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

A PIONEER DIAGNOSTIC CENTRE

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

NAME	: Mr. ANISH KUMAR					
AGE/ GENDER	: 33 YRS/MALE	PAT	IENT ID	: 1783909		
COLLECTED BY	:	REG.	NO./LAB NO.	: 1225030800	27	
REFERRED BY	:	REG	STRATION DATE	:08/Mar/2025	03:47 PM	
BARCODE NO.	: 12507420	COLI	LECTION DATE	:08/Mar/2025	03:59PM	
CLIENT CODE.	: P.K.R JAIN HEALTHCARE II	NSTITUTE REP	REPORTING DATE : 10/Mar/2025 08:28A		08:28AM	
CLIENT ADDRESS	: NASIRPUR, HISSAR ROAD,	AMBALA CITY - HARYAN	A			
Test Name		Value	Unit	Biolog	gical Reference interval	
		MOLECULAR P A	THOLOGY			
	HEPATITIS C VIRAI			FATIVE): RT-F	PCR	
HEPATITIS C VIRUS	G (HCV) RNA (QUANTITATI		IU/mL		TECTABLE OR < 30.0	
EDTA PLASMA						
by RT-PCR (REAL TIME-POLYMERASE CHAIN REACTION LOG VALUE		5.1 ^H	LOG IU/1	nL < 1.47	7	
	-POLYMERASE CHAIN REACTION) J.1				
NO. OF HCV RNA VIRAL COPIES by RT-PCR (REAL TIME-POLYMERASE CHAIN REACTION		416704.5 ^H	COPIES/	mL < 80.0)	
DETECTION LIMIT			IU/mL	< 30.0)	
· ·	-POLYMERASE CHAIN REACTION					
<u>INTERPRETATION:</u> RESULT II	l II /ml	RF	MARKS			
< 30		RNA Below the detection		not present		
>= 30.0 O		< 40 IU/mL quantitation not possible since the quantitative result is				
	0		range of the assay			
>= 40 ANE	111.10	HCV RNA Detected within the linear range of the assay				
>= 4 X	10 ⁹ HCV RNA Detected above the linear range of the assay n infectious disease caused by Hepatitis C virus (HCV), which can lead to inflammation and significant					
•		ed by Hepatitis C virus	s (HCV), which car	i lead to inflami	mation and significant	
damage in the live						
	dominantly infects the cel				. During the acute pha	
	al infection of HCV, it is g					
3. About 85 % of t	he acute infections becor	ne chronic and the re	maining naturally	get cured. In rai	re cases, acute hepatit	

is accompanied by jaundice, malaise, weakness and anorexia. 4. It is estimated that 74 to 86 % of individuals with the acute infection develop persistent viremia, which subsequently leads to chronic infection and possibly to cirrhosis or hepatocellular carcinoma. The conventional diagnostic methods include serological testing and liver biopsy. Since HCV cannot be cultured in the clinical laboratory, a sensitive molecular testing is needed to confirm the presence of the virus such as quantitative real-time PCR.

NOTE:

Sensitivity: 30 IU/ml

Sensitivity & Dynamic range: 4 X 10⁹

A "DETECTED" result will be reported with quantification in IU/ml. It indicates the degree of active HCV viral replication in



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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.)





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Test Name	Value	Unit	Biological Reference interval

the patient.

A "LESS THAN DETECTABLE LIMIT" result indicates that either absence of HCV RNA in patient~s specimen or HCV RNA level is below the lower limit of quantification of this assay.

A "Inconclusive Result" indicates that inhibitory substances may be present in the specimen and collection and testing of a new specimen is recommended.

CONVERSION FACTOR FOR COPIES: Result (copies/ml) = Result (IU/ml) x 2.7

METHODOLOGY DETAILS:

1. HCV RNA is extracted from plasma by US FDA approved Automatic Extraction machine based on magnetic bead technology.

2. Purified RNA is then amplified and quantified using CE- IVD approved Real time PCR.

3. Extraction and Amplification controls (IC) are incorporated in each run to ensure more accurate and precise detection of RNA

*** End Of Report ***



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