



P K R JAIN HEALTHCARE INSTITUTE

NASIRPUR, Hissar Road, AMBALA CITY- (Haryana)

A PIONEER DIAGNOSTIC CENTRE

☎ 0171-2532620, 8222896961 ✉ pkrjainhealthcare@gmail.com

TEST PERFORMED AT KOS DIAGNOSTIC LAB, AMBALA CANTT.

NAME	: Mr. KULDEEP SINGH	PATIENT ID	: 1722600
AGE/ GENDER	: 41 YRS/MALE	REG. NO./LAB NO.	: 122501130006
COLLECTED BY	:	REGISTRATION DATE	: 13/Jan/2025 11:05 AM
REFERRED BY	:	COLLECTION DATE	: 13/Jan/2025 11:07AM
BARCODE NO.	: 12506506	REPORTING DATE	: 13/Jan/2025 03:57PM
CLIENT CODE.	: P.K.R JAIN HEALTHCARE INSTITUTE		
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD, AMBALA CITY - HARYANA		

Test Name	Value	Unit	Biological Reference interval
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IMMUNOPATHOLOGY/SEROLOGY

HELICOBACTER PYLORI ANTIGEN DETECTION - STOOL

HELICOBACTER ANTIGEN DETECTION - STOOL by CLIA (CHEMILUMINESCENCE IMMUNOASSAY)	0.29	INDEX	NEGATIVE: <0.90 EQUIVOCAL: 0.90-1.10 POSITIVE: >=1.10
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INTERPRETATION:

CLINICAL BACKGROUND:

H pylori infection is associated with peptic ulcer disease (duodenal and gastric) and chronic active gastritis. H pylori infection is also an independent risk factor for gastric cancer and primary malignant lymphoma of the stomach. However, many people who are infected with H. pylori may not show any symptoms of the disease.

NOTE:

1. It is a chemiluminescent Immunoassay (CLIA) for detection of Helicobacter pylori antigen in faecal samples and can be used for diagnosis, therapeutic monitoring and to assess eradication of H. pylori infection post treatment.
2. It is a qualitative test.
3. A positive result (antigen detected) is indicative of H pylori presence in stool sample.
4. A negative result does not exclude the possibility of Helicobacter pylori infection.
5. Assay results should be utilized in conjunction with other clinical and laboratory data to assist the clinician in making individual patient management decisions.
6. Antimicrobials, proton pump inhibitors and bismuth preparations are known to suppress H.pylori and if ingested may give a false negative result.
7. Fecal specimens preserved in 10 % formalin, merthiolate formalin, sodium acetate formalin, or polyvinyl alcohol or specimens that are in transport media such as Cary Blair or C & S cannot be used.



DR.VINAY CHOPRA
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CLINICAL PATHOLOGY

STOOL ROUTINE AND MICROSCOPIC EXAMINATION

PHYSICAL EXAMINATION

COLOUR / APPEARANCE	BROWNISH YELLOW	YELLOWISH BROWN
CONSISTENCY	LOOSE	SEMI- FORMED/FORMED
PUS	ABSENT	ABSENT
MUCOUS	ABSENT	ABSENT
BLOOD	NEGATIVE (-ve)	NEGATIVE (-ve)
PARASITES	NOT SEEN	NOT SEEN

MICROSCOPIC EXAMINATION

PUS CELLS by MICROSCOPY	0-2	/HPF	0 - 5
RED BLOOD CELLS (RBCs) by MICROSCOPY	NEGATIVE (-ve)	/HPF	0 - 3
OVA by MICROSCOPY	NOT SEEN		NOT SEEN
CYSTS by MICROSCOPY	NOT SEEN		NOT SEEN
STOOL FOR VIBRIO CHOLERA by MICROSCOPY	NO DARTING MOTILITY SEEN		
STOOL FOR FAT GLOBULES by MICROSCOPY	NOT SEEN		NOT SEEN

*** End Of Report ***



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