A PIONEER DIAGNOSTIC CENTRE

【 0171-2532620, 8222896961 🛛 🖾 pkrjainhealthcare@gmail.com

NAME	: Mr. PARNAV					
AGE/ GENDER	: 8 YRS/MALE		PATIENT ID	: 1362700		
COLLECTED BY	:	REG. NO./LAB NO. REGISTRATION DATE		: 122407180021 : 18/Jul/2024 03:49 PM		
REFERRED BY	:					
BARCODE NO.	: 12503668		COLLECTION DATE	: 18/Jul/2024 04:00PM		
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INSTITUTE		REPORTING DATE	18/Jul/2024 05:14PM		
CLIENT ADDRESS	NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA					
Test Name		Value	Unit	Biological Reference interval		
		ΗΔΕΝ	ATOLOGY			
	COM					
	BCS) COUNT AND INDICES		OOD COUNT (CBC)			
HAEMOGLOBIN (HB)		14.3	gm/dL	12.0 - 16.0		
by CALORIMETRIC RED BLOOD CELL (RE	,	4.75	Millions/cr	nm 3.50 - 5.50		
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE PACKED CELL VOLUME (PCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MEAN CORPUSCULAR VOLUME (MCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MEAN CORPUSCULAR HAEMOGLOBIN (MCH) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER		38.7	%	35.0 - 49.0		
		81.5 P	KR fl	80.0 - 100.0		
		30.1	pg	27.0 - 34.0		
		37 ^H	g/dL	32.0 - 36.0		
RED CELL DISTRIBUT	RED CELL DISTRIBUTION WIDTH (RDW-CV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER		%	11.00 - 16.00		
	ION WIDTH (RDW-SD) UTOMATED HEMATOLOGY ANALYZER	44.5	fL	35.0 - 56.0		
MENTZERS INDEX by CALCULATED		17.16	RATIO	BETA THALASSEMIA TRAIT: < 13.0 IRON DEFICIENCY ANEMIA: >13.0		
GREEN & KING INDE by CALCULATED	X	23.16	RATIO	BETA THALASSEMIA TRAIT: < = 65.0 IRON DEFICIENCY ANEMIA: > 65.0		
WHITE BLOOD CELLS	<u>S (WBCS)</u>					
TOTAL LEUCOCYTE C by FLOW CYTOMETRY	BY SF CUBE & MICROSCOPY	8620	/cmm	4000 - 12000		
NEUTROPHILS	Y BY SF CUBE & MICROSCOPY	45 ^L	%	50 - 70		
LYMPHOCYTES		46 ^H	%	20 - 45		
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY EOSINOPHILS		4	%	1 - 6		

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.

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Test Name		Value	Unit	Biological Reference interval	
by FLOW CYTOMETR	Y BY SF CUBE & MICROSCOPY				
MONOCYTES		5	%	3 - 12	
BASOPHILS	Y BY SF CUBE & MICROSCOPY	0	%	0 - 1	
	Y BY SF CUBE & MICROSCOPY	U	/0	0-1	
ABSOLUTE LEUKOC					
ABSOLUTE NEUTROPHIL COUNT		3879	/cmm	2000 - 7500	
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY					
ABSOLUTE LYMPHOCYTE COUNT		3965	/cmm	800 - 4900	
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY ABSOLUTE EOSINOPHIL COUNT		245	lamm	10 110	
	YHIL COUNT Y BY SF CUBE & MICROSCOPY	345	/cmm	40 - 440	
ABSOLUTE MONOCYTE COUNT		431	/cmm	80 - 880	
by FLOW CYTOMETR	Y BY SF CUBE & MICROSCOPY				
ABSOLUTE BASOPHIL COUNT		0	/cmm	0 - 110	
-	Y BY SF CUBE & MICROSCOPY HER PLATELET PREDICTIVE MARKE	29			
			1	150000 450000	
PLATELET COUNT (P	LI) FOCUSING, ELECTRICAL IMPEDENCE	304000	/cmm	150000 - 450000	
PLATELETCRIT (PCT)		0.25	%	0.10 - 0.36	
	FOCUSING, ELECTRICAL IMPEDENCE				
MEAN PLATELET VO		8	fL	6.50 - 12.0	
,	FOCUSING, ELECTRICAL IMPEDENCE	51000	lamm	30000 - 90000	
PLATELET LARGE CEI by HYDRO DYNAMIC I	LL COUNT (P-LCC) FOCUSING, ELECTRICAL IMPEDENCE	51000	/cmm	30000 - 30000	
PLATELET LARGE CE	LL RATIO (P-LCR)	16.7	%	11.0 - 45.0	
by HYDRO DYNAMIC I	FOCUSING, ELECTRICAL IMPEDENCE				
PLATELET DISTRIBU		16	%	15.0 - 17.0	
	FOCUSING, ELECTRICAL IMPEDENCE JCTED ON EDTA WHOLE BLOOD				
NOTE: LEST CONDU	CIED ON EDIA WHOLE BLOOD				



