) by MICROSCOPY ON CENTRIFUGED L	IRINARY SEDIMENT	3-5	/HPF	0 - 3				

Ghopro

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Page 1 of 2

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

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CLIENT CODE.	: KOS DIAGNOSTIC LAB	REPORTIN	IG DATE	: 27/Feb/2025 01:02PM
CLIENT ADDRESS	: 6349/1, NICHOLSON ROAD, AI			
m . N		X I	T I •.	
Test Name		Value	Unit	Biological Reference interval
PUS CELLS		20-25	/HPF	0 - 5
by MICROSCOPY ON	CENTRIFUGED URINARY SEDIMENT			
EPITHELIAL CELL		2-4	/HPF	ABSENT
EPITHELIAL CELL by MICROSCOPY ON C CRYSTALS	5	2-4 NEGATIVE (-ve)	/HPF	ABSENT NEGATIVE (-ve)

by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT		
CASTS	NEGATIVE (-ve)	NEGATIVE (-ve)
by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT		
BACTERIA	NEGATIVE (-ve)	NEGATIVE (-ve)
by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT		
OTHERS	NEGATIVE (-ve)	NEGATIVE (-ve)
by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT		
TRICHOMONAS VAGINALIS (PROTOZOA)	ABSENT	ABSENT
TRICHOMONAS VAGINALIS (PROTOZOA)	ABSENT	ABSENT

by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT

*** End Of Report ***



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