PKR JAIN HEALTHCARE INSTITUTE NASIRPUR, Hissar Road, AMBALA CITY- (Haryana) A PIONEER DIAGNOSTIC CENTRE

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

NAME	: Mr. GURPAL SINGH				
AGE/ GENDER	: 16 YRS/MALE		PATIENT ID	: 1572262	
COLLECTED BY	:		REG. NO./LAB NO.	: 122408060019	
REFERRED BY	:	REGISTRATION DATE COLLECTION DATE UTE REPORTING DATE		: 06/Aug/2024 12:31 PM : 06/Aug/2024 12:58PM : 06/Aug/2024 01:07PM	
BARCODE NO.	: 12504016				
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INSTITU				
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMBA	LA CITY - H	ARYANA		
Test Name		Value	Unit	Biological Reference interval	
		HAEN	IATOLOGY		
	CON	NPLETE BL	OOD COUNT (CBC)		
RED BLOOD CELLS (R	BCS) COUNT AND INDICES				
HAEMOGLOBIN (HB) by CALORIMETRIC		14.5	gm/dL	12.0 - 17.0	
RED BLOOD CELL (RB		5.07 ^H	Millions/ci	mm 3.50 - 5.00	
by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE PACKED CELL VOLUME (PCV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER		42.8	%	35.0 - 49.0	
MEAN CORPUSCULA	R VOLUME (MCV) UTOMATED HEMATOLOGY ANALYZER	84.3	KR fl	80.0 - 100.0	
	R HAEMOGLOBIN (MCH) UTOMATED HEMATOLOGY ANALYZER	28.6	pg	27.0 - 34.0	
MEAN CORPUSCULAR HEMOGLOBIN CONC. (MCHC) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER RED CELL DISTRIBUTION WIDTH (RDW-CV) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER RED CELL DISTRIBUTION WIDTH (RDW-SD) by CALCULATED BY AUTOMATED HEMATOLOGY ANALYZER		33.9	g/dL	32.0 - 36.0	
		13.3	%	11.00 - 16.00	
		42.9	fL	35.0 - 56.0	
MENTZERS INDEX by CALCULATED		16.63	RATIO	BETA THALASSEMIA TRAIT: < 13. IRON DEFICIENCY ANEMIA: >13.0	
GREEN & KING INDE by CALCULATED	X	22.11	RATIO	BETA THALASSEMIA TRAIT: < = 65.0 IRON DEFICIENCY ANEMIA: > 65.	
WHITE BLOOD CELLS	<u>s (WBCS)</u>				
TOTAL LEUCOCYTE C by FLOW CYTOMETRY DIFFERENTIAL LEUCO	Y BY SF CUBE & MICROSCOPY	12350 ^H	/cmm	4000 - 11000	
NEUTROPHILS		77 ^H	%	50 - 70	
by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY LYMPHOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		17 ^L	%	20 - 40	

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

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST

440 Dated 17.5.2012 u/s 80 G OF INCOME TAX ACT. PAN NO. AAAAP1600. **REPORT ATTRACTS THE CONDITIONS PRINTED OVERLEAF (P.T.O.)**



PKR JAIN HEALTHCARE INSTITUTE NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)



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

NAME	: Mr. GURPAL SINGH				
AGE/ GENDER	: 16 YRS/MALE		PATIENT ID	: 1572262	
COLLECTED BY	:		REG. NO./LAB NO.	: 122408060019	
REFERRED BY	:		REGISTRATION DATE	: 06/Aug/2024 12:31 PM	
BARCODE NO.	: 12504016 : P.K.R JAIN HEALTHCARE INSTITUTE		COLLECTION DATE	: 06/Aug/2024 12:58PM	
CLIENT CODE.			REPORTING DATE	: 06/Aug/2024 01:07PM	
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMB.	ALA CITY - HARYANA		-	
Test Name		Value	Unit	Biological Reference interval	
EOSINOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY MONOCYTES by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		OL	%	1-6	
		6	%	2 - 12	
BASOPHILS by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY ABSOLUTE LEUKOCYTES (WBC) COUNT		0	%	0 - 1	
ABSOLUTE NEUTROPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY ABSOLUTE LYMPHOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		9510 ^H	/cmm	2000 - 7500	
		2100 ^L	/cmm	800 - 4900	
ABSOLUTE EOSINOPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		o ^l P	KR /cmm	40 - 440	
ABSOLUTE MONOCYTE COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		741	/cmm	80 - 880	
ABSOLUTE BASOPHIL COUNT by FLOW CYTOMETRY BY SF CUBE & MICROSCOPY		0	/cmm	0 - 110	
-	HER PLATELET PREDICTIVE MARKE	<u>RS.</u>			
PLATELET COUNT (PLT) by Hydro dynamic focusing, electrical impedence		311000	/cmm	150000 - 450000	
PLATELETCRIT (PCT) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE		0.24	%	0.10 - 0.36	
MEAN PLATELET VOLUME (MPV) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE		8	fL	6.50 - 12.0	
PLATELET LARGE CELL COUNT (P-LCC) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE		42000	/cmm	30000 - 90000	
PLATELET LARGE CELL RATIO (P-LCR) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE		13.4	%	11.0 - 45.0	
PLATELET DISTRIBUTION WIDTH (PDW) by HYDRO DYNAMIC FOCUSING, ELECTRICAL IMPEDENCE NOTE: TEST CONDUCTED ON EDTA WHOLE BLOOD		15.5	%	15.0 - 17.0	





