CLIENT CODE.



KOS Diagnostic Lab (A Unit of KOS Healthcare)



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

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

: 01/Sep/2024 04:57PM

NAME : Mr. HARJINDER SINGH

AGE/ GENDER : 65 YRS/MALE **PATIENT ID** : 1598320

COLLECTED BY REG. NO./LAB NO. :042409010001

REFERRED BY **REGISTRATION DATE** : 01/Sep/2024 09:03 AM BARCODE NO. **COLLECTION DATE** : 01/Sep/2024 04:08PM : A0465382

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

: KOS DIAGNOSTIC SHAHBAD

Test Name Value Unit **Biological Reference interval**

HAEMATOLOGY

REPORTING DATE

ERYTHROCYTE SEDIMENTATION RATE (ESR)

ERYTHROCYTE SEDIMENTATION RATE (ESR) 37^H mm/1st hr 0 - 20

by MODIFIED WESTERGREN AUTOMATED METHOD

INTERPRETATION: 1. ESR is a non-specific test because an elevated result often indicates the presence of inflammation associated with infection, cancer and autoimmune disease, but does not tell the health practitioner exactly where the inflammation is in the body or what is causing it.

2. An ESR can be affected by other conditions besides inflammation. For this reason, the ESR is typically used in conjunction with other test such as C-reactive protein

3. This test may also be used to monitor disease activity and response to therapy in both of the above diseases as well as some others, such as systemic lupus erythematosus

CONDITION WITH LOW ESR

A low ESR can be seen with conditions that inhibit the normal sedimentation of red blood cells, such as a high red blood cell count (polycythaemia), significantly high white blood cell count (leucocytosis), and some protein abnormalities. Some changes in red cell shape (such as sickle cells in sickle cell anaemia) also lower the ESR. NOTE:

- ESR and C reactive protein (C-RP) are both markers of inflammation.
 Generally, ESR does not change as rapidly as does CRP, either at the start of inflammation or as it resolves.
 CRP is not affected by as many other factors as is ESR, making it a better marker of inflammation.
 If the ESR is elevated, it is typically a result of two types of proteins, globulins or fibrinogen.
 Women tend to have a higher ESR, and menstruation and pregnancy can cause temporary elevations.
 Drugs such as dextran, methyldopa, oral contraceptives, penicillamine procainamide, theophylline, and vitamin A can increase ESR, while services and quiping may decrease it. aspirin, cortisone, and quinine may decrease it



CONSULTANT PATHOLOGIST MBBS, MD (PATHOLOGY & MICROBIOLOGY)

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST





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 : 01/Sep/2024 06:40PM

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

PERIPHERAL BLOOD SMEAR

TEST NAME:

PERIPHERAL BLOOD FILM/SMEAR (PBF)

RED BLOOD CELLS (RBC'S):

RBCs mostly appear normocytic & normochromic. No polychromatic cells or normoblasts seen.

WHITE BLOOD CELLS (WBC'S):

No immature leucocytes seen.

PLATELETS:

Platelets appear adequate.

HEMOPARASITES:

NOT SEEN.

IMPRESSION:

Normocytic normochromic picture.

*** End Of Report ***



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

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



KOS Central Lab: 6349/1, Nicholson Road, Ambala Cantt -133 001, Haryana
KOS Molecular Lab: IInd Floor, Parry Hotel, Staff Road, Opp. GPO, Ambala Cantt -133 001, Haryana
0171-2643898, +91 99910 43898 | care@koshealthcare.com | www.koshealthcare.com