



# P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

## A PIONEER DIAGNOSTIC CENTRE

☎ 0171-2532620, 8222896961

✉ pkrjainhealthcare@gmail.com

**NAME** : Mrs. NITIKA  
**AGE/ GENDER** : 23 YRS/FEMALE  
**COLLECTED BY** :  
**REFERRED BY** :  
**BARCODE NO.** : 12503995  
**CLIENT CODE.** : P.K.R JAIN HEALTHCARE INSTITUTE  
**CLIENT ADDRESS** : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA

**PATIENT ID** : 1568540  
**REG. NO./LAB NO.** : 122408050020  
**REGISTRATION DATE** : 05/Aug/2024 01:14 PM  
**COLLECTION DATE** : 05/Aug/2024 01:16PM  
**REPORTING DATE** : 05/Aug/2024 04:25PM

Test Name	Value	Unit	Biological Reference interval
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### CLINICAL PATHOLOGY

#### URINE ROUTINE & MICROSCOPIC EXAMINATION

##### PHYSICAL EXAMINATION

QUANTITY RECIEVED	5	ml	
COLOUR	PALE YELLOW		PALE YELLOW
TRANSPARANCY	TURBID		CLEAR
SPECIFIC GRAVITY	1.02		1.002 - 1.030

##### CHEMICAL EXAMINATION

REACTION	ACIDIC		
PROTEIN	1+		NEGATIVE (-ve)
SUGAR	NEGATIVE (-ve)		NEGATIVE (-ve)
pH	5.5		5.0 - 7.5
BILIRUBIN	NEGATIVE (-ve)		NEGATIVE (-ve)
NITRITE	NEGATIVE (-ve)		NEGATIVE (-ve)
UROBILINOGEN	POSITIVE (+ve)	EU/dL	0.2 - 1.0
KETONE BODIES	NEGATIVE (-ve)		NEGATIVE (-ve)
BLOOD	NEGATIVE (-ve)		NEGATIVE (-ve)
ASCORBIC ACID	NEGATIVE (-ve)		NEGATIVE (-ve)

##### MICROSCOPIC EXAMINATION



  
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CONSULTANT PATHOLOGIST  
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RED BLOOD CELLS (RBCs) <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)	/HPF	0 - 3
PUS CELLS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	8-10	/HPF	0 - 5
EPITHELIAL CELLS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	10-12	/HPF	ABSENT
CRYSTALS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
CASTS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
BACTERIA <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
OTHERS <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	NEGATIVE (-ve)		NEGATIVE (-ve)
TRICHOMONAS VAGINALIS (PROTOZOA) <i>by MICROSCOPY ON CENTRIFUGED URINARY SEDIMENT</i>	ABSENT		ABSENT

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



  
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