

Dr. Vinay Chopra
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 Chairman & Consultant Pathologist

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 MD (Pathology)
 CEO & Consultant Pathologist

NAME	: Mr. GURDYAL	PATIENT ID	: 1778648
AGE/ GENDER	: 70 YRS/MALE	REG. NO./LAB NO.	: 012503040056
COLLECTED BY	:	REGISTRATION DATE	: 04/Mar/2025 05:27 PM
REFERRED BY	: CIVIL HOSPITAL (AMBALA CANTT)	COLLECTION DATE	: 04/Mar/2025 05:27PM
BARCODE NO.	: 01526469	REPORTING DATE	: 04/Mar/2025 07:39PM
CLIENT CODE.	: KOS DIAGNOSTIC LAB		
CLIENT ADDRESS	: 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 **22.13^H** 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 ***




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