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

DR.YUGAM CHOPRA CONSULTANT PATHOLOGIST

440 Dated 17.5.2012 u/s 80 G OF INCOME TAX ACT. PAN NO. AAAAP1600. **REPORT ATTRACTS THE CONDITIONS PRINTED OVERLEAF (P.T.O.)**





PKR JAIN HEALTHCARE INSTITUTE NASIRPUR, Hissar Road, AMBALA CITY- (Haryana) A PIONEER DIAGNOSTIC CENTRE

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

NAME	: Mr. GURPAL SINGH							
AGE/ GENDER	: 16 YRS/MALE	PAT	IENT ID	: 1572262				
COLLECTED BY	:	REG	NO./LAB NO.	: 122408060019 : 06/Aug/2024 12:31 PM : 06/Aug/2024 12:58PM : 06/Aug/2024 01:44PM				
REFERRED BY	:	REG	ISTRATION DATE					
BARCODE NO.	: 12504016	COL	ECTION DATE DRTING DATE					
CLIENT CODE.	: P.K.R JAIN HEALTHCARE IN	NSTITUTE REP						
CLIENT ADDRESS : NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA								
Test Name		Value	Unit	Biological Reference interval				
		MMUNOPATHOLO	GY/SEROLOGY					
		WIDAL SLIDE AGGLU	TINATION TEST					
SALMONELLA TYPHI O		1 : 80	TITRE	1:80				
by SLIDE AGGLUTINATION SALMONELLA TYPHI H by SLIDE AGGLUTINATION								
	Н	1 : 40	TITRE	1 : 160				
by SLIDE AGGLUTINA	H TION	1 : 40 NIL	TITRE	1 : 160 1 : 160				

INTERPRETATION:

1. Titres of 1:80 or more for "O" agglutinin is considered significant.

2. Titres of 1:160 or more for "H" agglutinin is considered significant.

LIMITATIONS:

TEST PERFORMED AT KOS DIAGNOSTIC LAB. AMBALA CANTT

1.Agglutinins usually appear by 5th to 6th day of illness of enteric fever, hence a negative result in early stage is inconclusive. The titre then rises till 3rd or 4th week, after which it declines gradually.

2.Lower titres may be found in normal individuals.

3.A single positive result has less significance than the rising agglutination titre, since demonstration of rising titre four or more in 1st and 3rd week is considered as a definite evidence of infection.

4.A simultaneous rise in H agglutinins is suggestive of paratyphoid infection.

NOTE:

1. Individuals with prior infection or immunization with TAB vaccine may develop an ANAMNESTIC RESPONSE (False-Positive) during an unrelated fever i.e High titres of antibodies to various antigens. This may be differentiated by repitition of the test after a week.

2. The anamnestic response shows only a transient rise, while in enteric fever rise is sustained.

3.H agglutinins tend to persist for many months after vaccination but O agglutinins tend to disappear sooner i.e within 6 months. Therefore rise in Oagglutinins indicate recent infection.

*** End Of Report ***





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

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

440 Dated 17.5.2012 u/s 80 G OF INCOME TAX ACT. PAN NO. AAAAP1600. **REPORT ATTRACTS THE CONDITIONS PRINTED OVERLEAF (P.T.O.)**

