

(A Unit of KOS Healthcare)



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

NAME : Mrs. HEENA

AGE/ GENDER : 31 YRS/FEMALE **PATIENT ID** : 1812272

COLLECTED BY : REG. NO./LAB NO. : 012503310049

 REFERRED BY
 :
 REGISTRATION DATE
 : 31/Mar/2025 11:47 AM

 BARCODE NO.
 : 01528082
 COLLECTION DATE
 : 31/Mar/2025 11:51AM

 CLIENT CODE.
 : KOS DIAGNOSTIC LAB
 REPORTING DATE
 : 31/Mar/2025 12:00PM

CLIENT ADDRESS: 6349/1, NICHOLSON ROAD, AMBALA CANTT

Test Name Value Unit Biological Reference interval

HAEMATOLOGY COMPLETE BLOOD COUNT (CBC)

RED BLOOD CELLS (RBCS) COUNT AND INDICES

RED BLOOD CELLS (RBCS) COUNT AND INDICES			
HAEMOGLOBIN (HB) by CALORIMETRIC	12.5	gm/dL	12.0 - 16.0
RED BLOOD CELL (RBC) COUNT by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	4.13	Millions/cmm	3.50 - 5.00
PACKED CELL VOLUME (PCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	38.5	%	37.0 - 50.0
MEAN CORPUSCULAR VOLUME (MCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	93	fL	80.0 - 100.0
MEAN CORPUSCULAR HAEMOGLOBIN (MCH) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	30.2	pg	27.0 - 34.0
MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	32.5	g/dL	32.0 - 36.0
RED CELL DISTRIBUTION WIDTH (RDW-CV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	14.3	%	11.00 - 16.00
RED CELL DISTRIBUTION WIDTH (RDW-SD) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER	49.7	fL	35.0 - 56.0
MENTZERS INDEX by CALCULATED	22.52	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0
GREEN & KING INDEX by CALCULATED	98.94	RATIO	BETA THALASSEMIA TRAIT: <= 65.0 IRON DEFICIENCY ANEMIA: > 65.0
WHITE BLOOD CELLS (WBCS)			
TOTAL LEHOOCYTE COLINT (TLC)	TT	/	4000 11000

TOTAL LEUCOCYTE COUNT (TLC) by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	11670 ^H	/cmm	4000 - 11000
NUCLEATED RED BLOOD CELLS (nRBCS) by AUTOMATED 6 PART HEMATOLOGY ANALYZER	NIL		0.00 - 20.00
NUCLEATED RED BLOOD CELLS (nRBCS) %	NIL	%	< 10 %



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Test Name	Value	Unit	Biological Reference interval
by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER			
DIFFERENTIAL LEUCOCYTE COUNT (DLC)			
NEUTROPHILS	76 ^H	%	50 - 70
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			20. 40
LYMPHOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	18 ^L	%	20 - 40
EOSINOPHILS	0^{L}	%	1 - 6
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	U		
MONOCYTES	6	%	2 - 12
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
BASOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	0	%	0 - 1
ABSOLUTE LEUKOCYTES (WBC) COUNT			
	**	,	2000 7500
ABSOLUTE NEUTROPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	8869 ^H	/cmm	2000 - 7500
ABSOLUTE LYMPHOCYTE COUNT	2101	/cmm	800 - 4900
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE EOSINOPHIL COUNT	$0^{ m L}$	/cmm	40 - 440
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	700	/	00 000
ABSOLUTE MONOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	700	/cmm	80 - 880
ABSOLUTE BASOPHIL COUNT	0	/cmm	0 - 110
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY			
ABSOLUTE IMMATURE GRANULOCYTE COUNT	233	/cmm	0.0 - 999.0
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY	E MA DEEDG		
PLATELETS AND OTHER PLATELET PREDICTIV	E MARKERS.		
PLATELET COUNT (PLT)	148000^{L}	/cmm	150000 - 450000
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	0.24	0/	0.10 0.26
PLATELETCRIT (PCT) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	0.24	%	0.10 - 0.36
MEAN PLATELET VOLUME (MPV)	16 ^H	fL	6.50 - 12.0
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	10		
PLATELET LARGE CELL COUNT (P-LCC)	99000 ^H	/cmm	30000 - 90000
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			



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Test Name	Value	Unit	Biological Reference interval
PLATELET LARGE CELL RATIO (P-LCR) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE	66.4 ^H	%	11.0 - 45.0
PLATELET DISTRIBUTION WIDTH (PDW)	16.5	%	15.0 - 17.0
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE			
NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD			



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KOS Diagnostic Lab (A Unit of KOS Healthcare)



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CLIENT ADDRESS : 6349/1, NICHOLSON ROAD, AMBALA CANTT

Value Unit Test Name **Biological Reference interval**

BLEEDING TIME (BT)

6 MIN 45 SEC **BLEEDING TIME (BT)**

by DUKE METHOD

MINS



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Value Unit Test Name **Biological Reference interval**

CLOTTING TIME (CT)

1 MIN 20 SEC **CLOTTING TIME (CT) MINS** by CAPILLARY TUBE METHOD



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Test Name	Value	Unit	Biological Reference interval
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PROTHROMBIN TIME STUDIES (PT/INR)

PT TEST (PATIENT) by PHOTO OPTICAL CLOT DETECTION	14.4	SECS	11.5 - 14.5
PT (CONTROL)	12	SECS	
by PHOTO OPTICAL CLOT DETECTION			
ISI by PHOTO OPTICAL CLOT DETECTION	1.1		
INTERNATIONAL NORMALISED RATIO (INR) by PHOTO OPTICAL CLOT DETECTION	1.22^{H}		0.80 - 1.20
PT INDEX by PHOTO OPTICAL CLOT DETECTION	83.33	%	

INTERPRETATION:-

- 1.INR is the parameter of choice in monitoring adequacy of oral anti-coagulant therapy. Appropriate therapeutic range varies with the disease and treatment intensity.
- 2. Prolonged INR suggests potential bleeding disorder /bleeding complications
- 3. Results should be clinically correlated.
- 4. Test conducted on Citrated Plasma

RECOMMENDED THERAPEUTIC RANGE FOR ORAL ANTI-COAGULANT THERAPY (INR)					
INDICATION		INTERNATIO	NAL NORMALIZED RATIO (INR)		
Treatment of venous thrombosis			2.0 - 3.0		
Treatment of pulmonary embolism	Low Intensity				
Prevention of systemic embolism in tissue heart valves					
Valvular heart disease					
Acute myocardial infarction					
Atrial fibrillation					
Bileaflet mechanical valve in aortic position					
Recurrent embolism					
Mechanical heart valve	High Intensity		2.5 - 3.5		
Antiphospholipid antibodies ⁺					

COMMENTS:



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The prothrombin time (PT) and its derived measures of prothrombin ratio (PR) and international normalized ratio (INR) are measures of the efficacy of the extrinsic pathway of coagulation. PT test reflects the adequacy of factors I (fibrinogen), II (prothrombin), V, VII, and X. It is used in conjunction with the activated partial thromboplastin time (aPTT) which measures the intrinsic pathway.

The common causes of prolonged prothrombin time are:

1. Oral Anticoagulant therapy.

2.Liver disease.

3.Vit K. deficiency.

4. Disseminated intra vascular coagulation.

5. Factor 5, 7, 10 or Prothrombin dificiency

*** End Of Report ***



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