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Test Name		Value	Unit	Biological Reference interval
	ERYTI	HROCYTE SEDIMEN	TATION RATE (ESF	۶)
	MENTATION RATE (ESR) RGREN AUTOMATED METHOD	21 ^H	mm/1st h	nr 0 - 20

(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:

1. ESR and C - reactive protein (C-RP) are both markers of inflammation.

 2. Generally, ESR does not change as rapidly as does CRP, either at the start of inflammation or as it resolves.
3. CRP is not affected by as many other factors as is ESR, making it a better marker of inflammation.
4. If the ESR is elevated, it is typically a result of two types of proteins, globulins or fibrinogen.
5. Women tend to have a higher ESR, and menstruation and pregnancy can cause temporary elevations.
6. Drugs such as dextran, methyldopa, oral contraceptives, penicillamine procainamide, theophylline, and vitamin A can increase ESR, while aspirite cortisone, and quipipe may decrease it. aspirin, cortisone, and quinine may decrease it





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Test Name		Value	Unit	Biological Reference interva
		CLINICAL PA	THOLOGY	
	URINE R	OUTINE & MICRO	OSCOPIC EXAMINAT	ION
PHYSICAL EXAMINATI	<u>ON</u>			
QUANTITY RECIEVED by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY COLOUR by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY TRANSPARANCY by DIP STICK/REFLECTANCE SPECTROPHOTOMETRY SPECIFIC GRAVITY		10	ml	
		PALE YELLOW	1	PALE YELLOW
		CLEAR		CLEAR
		ULEAK		ULEAR
		1.02		1.002 - 1.030
	NCE SPECTROPHOTOMETRY			
CHEMICAL EXAMINAT	ION			
REACTION		ACIDIC		
	NCE SPECTROPHOTOMETRY	TDACE		
PROTEIN	NCE SPECTROPHOTOMETRY	TRACE		NEGATIVE (-ve)
SUGAR		NEGATIVE (-v	e)	NEGATIVE (-ve)
	NCE SPECTROPHOTOMETRY			
pH		5.5		5.0 - 7.5
•	NCE SPECTROPHOTOMETRY	NEGATIVE (-v		NEGATIVE (-ve)
BILIRUBIN by DIP STICK/REFLECTA	NCE SPECTROPHOTOMETRY	NEGATIVE (-V	e)	NEGATIVE (-VC)
NITRITE	-		e)	NEGATIVE (-ve)
	ANCE SPECTROPHOTOMETRY.	,		
UROBILINOGEN		NOT DETECT	ED EU/dL	0.2 - 1.0
KETONE BODIES	NCE SPECTROPHOTOMETRY	NEGATIVE (-v	e)	NEGATIVE (-ve)
	NCE SPECTROPHOTOMETRY	NEORINE (-V		
BLOOD		NEGATIVE (-v	e)	NEGATIVE (-ve)
	NCE SPECTROPHOTOMETRY			
ASCORBIC ACID		NEGATIVE (-v	e)	NEGATIVE (-ve)
	NCE SPECTROPHOTOMETRY			

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NEGATIVE (-ve)

NEGATIVE (-ve)

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RED BLOOD CELLS (F	RBCs) CENTRIFUGED URINARY SEDIMENT	NEGATIVE (-ve)	/HPF	0 - 3	
PUS CELLS by MICROSCOPY ON C	CENTRIFUGED URINARY SEDIMENT	3-4	/HPF	0 - 5	
EPITHELIAL CELLS by MICROSCOPY ON C	CENTRIFUGED URINARY SEDIMENT	1-2	/HPF	ABSENT	
CRYSTALS by MICROSCOPY ON C	CENTRIFUGED URINARY SEDIMENT	NEGATIVE (-ve)		NEGATIVE (-ve)	
CASTS		NEGATIVE (-ve)		NEGATIVE (-ve)	

by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT BACTERIA NEGATIVE (-ve) by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT NEGATIVE (-ve) OTHERS by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT

TRICHOMONAS VAGINALIS (PROTOZOA) by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT

* * * End Of Report *

ABSENT



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