

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

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 MD (Pathology)  
 CEO & Consultant Pathologist

<b>NAME</b>	: Baby. NOOR	<b>PATIENT ID</b>	: 1818472
<b>AGE/ GENDER</b>	: 8 YRS/FEMALE	<b>REG. NO./LAB NO.</b>	: 012504040050
<b>COLLECTED BY</b>	:	<b>REGISTRATION DATE</b>	: 04/Apr/2025 08:44 PM
<b>REFERRED BY</b>	:	<b>COLLECTION DATE</b>	: 04/Apr/2025 08:45PM
<b>BARCODE NO.</b>	: 01528365	<b>REPORTING DATE</b>	: 04/Apr/2025 09:05PM
<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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**CLINICAL PATHOLOGY**  
**FECAL CALPROTECTIN**

FECAL CALPROTECTIN	14.23	µg/g	< 50.0
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by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)

**INTERPRETATION**

RESULT IN mg/kg FECES	REMARKS
< 25.0	NEGATIVE
25.0 – 50.0	BORDERLINE
>50.0	POSITIVE

**NOTE:**

- 1.To avoid potential false positive results, patients should abstain from using NSAIDs for at least two weeks prior to the test
- 2.It is recommended to repeat all borderline results if clinically indicated Comments Calprotectin is a calcium-binding protein found within neutrophils which influx into the bowel during inflammation.

Calprotectin is excreted in excess into the intestinal lumen during the inflammatory process and act as a marker for inflammatory diseases of the lower gastrointestinal tract. The levels of the protein are high in cases of Inflammatory bowel diseases (IBD) but not in non-inflammatory bowel diseases e.g. Irritable bowel syndrome (IBS), therefore this test can help to differentiate between the two diseases.

**USES:**

- 1.To differentiate between IBS and IBD
- 2.To monitor the effectiveness of IBD therapy
- 3.To detect IBD relapse

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



  
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